



<i>For Office Use Only</i>
Permit No.(s) 217- _____ - _____
PLNG
Fee: \$1100.00 Address: \$135.00

**Crook County Community Development
Planning Division**
300 NE 3rd Street, Room 12, Prineville Oregon 97754
Phone: 541-447-8156 / Fax: 541-416-2139
www.co.crook.or.us / Email: plan@co.crook.or.us

Conditional Use Application – Non Farm Dwelling Application

NOTICE TO ALL APPLICANTS

The Crook County Planning Department is required to review all applications for accuracy and to determine whether the staff and/or Planning Commission have the information needed to make a decision. County Ordinances allow the County 30 days to determine whether the application is complete. If the Planning Department determines that your application is incomplete, you will be requested, in writing, to provide the necessary missing information, and a decision on your application will be postponed until the information is received. State Law requires that 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: _____
 Company Name: _____
 Mailing Address: _____
 City: _____ State: _____ Zip: _____
 Day-time phone: (____) _____ - _____ Cell Phone: (____) _____ - _____
 Email: _____

AGENT/REPRESENTATIVE

Last Name: _____ First Name: _____
 Company Name: _____
 Mailing Address: _____
 City: _____ State: _____ Zip: _____
 Day-time phone: (____) _____ - _____ Cell phone: (____) _____ - _____
 Email: _____

PROPERTY LOCATION

Township ____ South, Range ____ East WM, Section _____, Tax lot _____
 Size of property: _____ acres Zoning: _____
 Physical address: _____
 Subdivision name, if applicable: _____
 Is the subject property located on a corner? Yes ____ No ____

Total parcel size: _____ acres

- 1.) Is the property on farm tax deferral? Yes ____ No ____
- 2.) Is the property currently or previously a farm use? Yes ____ No ____
 - a. Acreage & types of crops grown: _____
 - b. Acreage and type of livestock: _____
- 3.) Is the property located within a flood plain? Yes ____ No ____
- 4.) Physical (Situs) address of subject property; _____

RESIDENCE INFORMATION

STEP 1: Is this request for a new residence or a replacement residence?

New Residence _____ **OR** **Replacement Residence** _____

STEP 2: Is this request a “Site” built residence or a “Manufactured Dwelling?”

Site Built _____ **OR** **Manufactured Home** _____

STEP 3:(Complete all that are applicable)

- a. Height of structure: _____ feet
- b. Number of stories: _____
- c. Total square footage of proposed structure: _____
- d. If a manufactured dwelling: Year and Model _____
- e. If a manufactured dwelling: (Check only one of the following)
Single-wide: _____ Double-wide: _____ Triple-wide: _____

STEP 4: If the proposal is for a **replacement** dwelling please answer the following:

- a. If the existing residence is a site built structure will it be removed from the property or converted into non-residential use?
Explain _____
- b. If the existing residence is a manufactured dwelling, as required by Chapter 18.132 of the Crook County, the manufactured dwelling must be removed from the property within 30 days of receiving a final inspection on the replacement dwelling. ***Pursuant to Chapter 18.132 – Manufactured and Mobile Homes, the***

manufactured dwelling shall be used solely for the purpose of a residential dwelling. Use of a manufactured dwelling for storage is prohibited.

STEP 5: New residence only:

Will a “Manufactured dwelling” or an “RV” be used as a “Temporary” residence during the construction of said structure: **Yes** _____ **No** _____

STEP 6: List all proposed ACCESSORY structures

ACCESSORY BUILDING(s):

BUILDING #1 - Proposed Size _____ Use _____
Is this an addition to an existing accessory structure: Yes ___ No ___
Existing structure size: _____ square feet No. of stories _____
Comments _____

Size _____ Use _____

BUILDING #2 - Proposed Size _____ Use _____
Is this an addition to an existing accessory structure: Yes ___ No ___
Existing structure size: _____ square feet No. of stories _____
Comments _____

ACCESS / ROADS:

