



For Office Use Only

Permit No. _____ - _____

Fee: \$400.00

AN ADDITIONAL 10% CODE COMPLIANCE FEE WILL BE CHARGED

Crook County Planning Department

300 NE 3rd Street, Room 12, Prineville Oregon 97754

Phone: 541-447-8156 / Fax: 541-416-3905

Non-Conforming Use

(Incomplete applications will not be accepted)

Legal Non-Conforming structures or uses were lawfully established under all applicable regulations at the time, but no longer conform to the requirements of the zone in which it is located. Using a preponderance of evidence, the petitioner must prove the use was established either prior to zoning ordinances or it was consistent with the applicable ordinance criteria at the time.

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: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

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

Email: _____

AGENT / REPRESENTATIVE

Last Name: _____ First 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: _____

STEP 1: Describe the nature and extent of use (be as specific as possible)

STEP 2: Required information

1. **What is the date the Non-Conforming use was established?** _____
2. **What was the property zoned at the time?** _____
3. **If the property was zoned, specify the ordinance criteria that allowed the use.**

4. Continuity of Use: Pursuant to **ORS 215.130 Application of ordinances and comprehensive plan; alteration of nonconforming use.** (5) The lawful use of any building, structure or land at the time of the enactment or amendment of any zoning ordinance or regulation may be continued. Alteration of any such use may be permitted subject to subsection (9) of this section. Alteration of any such use shall be permitted when necessary to comply with any lawful requirement for alteration in the use. Except as provided in ORS 215.215, a county shall not place conditions upon the continuation or alteration of a use described under this subsection when necessary to comply with state or local health or safety requirements, or to maintain in good repair the existing structures associated with the use. A change of ownership or occupancy shall be permitted. (11) For purposes of verifying a use under subsection (5) of this section, a county may not require an applicant for verification to prove the existence, continuity, nature and extent of the use for a period exceeding 20 years immediately preceding the date of application. Crook County has not passed any ordinances or developed any particular policy on this issue. Until such time as the ordinances are updated or a policy is created to include a specific number of years of records to prove the use has not been discontinued, Crook County will review these on a case by case basis subject to the statutory limitation.

5. **Additional Information:** The following list includes documentation that may assist in determining the use or structure meets the standards of a pre-existing non-conforming use.

Phone Records, Electrical Records, Dated Aerial Photographs, Dated Photographs, Septic/Building Permits, Construction Contracts, Notarized Statements etc.

SIGNATURES

I agree to meet the standards governing the laws for “Non-Conforming Use Determinations” 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** _____

Property Owner Signature: _____ **Date** _____

Print name(S): _____

Agent/Representative 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)

SUPPLEMENTAL INFORMATION

The information requested in this application is the minimum information necessary. This application requests information that will assist Crook County planners in evaluating whether your proposal meets these criteria. Failure to complete applicable portions of this application form may result in the County **not** accepting your application or denying your application for failure to demonstrate that the criteria have been met. The County can assist you by providing such information from the Crook County Assessor, Crook County Clerk’s Office, and the Crook County GIS Department. However, the burden of proof lies on you, the applicant, to demonstrate that the criteria have been met. In many cases, you may wish to provide information in addition to that requested to support your application.

6. DETAILED PLOT PLAN REQUIREMENTS

The detailed "**Plot Plan**" must include the following:

- Scale of map – not greater than one inch per 400 feet.
- North arrow.
- Dimensions and boundaries of the property.
- Location of all easements and names, and the right-of-way widths of existing roads and easements or right-of-way for any proposed roads, utilities, bikeways, and access corridors.
- If the parcel or lot has irrigation water right, indicate the area of the water right with the number of irrigated acres. In addition, submit a copy of a water right map from the district.
- Names and locations of all roads adjacent to the property.
- Location of well or water source on your property. In addition, indicate the distance from water source to nearest point of septic system drain field and / or replacement drain field area.
- Location of septic system test holes used for the site evaluation during the feasibility process. In addition, the location of the proposed septic tank, drain field and replacement drain field that shows the dimensions and spacing of the leach lines. Further, indicate the distance from the septic tank and septic system to the property lines.
- Location, size and intended use of all structures, existing and proposed.
- Location of driveways or other roads on the property, existing and proposed.
- Location of all public utility easements. In addition, attach copies of the recorded utility easement that indicates easement widths.
- Distance (setbacks) from all structures to all property lines.
- Location of all major features (canals, irrigation ditches, rock ledges, etc)
- Location of rimrock, of applicable.
- Location of all drainage, creeks, springs, etc., with distance to the proposed development site.



SITE PLAN

A large grid area for drawing a site plan, consisting of a uniform grid of small squares covering most of the page.

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: _____