



RECORD NO. 217 - _____ - _____ PLNG

LOT OF RECORD & SITE PLAN REVIEW \$825

ADDRESS \$135

SOIL SURVEY \$25

WILDLIFE DENSITY \$50

LOT OF RECORD & SITE PLAN REVIEW

A "**Lot of Record**" is an application for a dwelling approval on vacant land whereby the applicant/owner proves certain criteria are applicable including ownership of the property prior to January 1, 1985.

A "**Site Plan Review**" is an application process for the siting of the dwelling on the vacant land.

Notice to all applicants: The Crook County Community Development, Planning Division is required to review all applications for accuracy and determine the adequacy of information needed to make a decision. Crook County Code (C.C.C.) allows 30 days to determine whether the application is complete. If the Planning Division determines that your application is incomplete, you will be requested in writing or email to provide the necessary missing information, and a decision on your application will be postponed until the information is received. *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: _____

Phone: (____) _____ - _____ Alternate Phone: (____) _____ - _____

Email: _____

AGENT/REPRESENTATIVE:

Last Name: _____ First Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ - _____ Alternate Phone: (____) _____ - _____

Email: _____

PROPERTY INFORMATION:

Township _____ Range _____ Section _____ Tax Lot _____

Size of property: _____ acres Zone: _____

Physical address: _____

Subdivision name, if applicable: _____ Lot _____ Block _____

FLOOD PLAIN:

Is the subject property located within a Flood Plain Zone? Yes _____ No _____ If yes, what zone: _____

If yes, a "Special Flood Hazard Area Development Permit" is required to be submitted at the same time.

ON-SITE SEPTIC – WASTEWATER: (Please submit the following information)

____ Copy of Approved Soil Site Evaluation

____ Copy of Approved Authorization Notice

CROOK COUNTY COMMUNITY DEVELOPMENT - PLANNING DIVISION

300 NE 3RD Street, Room 12, Prineville, OR 97754

Phone: (541) 447-3211 Ext. 1 - Fax: (541) 416-2139 - www.co.crook.or.us - plan@co.crook.or.us

Z:planning/planning/applications/lot of record/lot of record & site plan review

SOIL SURVEY

Please provide a “Soil Survey” for the location of the proposed dwelling. Contact the Crook County Community Department at (541) 447-3211 Ext. 1. An application for the soil survey is attached to this application for your convenience.

LOT OF RECORD REQUIREMENTS - ORS 215.705

Please provide evidence that your request meets the requirements of ORS 215.705:

- A governing body of a county or its designate may allow the establishment of a single-family dwelling on a lot or parcel located within a farm or forest
- The lot or parcel on which the dwelling will be sited was lawfully created and was acquired by the present owner.
 - Prior to January 1, 1985; or
 - By devise or by intestate succession from a person who acquired the lot or parcel prior to January 1, 1985.
 - Provide necessary documentation.
- The parcel on which the dwelling will be sited does NOT include a dwelling.
- When the lot or parcel on which the dwelling will be sited lies within an area designated in an acknowledged comprehensive plan as habitat of big game, the siting of the dwelling is consistent with the limitations on density upon which the acknowledged comprehensive plan and land use regulations intended to protect the habitat are based. (Please submit “Wildlife Density”)
- When the lot or parcel on which the dwelling will be sited is part of a larger tract, the remaining portions of the tract are consolidated into a single lot or parcel when the dwelling is allowed.

NOTE: Ownership includes the wife, husband, son, daughter, mother, father, brother, brother-in-law, sister, sister-in-law, son-in-law, daughter-in-law, mother-in-law, father-in-law, aunt, uncle, niece, nephew, stepparent, stepchild, grandparent or grandchild of the owner or a business entity owned by any one or combination of these family members.

The Lot or Parcel on which the dwelling will be sited must have been lawfully created and acquired by the present owner prior to January 1, 1985. Provide necessary documentation.

WILDLIFE WINTER RANGE

(This section must be signed off by **Oregon Department of Fish & Wildlife (ODF&W)** 2042 SE Paulina Hwy, Prineville, OR 97754. Phone: (541) 447-5111 Ext. 26. Email: greg.s.jackle@state.or.us

When the lot or parcel on which the dwelling will be sited lies within an area designated in an acknowledged comprehensive plan as habitat of big game, the siting of the dwelling must be consistent with the limitations on density upon which the acknowledged comprehensive plan and land use regulations intended to protect the habitat are based.

Is the subject property located within a designated Habitat of Big Game overlay zone? Yes ___ No ___

If yes, which one: (please check the appropriate box)

- ___ Critical Deer Winter Range
- ___ General Deer Winter Range
- ___ Elk Winter Range
- ___ Antelope Winter Range

ODF&W Signature: _____ Date: _____

Comments: _____

TRACT OF LAND

When the lot or parcel, on which the dwelling will be sited, is part of a tract, the remaining portions of the tract must be consolidated into a single lot or parcel when the dwelling is allowed.

