



Permit No. CU		
0 - 5,000 sq.ft.		\$1,360.00
5,000 to 10,000 sq.ft.		\$2,360.00
10,000 to 20,000 sq.ft.		\$3,360.00
Over 20,000 sq.ft.		\$5,360.00
(AN ADDITIONAL 10% CODE COMPLIANCE FEE WILL BE CHARGED)		

Crook County Planning Department
 300 N.E. Third Street, Room 12, Prineville, OR 97754
 Phone: 541-447-8156 / Fax: 541-416-3905

Conditional Use Application – Commercial / Industrial

NOTICE TO ALL APPLICANTS

IMPORTANT NOTICE: The Crook County Planning Department is required to review all applications for accuracy and to determine whether the staff and/or the Planning Commission have the information needed to make a decision. County Ordinances allow the County 30 days to determine whether the application is complete. Within that 30-day period, the Planning Department will request additional information, if necessary. A decision on your application will be postponed until the information is received. State law requires that all information to support an application be available for public inspection at our office 20-days before a public hearing. Any information submitted after this date may require a postponement of the hearing date if necessary. **Please make sure your application is complete.**
The burden of proof lies with the applicant.

PROPERTY OWNER

Last Name: _____ First Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Day-time phone: (_____) _____ - _____ Cell phone:(_____) _____ - _____

Email: _____

AGENT/REPRESENTATIVE (MUST SIGN THE ATTACHED LETTER OF AUTHORIZATION)

Last Name: _____ First Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Day-time phone: (_____) _____ - _____ Cell Phone:(_____) _____ - _____

Email: _____

PROPERTY LOCATION

Township _____ South, Range _____ East, Section(s) _____ Tax Lot(s) _____

Physical address of subject property: _____

Size of property: _____ acres Zoning: _____

Subdivision name, if applicable: _____

REQUEST

I hereby make application to the Crook County Planning Commission for a Conditional Use Permit to secure authorization for:

SERVICES AND IMPROVMENTS

- 1. **Water** will be supplied by:
 - _____ Community system (**need sign-off**)
 - _____ Other (specify) _____
 - _____ Existing Individual Well
 - _____ Proposed Individual Well
 - _____ Shared well with: Map # T _____ R _____ Sec _____ Tax lots _____

Water Community System

Authorized Signature: _____ **Date:** _____

Print Name: _____ **Phone:** _____

(or) a signed authorized letter must be attached to this application. (No exceptions)

- 2. **Sewage Disposal** will be disposed by:
 - _____ Septic system:
 - a. _____ Copy of Site Evaluation Report must be attached **OR**
 - b. _____ Copy of Authorization Notice must be attached
 - _____ Other (specify) _____
 - _____ Community Drain field:

Sewage Disposal

Authorized Signature: _____ **Date:** _____

Print Name: _____ **Phone:** _____

(or) a signed authorized letter must be attached to this application. (No exceptions)

3. Located in Fire Protection District: Yes _____ or No _____

- 4. Other Services, public and private:
 - ___ Power, Company name _____
 - ___ Phone, Company name _____
 - ___ Other, _____

ROADS

Access to property: County _____ Public _____ *Private _____ State _____ (check one only)
Existing _____ and/or Proposed _____

* **Note:** If private easement, provide **legal recorded documentation.**

IRRIGATION WATER RIGHTS

A sign-off from State Water-master and/or the relevant irrigation district is required.

Location of all existing water rights, number of acres, and proposed division of water rights.

If the property has irrigation water rights, who is the supplier:

- _____ Central Oregon Irrigation District (541-548-6047)
- _____ Ochoco Irrigation District (541-447-6449)
- _____ Water Resources Department (541-388-6669)
- _____ People's Irrigation District (541-447-7797)
- _____ Other: _____

1. Does the property have irrigation water right? Yes _____ No _____
2. If yes, what is the amount of acres of irrigation water right? _____ acres.
Amount of water right acres to be transferred? _____ acres.
3. Is there an irrigation ditch and/or an underground pipeline that runs through the property?
Yes _____ No _____
4. Is there a distribution point for irrigation located on the property? Yes _____ No _____

Water-master Signature: _____		Date: _____	
Print Name: _____		Phone: _____	
Irrigation District Signature: _____		Date: _____	
Print Name: _____		Phone: _____	
COMMENTS:			

WILDLIFE

1. Is the subject property located within a “**Winter Wildlife**” overlay zone? Yes _____ No _____
2. If yes, please check the appropriate box(s):
- _____ Critical Deer Winter Range
 - _____ General Deer Winter Range
 - _____ Elk Winter Range
 - _____ Antelope Winter Range
3. Is the subject property located within a “**Sensitive Bird Habitat**” zone? Yes _____ No _____

COMMENTS: _____

ODF&W Signature: _____ **Date:** _____

Print Name: _____

WARRANTY DEED A copy of the **Warranty Deed** indicating the current property owner must be attached with this application.

TAX LOT CARD

A copy of the “Tax Lot Card” with history from the Crook County Assessor’s Office.

SIGNATURES

I/We agree to meet the standards governing the laws for Conditional Use Applications as outlined in the State of Oregon’s OAR, ORS, Crook County Code, and Crook County – Prineville Comprehensive Plan. I/We agree that all the information contained in this application is true to the best of my knowledge.