- A. Proposed access for ALL proposed parcels:
- a. If the proposed access is a “public or county” road, submit an approved road approach permit that shows access for all proposed parcels. (Questions: Contact the Community Development 541.447.8156 or 541.447.3211)
 - b. If the proposed access is a “private” easement, submit a “recorded” access easement.
 - c. If the proposed access is a “State” access, submit an approved road access permit issued by ODOT. (Questions: contact: Phone: (541) 388-6426 – Robert Morrow)
- B. Current Road Maintenance Agreement: Yes ___ No ___
- i. If yes, attach copy of recorded agreement.
 - ii. If no, why not? _____

- C. Name of access road: _____
- D. List the number of dwellings or uses making access from the road named in (C.) above: (example: 5 residences, 2 businesses)
- i. Number of residences: _____
 - ii. Number of commercial uses: _____
- E. What is the current width of the current roadway: _____

SERVICES AND IMPROVEMENTS

- 1.) WATER will be supplied by: (Check only one)
- _____ Existing individual well
 - _____ Proposed individual well
 - _____ 3 or less dwellings on ONE well un-regulated – Provide State Certification
 - _____ Shared well with: Number of dwellings _____
- If a shared well, submit recorded “Shared Well” agreement.**
- 2.) SEWAGE DISPOSAL – Will be disposed by:
- Septic System:
- _____ Copy of Site Evaluation Report
- 3.) ELECTRICAL POWER:
- _____ Central Electric Cooperative (541) 548-2144
 - _____ Pacific Power (888) 221-7070
 - _____ Solar
 - _____ Other: explain _____
-
- 4.) NATURAL GAS: Yes _____ No _____

CROOK COUNTY WEEDMASTER:

Weedmaster Signature: _____ Date: _____

(County Weedmaster, Attn: Kev Alexanian – Phone: (541) 447-7958
 Email: kev.alexanian@co.crook.or.us)

IRRIGATION WATER RIGHT

(Oregon Water Resources Department (OWRD) or a Local Irrigation District must sign even if there are no water rights!)

1. Please indicate the 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: _____

- a. Does the property have irrigation water right? Yes ___ No ___

If yes, a sign-off from State Watermaster ***and/or*** the relevant irrigation district is required.

- b. If yes, what is the amount of acres of irrigation water right? _____ acres.

- c. Amount of water right acres to be transferred? _____

- d. Is there an irrigation ditch and/or an underground pipeline that runs through the property? Yes ___ No ___

- e. Is there a distribution point for irrigation located on the property? Yes ___ No ___

Watermaster Signature: _____ **Date:** _____

Irrigation District Signature: _____ **Date:** _____

Comments:

ONE-MILE STUDY AREA INFORMATION

- 1.) Explain, in detail, how your request for a non-farm dwelling or activities associated with the dwelling will **NOT** force a significant increase the cost of accepted farming or forest practices on nearby lands devoted to farm or forest use. **(BE SPECIFIC)**

- 2.) Explain, in detail, how the proposed non-farm dwelling would be situated upon a lot or parcel or portion of a lot or parcel that is **generally unsuitable** land for the production of farm crops and livestock or merchantable trees species, considering the terrain, adverse soil or land conditions, drainage and flooding, vegetation, location and size of the tract. A lot or parcel or portion of a lot or parcel may not be considered unsuitable solely because of size or location if it can reasonably be put to farm or forest use in conjunction with other land. **(BE SPECIFIC)**

- 3.) Explain, in detail, how your request for a non-farm dwelling will **NOT** materially alter the stability of the overall land use pattern of the area.

- 4.) The dwelling will be sited on a lot or parcel created **before** January 1, 1993. Provide documentation showing the date that the subject parcel had been created. **(A copy of the “TAX LOT CARD” from the Crook County Assessor’s Office)**
Phone: 541.447.4133

Attach the **“One-Mile Study Analysis”** that shows the surrounding properties located within 1-mile of the subject parcel. Contact the **Crook County Community Development Department**, 300 NE 3rd Street, Room 12, Prineville, OR 97754. If you should have questions, One-Mile Study Application form, fees, etc., you can contact 541-447-3211, Ext. 287

SOIL

Attach the "Soil Survey" that shows predominate soil classes of the subject parcel. Contact Nate at the **Community Development Department**, Courthouse Building, 300 NE 3rd Street, Room 12, Prineville, OR 97754. If you should have questions, soil survey application fees, etc., you can contact us at 541-447-3211, Ext. 287.