- a. Is the lot or parcel a part of a tract? Yes ___ No ___
- b. If yes, please list all other lots or parcels:

Township _____ South, Range _____ East WM, Section _____ Tax Lot _____

Township _____ South, Range _____ East WM, Section _____ Tax Lot _____

Township _____ South, Range _____ East WM, Section _____ Tax Lot _____

ACCESS / ROAD APPROACH:

- Indicate the type of access used to the subject property (**Check One Only**)
- ___ **County Maintained Road:** (Must submit copy of approved access, or apply for approach permit)
 - ___ **Public Road:** (Must submit copy of approved access, or apply for approach permit)
 - ___ **Private Road / Easement:** (Provide legal recorded documentation)
 - ___ **ODOT:** (An approved ODOT permit must be attached)
 - ___ **City Street:** Need authorization for access. (Contact City of Prineville – Public Works)

PROPOSED RESIDENCE REQUEST:

Is this request for a "Site Built Dwelling?" Yes _____ No _____

If yes, what is the square footage?:

Dwelling/habitable: 1st floor _____ sq. ft. and 2nd floor _____ sq. ft.

Attached garage: 1st floor _____ sq. ft. and 2nd floor _____ sq. ft.

Number of stories: _____ Height: _____ (to the peak)

Is this request for a "Manufactured Dwelling?" Yes _____ No _____

If yes, please complete the following:

Make: _____ Model: _____ Year: _____

Double-wide: _____ Triple-wide: _____ (check one)

(The manufactured dwelling shall be at least July 1, 1976 or newer, double-wide or triple-wide)

- ❖ Manufactured Dwelling shall be used solely for the purpose of a residential dwelling. Use of a manufactured dwelling for storage is PROHIBITED.

Property Owner Initials _____

Will an "RV" be used as a "TEMPORARY" dwelling during the construction of the proposed dwelling?

Yes _____ No _____

ACCESSORY BUILDINGS:

List all proposed accessory structures. If adding more than two (2) structures, add a separate piece of paper with information.

Proposed Accessory #1

Size: 1st floor _____ sq. ft. and 2nd floor _____ sq. ft.

Height: _____ ft. to eave Number of stories: _____

Personal use: Yes _____ No _____ Commercial Use: Yes _____ No _____

Is this an addition to an existing accessory structure: Yes _____ No _____

If yes, what is the existing accessory structure size: _____ sq. ft.

Will there be plumbing? Yes _____ No _____ Electrical? Yes _____ No _____ Mechanical? Yes _____ No _____

Proposed Accessory #2

Size: 1st floor _____ sq. ft. and 2nd floor _____ sq. ft.

Height: _____ ft. to eave Number of stories: _____

Personal use: Yes _____ No _____ Commercial Use: Yes _____ No _____

Is this an addition to an existing accessory structure: Yes _____ No _____

If yes, what is the existing accessory structure size: _____ sq. ft.

Will there be plumbing? Yes _____ No _____ Electrical? Yes _____ No _____ Mechanical? Yes _____ No _____

IRRIGATION WATER RIGHT:

Please indicate the location of all existing water rights, number of acres, and proposed division of water rights, if applicable. This application must be signed off prior to submitting to Planning Department. ****Please allow up to 2 weeks for review from Irrigation District or Water Resources Department**** If no irrigation, please answer questions A, D, and E.

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

- Central Oregon Irrigation District Phone: (541) 548-6047 / Fax: (541) 548-0243
- Ochoco Irrigation District Phone: (541) 447-6449 / Fax: (541) 447-3978
- OR. Water Resources Department Phone: (541) 306-6885 / Fax: (541) 388-5101
- People’s Irrigation District Phone: (541) 447-7797
- Other: _____

- A) Does the property have Irrigation Water Right?
Yes _____ No _____
- B) Amount of irrigation water right acres: _____ acres
- C) Amount of irrigation water rights to be transferred: _____ acres
- D) Are there irrigation ditches and/or underground pipelines that run through the property?
Yes _____ No _____
- E) Is there a distribution point for irrigation located on the subject property?
Yes _____ No _____

WATER MASTER SIGNATURE: _____ **DATE:** _____

Print Name Clearly: _____ Phone (____) ____ - _____

IRRIGATION DISTRICT SIGNATURE: _____ **DATE:** _____

Print Name Clearly: _____ Phone: (____) ____ - _____

COMMENTS: _____

DOMESTIC WATER: (Water will be supplied by: **Check One Only**)

- An existing individual well
- A proposed individual well
- Shared Well (Number of dwellings sharing one well: _____)
(If shared well, indicate the location of well and other property locations on the plot plan/site plan, including Tax Map numbers, as well a copy of a “Recorded Shared Well Agreement.” A shared well is 3 or less dwelling on one well; unregulated system.)
- Other: (Please explain) _____

Community Water System: Name: _____ PWS# _____

Authorized Signature: _____ **Date:** _____

Print Name: _____ Phone: (____) ____ - _____

PROPERTY OWNERS SIGNATURES:

By signing below, I/WE agree to meet the standards governing the laws for "Site Plan Reviews" as outlined in the State of Oregon's OAR, ORS, Crook County Code, and/or the Crook County Comprehensive Plan. I/We agree that all the information contained in this application is true to the best of my knowledge.