Owner Signature: _____ Date: _____

Print Name: _____

Agent Signature: _____ Date: _____

Print Name: _____

(Note: If agent/representative is submitting your application on behalf of the property owner, the “Letter of Authorization” form must be completed and attached to this application)

DETAILED PLAN

The following material must be submitted with this application, as required by Section 9.020 of the Zoning Ordinance:

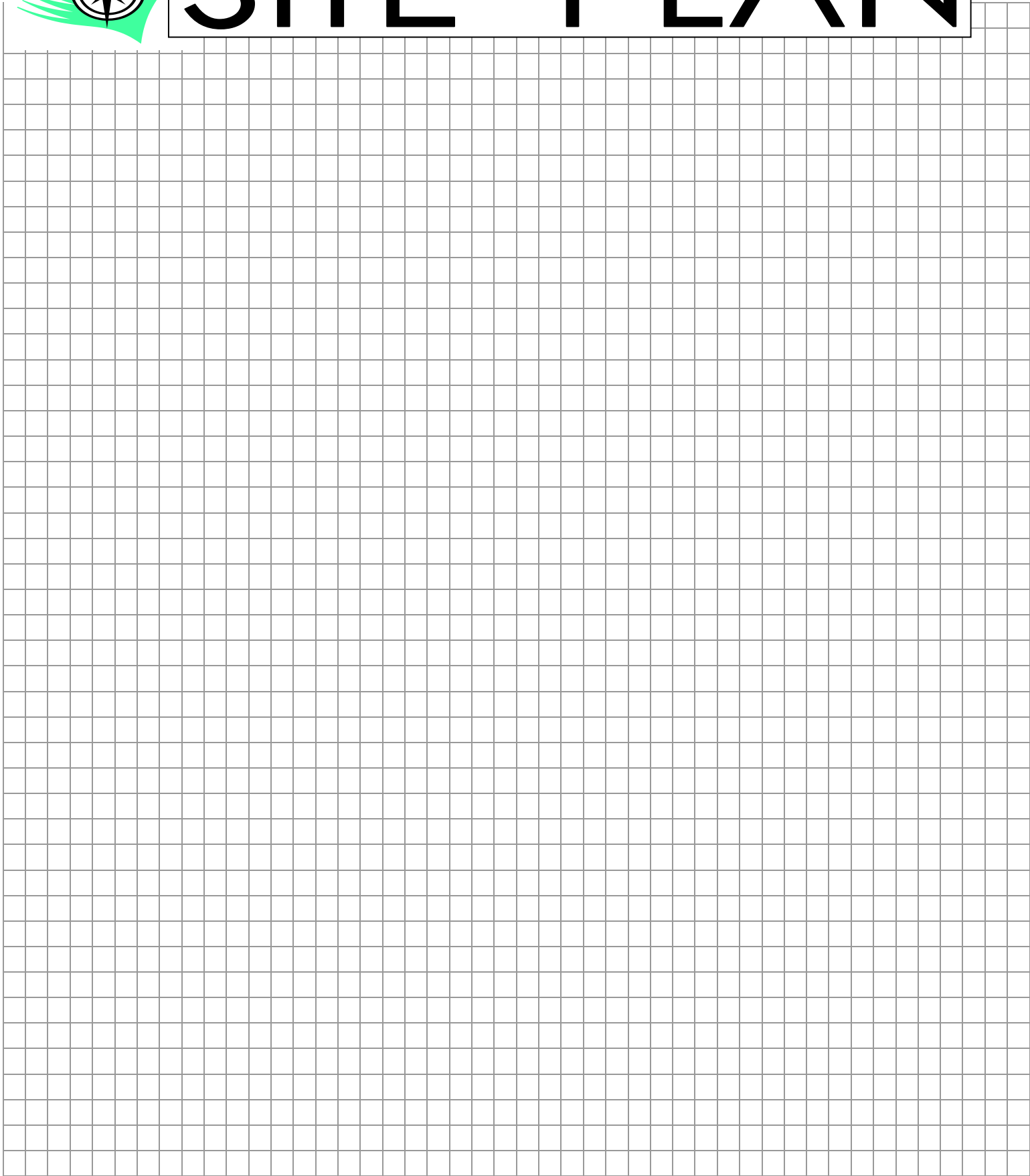
1. Detailed plot plan showing:

- (a) Property dimensions including outline of property;
- (b) Direction of North;
- (c) **All** roads existing and proposed, include road names;
- (d) Access (driveway) existing & proposed, include circulation patterns, parking, loading and unloading areas (if applicable) **and** any easements to or on the property;
- (e) Size and location of all **existing** & **proposed** structures. Intended use of each structure.
- (f) Location of **water supply**, well, or cistern with distance to the septic system **and** dwelling.
- (g) Location of **septic system** with drain field and *replacement drain field* areas. (For assistance with location contact 447-8155: Crook County Environmental Health Department).
- (h) Location of **water right** and/or irrigation canal/ditch on property, if applicable with distance from all structures.
- (i) Location of creeks, streams, ponds, springs, or other drainage ways with distance to all structures.
- (j) Distance from **all** structures to **all** property lines.
- (k) Location of any **rimrock** on the property.

The "Site Plan" or "Plot Plan" must be submitted on 8-1/2 x 11 paper.



SITE PLAN



LETTER OF AUTHORIZATION

Let it be known that

_____ (print name)

Has been retained to act as my authorized agent to perform all acts for development on my property noted below: These acts include: Pre-application conference, filing applications and/or other required documents relative to all "**Land Use**" applications.

Physical address of property: _____

And described in the records of CROOK COUNTY as:

Map Tax Lot Number(s)

The costs of the above actions, which are not satisfied by the agent, are the responsibility of the undersigned property owner.

PROPERTY OWNER

Signature: _____ Date: _____

Print Name: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

AGENT

Signature: _____ Date: _____

Print Name: _____

Mailing address: _____

City: _____ State: _____ Zip: _____