SIGNATURES

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

Property Owner Signature: _____ Date _____
Print name: _____

Property Owner Signature: _____ Date _____
Print name: _____

Agent/Representative Signature: _____ Date _____
Print name: _____

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

Additional Information or Analysis Addressing the Criteria:

Please feel free to attach additional information or analysis which you believe demonstrates compliance with the requirements of the EFU zone. (i.e., herbaceous forage report, etc.).

.....
(Office Sign-Off)

APPLICATION DEEMED COMPLETED BY STAFF: _____

DATE APPLICATION DEEMED COMPLETE: _____

ALL APPLICATIONS MUST INCLUDE THE FOLLOWING INFORMATION

(Check List)

- 1) Proof of Ownership:
 - a. Copy of recorded Warranty Deed
- 2) Proof of Access:
 - a. ODOT State Highway (Robert Morrow / Phone: 541.388.6426)
 - b. County Maintained Road
 - c. Public Road
 - d. Private Road

(Both PUBLIC and PRIVATE roads, the applicant must provide a copy of the recorded dedication.
- 3) Signatures required:
 - a. ODF&W
 - b. Weedmaster
 - c. Relevant Irrigation District(s)
 - d. Letter of Authorization if using an Agent or Representative
 - e. Acknowledgement of Tax Consequences (Form A)
 - f. Statement of Understanding (Form B)
- 4) One-Mile Study Analysis:
 - a. A completed report, with map, of a 1-mile study area of the surrounding area that clearly identifies all “farm” and “non-farm” uses within one mile, including the size of parcels and ownerships (*excluding Rural Residential zones.*)
- 5) A Detailed Plot Plan / Site Plan
- 6) Provide documentation when the lot was created: “TAX LOT CARD w/ history.”
- 7) Area Information
- 8) Septic “Site Evaluation” approved from the Crook County Environmental Health (Community Development Department)
- 9) Address application with the appropriate fee.

THE FOLLOWING MATERIAL MUST BE SUBMITTED WITH THIS APPLICATION, AS REQUIRED BY SECTION 9.020 OF THE ZONING ORDINANCE.

Detailed Plot Plan Showing the following:

- 1) Property dimensions including outline of the property;
- 2) Direction of North;
- 3) **ALL** roads existing and proposed;

- 4) Access (driveway) existing and/or proposed, include circulation patterns, parking, loading and unloading areas (if applicable).
- 5) All **EASEMENTS** to or on the property (Utilities, access, etc.)
- 6) Size and location of all **existing** and **proposed** structures. Intended use of each structure.
- 7) Location of **septic system** with drain field and replacement drain fields areas. (For assistance with location contact 541.447.8155: Crook County Environmental Health Department (located in the Community Development, Room 12 of the Courthouse building).
- 8) Location of **water right** and/or irrigation canal/ditch on property, if applicable with distance of from all structures.
- 9) Location of creeks, streams, ponds, springs, or other drainage ways with distance to all structures: existing and proposed.
- 10) Distance from **all** structures to **all** property lines.
- 11) Location of any **rimrock** on the property.
- 12) Location of all abutting property wells with distance.
- 13) Location of all abutting property residences with distance.

The "SITE PLAN" or "PLOT PLAN" must be submitted on 8 ½ x 11 paper.