PRINT OWNER NAME CLEARLY: _____ Date: _____

PROPERTY OWNER SIGNATURE: _____

PRINT OWNER NAME CLEARLY: _____ Date: _____

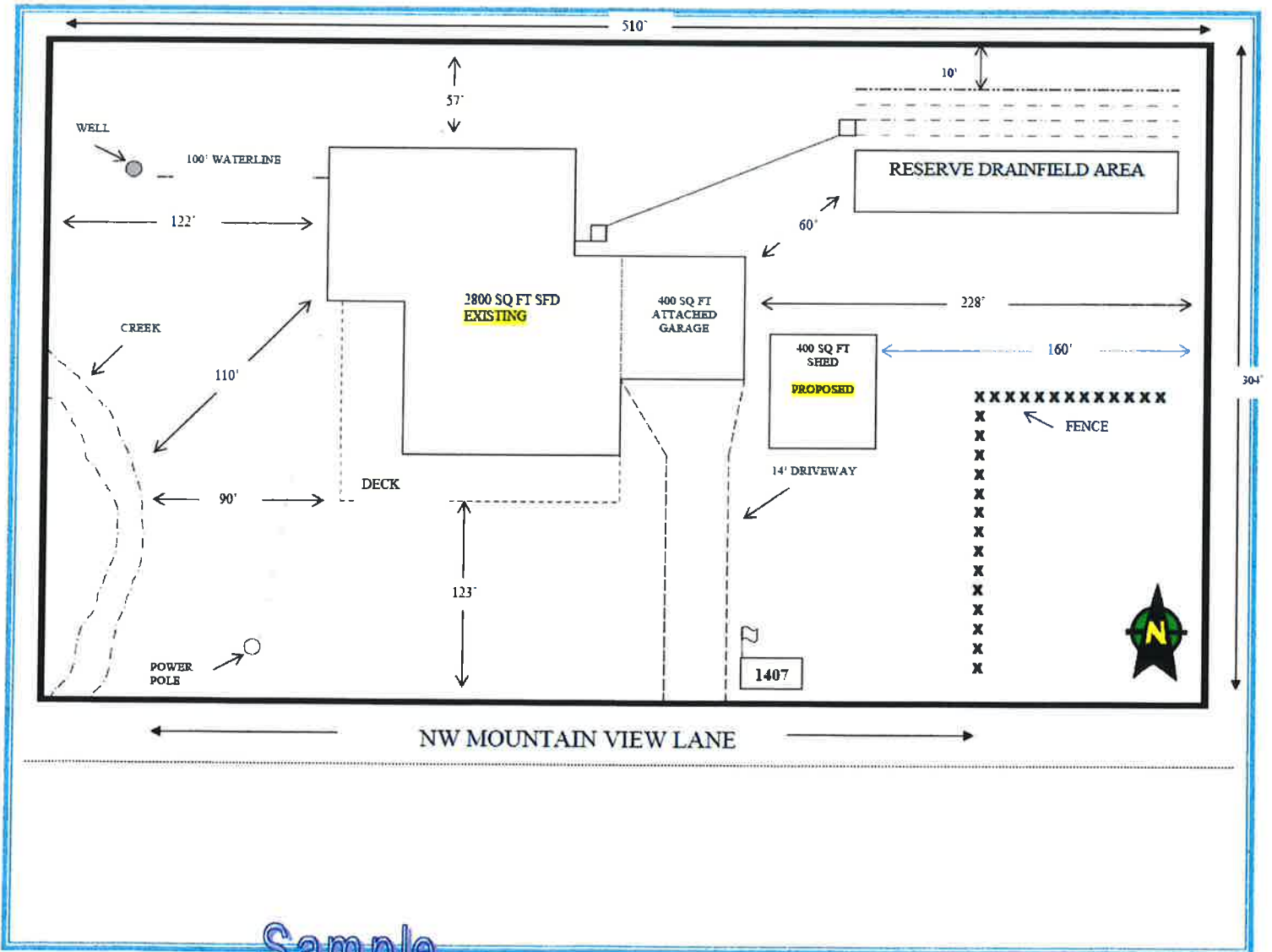
PROPERTY OWNER SIGNATURE: _____

PRINT AGENT/REPRESENTATIVE CLEARLY: _____ Date: _____

AGENT/REPRESENTATIVE SIGNATURE: _____

PLOT / SITE PLAN REQUIREMENTS

- North ↑
- Property Boundaries and Dimensions
- Location and Width of all **Easements**
- Location of Domestic **Water** Source and Distance to Septic
- Location of **Septic** System-Tank, Drain Field & Replacement Area
- Location of **Driveway**
- Location of all **major features**, ie. creek, canal, irrigation ditch, rimrocks
- Location of All **Existing** and **Proposed Structures**, indicating listing Existing, Proposed, Dimensions and Distance (**setbacks**) from Property Lines

