VARIANCE REQUEST
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 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. If the Planning Department determines that your application is incomplete, you will be requested in writing to provide the missing information and 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.

Owner: ________________________________

Mailing address: _____________ City: ___________ State: ____ Zip ______

Day phone: (____) ____-_______ Cell phone: (____) ____-_______

Agent or Representative: ________________________________

(Owner must sign a Letter of Authorization)

Mailing address: _______________ City: ___________ State: ____ Zip ______

Day phone: (____) ____-_______ Cell phone: (____) ____-_______

I hereby apply to the Crook County Planning Commission for the authorization of a Variance from the requirements of the Crook County Planning Commission for the authorization of a variance from the requirements of the Crook County Zoning Ordinance of 1978.

Explanation of Variance Requested ____________________________________________

________________________________________

Property Description:
Township ____ South, Range ____ East, Section(s) ____Tax Lot(s) _________
Variance Site Address ____________________________
It is my belief that... “owing to special and unusual circumstances” related to a specific piece of property, strict application of the ordinance would cause an undue or unnecessary hardship.

I understand that the Commission must find that four (4) circumstances exist before they can grant a variance. Therefore, I have included an explanation under each of these circumstances to show how my request fits the criteria:

*(Use a separate sheet if necessary)*

1. Exceptional or extraordinary circumstances apply to the property which do not apply generally to the properties in the same zone or vicinity, and result from lot size or shape, legally existing prior to the date of this ordinance, topography, or other circumstances over which the applicant has no control because:

2. The variance is necessary for the preservation of a property right of the applicant substantially the same as owners of other property in the same zone or vicinity possess for the following reasons:
3. The variance would not be materially detrimental to the purposes of this Ordinance, or to property in the zone or vicinity in which the property in the zone or vicinity in which the property is located, or otherwise conflict with the objectives of any city plan or policy for the following reasons:

4. The variance requested is the minimum variance, which would alleviate the hardship:
SIGNATURES
I agree to meet the standards governing the laws for “Variance Reviews” 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 or 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.

REQUIREMENTS

1. Tax Lot Card (Can be obtained at the Crook County Assessor’s Office)

2. Detailed Plot Plan

DETAILED PLOT PLAN REQUIREMENTS

The detailed “Plot Plan” must be drawn on at least 8 ½ x 11 paper, but no larger than 8 ½ x 14.

A parcel that is 2 acres or less in size must be drawn to scale, and all dimensions and boundaries must be shown.
A parcel that is more than two acres in size does not have to be drawn to scale, however, all dimensions and boundaries must be shown and all information must be accurate.

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.
FORM B

STATEMENT OF UNDERSTANDING

I wish to develop the property described as:
Map Tax Lot No. ________________________________
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)
社区发展部
300 NE 3rd Street, Prineville, OR 97754
Phone: (541) 447.8156 / Fax: 541-416-2139
Email: plan@co.crook.or.us / Website: www.co.crook.or.us

授权书申请

告知，（请清晰打印姓名）

已委托作为我的授权代理人进行所有开发行为，其中包括：预申请会议、提交申请和/或其他相关文件，所有Permit申请。

财产地址：__________________________，并描述为克鲁克县的记录如下：

- 镇区：________ 南，范围：________ 东，部分：________，税号：________
- 镇区：________ 南，范围：________ 东，部分：________，税号：________

上述行动的费用，如未由代理支付，应由 Unsinged Property Owner 负责。

财产所有人（请清晰打印）

签名：__________________________ 日期：__________

打印名称：__________________________

邮寄地址：__________________________

城市：__________________ 状态：__________________ 邮编：__________________

住宅电话：（____）_____ - _______ / 手机：（____）_____ - _______

电子邮件：__________________________

- 个人
- 公司
- 有限责任公司
- 信托

Variance Application – Updated: July 9, 2015
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: _______________________________________________
NW MOUNTAIN VIEW LANE

IF YOUR PROPERTY HAS OR WILL HAVE ANY OF THE FOLLOWING ITEMS ON IT YOU MUST SHOW WHERE THEY ARE LOCATED:

- Size & Location of Proposed Structure
- Well
- Entire Driveway and Access Location
- Utility/Water lines
- 8 1/2" X 11" Plan does NOT have to be to scale and may be drawn by hand as long as it is legible.

- All setbacks incl. distances to property lines & other structures
- Location of septic tank, drainfield and approved reserve area
- ALL Easements (public/private)
- Property Dimensions
- Location of ALL creeks, streams, ponds, springs, fences
- Location of ALL irrigation water rights and/or canals

Show distances from all items indicated above to proposed structure(s).

- NOT TO SCALE -