



SITE PLAN APPLICATION
City of Central Point Planning Department

DATE STAMP
FOR OFFICE USE ONLY

APPLICANT INFORMATION:

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: Business: _____ Residence: _____
E-mail Address: _____

AGENT INFORMATION:

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: Business: _____ Residence: _____
E-mail Address: _____

OWNER OF RECORD: (Attach Separate Sheet If More Than One):

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: Business: _____ Residence: _____

PROJECT DESCRIPTION:

Type of Development: _____
Mixed use: Yes No
Township: _____ Range: _____ Section: _____ Tax Lot(s): _____
Address: _____ Zoning District: _____
Project Acreage: _____
Number of Dwelling Units: _____
Non-Sale Area Sq. Footage _____ + Sale Area Sq. Footage _____ = Gross Fr. Area _____
Number of Parking Spaces: _____

PREAPPLICATION CONFERENCE:

Has a pre-application meeting been held for the proposed development? Yes No
Pre-application File No.: _____

***Note:** Pre-application Conferences are required for some Type II applications and are required for all Type III applications.*

REQUIRED SUBMITTALS:

- Application Form
- Application Fee (See Current Fee Schedule)
- Legal Description
- Written Authority from Property Owner if Agent in application process
- Written Findings of Fact denoting compliance with CPMC 17.65, 17.66, 17.67, 17.72 and 17.75 as applicable (Type II, see Section 17.05.300(B-2b)) (Type III, see Section 17.05.400(B-2b))
- Site Plan, Architectural Elevations, and Landscape and Irrigation Plan
 - Three (3) Copies Drawn to Scale
 - Three (3) reduced copies (8 1/2 x 11)
 - PDF
- Preliminary** Stormwater Management Plan approval from Rogue Valley Sewer Services. Location and design of stormwater facilities shall be shown on the Site and Landscape Plan at a minimum.
- Mailing labels for all properties within 250 foot perimeter of project

I HEREBY STATE THAT THE FACTS RELATED IN THE ABOVE APPLICATION AND THE PLANS AND DOCUMENTS SUBMITTED HERewith ARE TRUE, CORRECT, AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

I certify that I am the: Property Owner -or- Authorized Agent of Project Site Owner

Signature: _____ Date: _____

If any wetlands exist on the site, it is the applicant's responsibility to apply for a permit to the Division of State Lands before any site work begins.

FOR PLANNING DEPARTMENT USE ONLY

Application Accepted As Complete on: _____ Land Use Case File No. _____
120th Day for Land Use or Limited Land Use Decision: _____
Wetlands Check: _____