Before you DIG ~ Call 811 ~ it's the LAW

Website: www.digsafelyoregon.com

Phone: (503) 232-1987

The applicant and/or agent shall be responsible for contacting 811 to locate underground utilities, as well as Ochoco Irrigation District and/or the Central Oregon Irrigation District for any underground utilities



FORM A

ACKNOWLEDGEMENT OF TAX CONSEQUENCES

Oregon law requires that any property receiving special farm tax assessment be disqualified from such tax status upon receipt of preliminary approval for a non-farm dwelling. In addition, the law requires that certain taxes associated with disqualification be paid before the non-farm dwelling can be built. The statute, as set forth in ORS 215.236, reads as follows:

Loss of Tax Deferral

- a. Pursuant to Oregon Revised Statutes 215.236, a non-farm dwelling on a lot or parcel in an Exclusive Farm Use zone that is or has been receiving special assessment may be approved only on the condition that before a building permit is issued the applicant must produce evidence from the County Assessor's Office that the parcel upon which the dwelling is proposed has been disqualified for special assessment value for farm use under ORS 308.370 or other special assessment under Oregon Revised Statutes 308.765, 321.730, or 321.815 and that any additional tax or penalty imposed by the County Assessor as a result of disqualification has been paid.
- b. A parcel that has been disqualified for special assessment at value for farm use pursuant to Oregon Revised Statutes 215.236(4) shall not re-qualify for special assessment unless, when combined with another contiguous parcel, it constitutes a qualifying parcel.

I/We the undersigned by my/our signature acknowledge having read the above provision and I/we understand that under Oregon Real Property Tax Law, approval of this non-farm dwelling/application may result in significant deferred real property tax liability.

Property Owner _____ Date _____
(Signature)

Property Owner _____ Date _____
(Signature)



FORM B

STATEMENT OF UNDERSTANDING

I wish to develop the property described as Township _____ South, Range _____ East WM, Section _____, Tax lot(s) _____ in a way that requires permits from Crook County, including land use approval, a septic site evaluation and/or septic permits, and building and supplemental construction permits.

I understand that State law does not allow Crook County to issue a septic or building permit before the County has determined that the proposed development complies with all County land use regulations.

In addition, in making this request, I understand and agree that:

1. No other permits will be issued until the land use permit has been granted.
2. The land use permit may not be granted if the required approval criteria are not met.
3. If the land use permit is not granted, the other permits applied for will not be issued.
4. If the land use permit is not granted, no refund will be given for any land use, site evaluation, plan review or permit fees already paid.

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Property Owner: _____ Date: _____
(Original Signature)

Property Owner: _____ Date: _____
(Original Signature)



AUTHORIZATION FORM

Let it be known that _____
(Print name clearly)

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 Permit applications.

Physical address of property: _____, and described in the records of CROOK COUNTY as:

Township _____ South, Range _____ East, Section _____, Tax lot _____
Township _____ South, Range _____ East, Section _____, Tax lot _____

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

PROPERTY OWNER (Please Print Clearly)

Signature: _____ Date: _____

Print Name: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

Email: _____

Individual(s)

Corporation;

Limited Liability Corporation;

Trust

IMPORTANT NOTE: Indicate whether property is owned in individual name(s), or by a business or other entity (e.g. Corporation, Limited Liability Company; or Trust). If property is owned by an entity, include names of all authorized signers. For Example:

If the owner is a Corporation, Limited Liability Corporation or Trust, the following information is required as part of this form.

- If a Corporation ~ please provide the name of President or other authorized signor(s).
- If a Limited Liability Corporation ~ provide names of **ALL** members & managers.
- If a Trust ~ provide the name of current Trustee(s)

In addition, you will need to include a copy of Bylaws (Corporations); an Operating Agreement (Limited Liability Company); or Certificate of Trust (Trusts) that verifies authority to sign on behalf of the entity.

