

# BAKER CITY-COUNTY PLANNING DEPARTMENT



1995 Third Street, Suite 131  
 Baker City, OR 97814  
 Phone: (541) 523-8219  
 Fax: (541) 523-5925



File No. _____
Applicant: _____
Received By: _____
Date Submitted: _____
County Planning: 101-131-3404105
Fee Collected: \$25.00
Date Paid: _____
Receipt By: _____

## ZONING CLEARANCE

MAKE CHECKS PAYABLE TO: **BAKER COUNTY**

PROPOSED USE: \_\_\_\_\_

APPLICANT INFORMATION			PROPERTY OWNER INFORMATION		
Last Name	First	MI	Last Name	First	MI
Mailing Address			Mailing Address		
Physical Address			Physical Address		
City	State	Zip	City	State	Zip
Telephone			Telephone		

**PROPERTY INFORMATION** Township \_\_\_\_\_ Range \_\_\_\_\_ Section \_\_\_\_\_ Tax Lot \_\_\_\_\_ Ref. # \_\_\_\_\_

ZONE \_\_\_\_\_ Physical Address: \_\_\_\_\_

If proposed use is an accessory structure, is it attached to the primary building/dwelling? YES  NO

### SIGNATURE AND CONSENT

- I understand that this approval will not modify the maintenance of, or snow removal on, any County access road(s) to this parcel.
- I hereby certify that all work to be performed shall be in accordance with all governing laws and rules.
- I understand that the approval herein, if granted, represents only land use approval of my building permit and that a copy of this land use approval must be attached to the building permit form issued by the Building Department.
- I understand and agree that my land use approval may be revoked if I do not comply with the approved Site Plan and Conditions of Approval that may be contained herein.
- Planning approval is valid for a period of 1 year from the date of approval. I understand that any work must be completed within this time period. I understand that I may apply for an *Extension of Time* if I am unable to complete the Conditions of Approval within the allotted time frame. I understand that an *Extension of Time* application must be submitted prior to the expiration of the final approval.
- I am the property owner and I am doing my own work **or** I am an authorized agent of the property owner.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Lien Holders Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Property Owner(s) Signature(s): \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Meets all Setbacks	-----	YES	NO		
Measure 49 or Measure 37	-----	YES	NO	DATE	File #
Flood Zone	-----	YES	NO	MAP #	ZONE
Wetlands	-----	YES	NO	DETAILS	

- OFFICE USE -



# SITE PLAN

*Please include the following features in the Site Plan:*

- |  |  |
|--|--|
| <ul style="list-style-type: none"><li>• Property boundaries and dimensions</li><li>• Proposed and existing structures with dimensions and the distance from all property lines.</li><li>• If known, the location of existing wells and septic systems (i.e. tanks, drain fields).</li><li>• Width and names of roads used to provide access to parcel.</li></ul> | <ul style="list-style-type: none"><li>• Existing or proposed driveway access, including turn-out points from roadway.</li><li>• Any easements or right-of-ways.</li><li>• Approximate location of any unusual topographical features.</li><li>• Location of any creeks, streams, ponds, springs, and irrigation ditches on the parcel.</li></ul> |
|--|--|