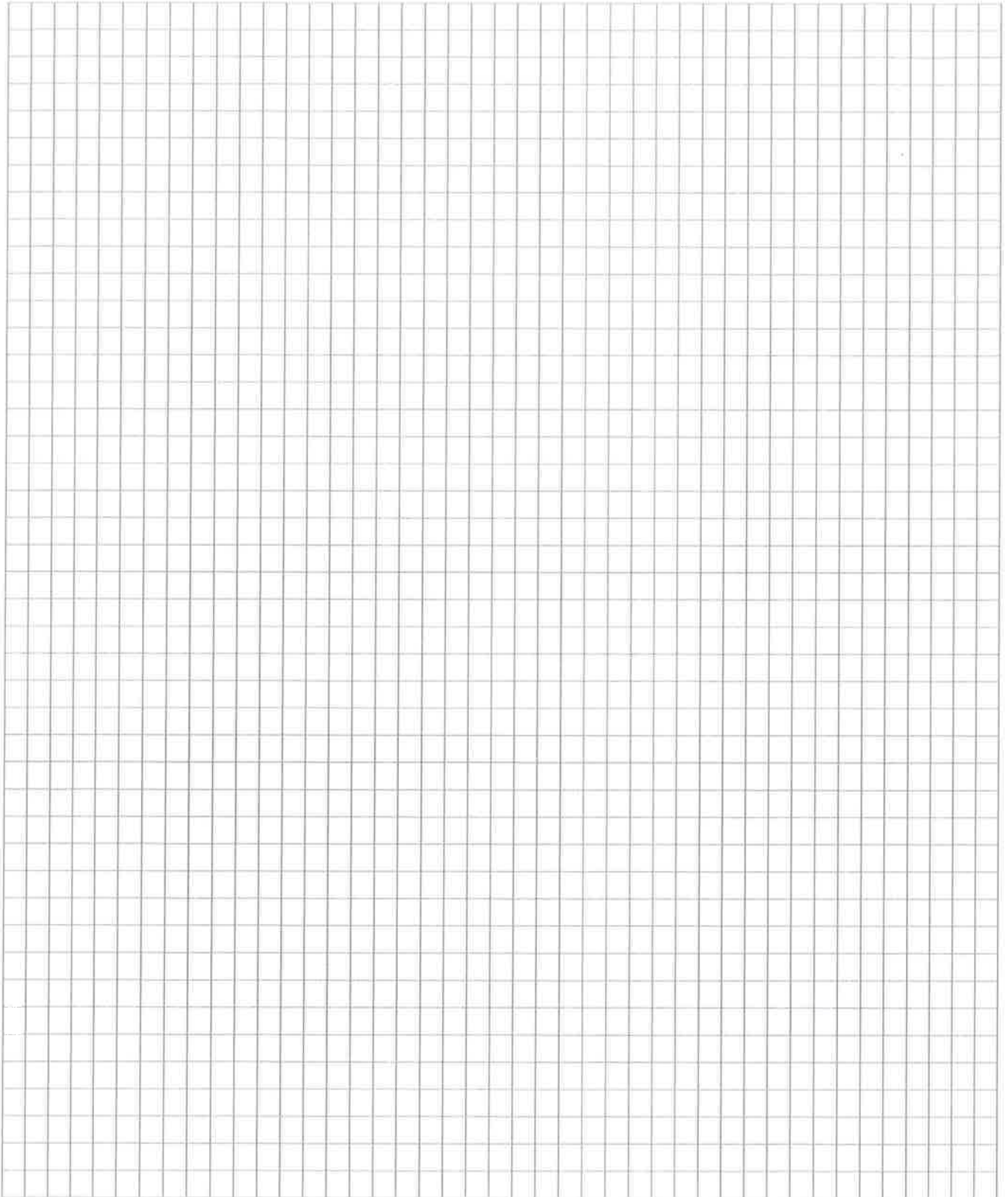


Sample

- NOT TO SCALE -



SITE PLAN





Community Development Department

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

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.**

Crook County Community Development Planning Department
300 NE Third St., Room 12
Prineville, OR 97754
Phone: 541-447-8156
Fax: 541-416-2139
Website: www.co.crook.or.us