AGENT

Signature: _____ Date: _____

Print Name: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) ____ - ____ Cell Phone: (____) ____ - ____

Email: _____



City / County

ADDRESS APPLICATION

CROOK COUNTY COMMUNITY DEVELOPMENT
 300 NE 3RD ST. RM 12 PRINEVILLE, OR 97754
 PH: (541) 447-3211 FAX: (541) 416-2139
 bld@co.crook.or.us

Application Submittal Date Stamp
 FOR OFFICE USE ONLY

CITY AND/OR COUNTY PLANNING APPROVAL IS REQUIRED PRIOR TO ISSUANCE. APPROVAL OF THIS APPLICATION AND ISSUANCE OF AN ADDRESS IN NO WAY REPRESENTS CROOK COUNTY'S OPINION ABOUT THE STATUS OF LEGAL ACCESS TO THE SUBJECT PROPERTY. APPLICANTS ARE ENCOURAGED TO INVESTIGATE THE TITLE AND LEGAL ACCESS RIGHTS TO THE PROPERTY AT THEIR EXPENSE.

Site Information

Tax Map #: _____ () CITY () COUNTY

Subdivision Name: _____ Phase: _____ Block: _____ Lot: _____

This request is for: () NEW ADDRESS () ADDRESS CHANGE () OTHER

If request is for an address change, please explain why: _____

Is there currently a dwelling on this property? Yes () No () If yes, how many? _____

If yes, what is the address of the existing dwelling(s)? _____

Is this for a Medical Hardship? Yes () No () Is this for an accessory farm dwelling? Yes () No ()

What is the use of the structure for this address? (home, barn, shop commercial etc.) _____

Is this a corner lot? Yes () No () Is the access to your property directly off of a named road? Yes () No ()

Is the access to your property through an easement? Yes () No () Name of easement? _____

Additional Property Information

Owner / Applicant Information

Property Owner Name: _____

Mailing Address: _____ email: _____

City: _____ State: _____ Zip: _____ Phone: _____ Cell: _____

Applicant's Name (Please print): _____ Title: _____

Signature of Applicant: _____ Date: _____ Daytime Phone: _____

For Office Use Only

Fees	Office Use	Initial	Date
No. of Addresses Issued X \$110.00 =	Agencies Notified:		
No. of Fire Markers Issued X \$25.00 =	Road Modification:		
Date Paid: _____ Total Amount Due: _____	GIS Changes:		
() Check () Cash () CC	E911 (new range):		
Office Use Assigned by: _____ Date: _____	Planning Approval #:		
New Address _____	Comments:		
Postal District: _____			

SITE PLAN PAGE MUST BE COMPLETED FOR THIS APPLICATION TO BE ACCEPTED

Site Plan

Draw or attach map showing ALL boundaries of your lot. The map shall include the location of the building or structure to be addressed. If the subject property is located within the CITY limits, you must indicate the location or proposed location of the front entrance to the home and driveway location. If the subject property is located within the COUNTY outside of the city limits, you must indicate the exact location of the driveway entrance.



**Crook County Community Development
1 Mile Study / Soil Survey / Wildlife Density Analysis**

GIS/Planning Services	FEES
1 Mile Study Maps and Report	\$170.00
Soil Survey 1	\$25.00
Soil Survey 2*	\$75.00
Wildlife Density Analysis	\$50.00

MAP TAX LOT# or #'s: _____

Date: _____

Owner Name: _____

Address: _____

Ph: _____ **Email:** _____

1 Mile Study includes two aerial photo maps, a map displaying animal ranges and the 1 mile area affected, along with the associated Assessor's data reports for improvements, property class, zoning, acreage, and taxpayer contact information.

Wildlife Density Analysis - In areas of Crook County that are in a mapped big game winter range, the County may allow single family dwellings and their accessory uses either on large properties (see planning department for the appropriate parcel size in your location) or by demonstrating that the existing housing density does not exceed one dwelling per 160 acres within a one-mile study area.

Soil Survey 1 includes a map displaying the NRCS improved or interim soils datasets clipped to the property boundary, and the associated reports for each soil type.

***Soil Survey 2** includes a map displaying a proposed partition of a property and NRCS improved or interim soils datasets, the percentage of each soil type for the proposed parcels, and the associated reports for each soil type.

Note: A proposed partition plat is required with completed application.
Please contact the Planning Department directly to order this report.

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