



**LAND USE APPLICATION**

**INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED**

The following, at a minimum, must be submitted:

1. A complete application form with appropriate signatures.
2. A plot plan, drawn-to-scale, showing all property lines and existing and proposed structures, parking, landscaping, lighting, etc. and one plan set.
3. A copy of the current deed showing the property owner name(s).
4. All applicable standards and criteria must be addressed in writing prior to acceptance of the application. Detailed descriptions, maps and other relevant information must be attached to the application.
5. Review fee(s) are due at the time of application.
6. To apply submit all materials to [planning@deschutes.org](mailto:planning@deschutes.org), apply in-person at 117 NW Lafayette Ave, Bend, or mail to Deschutes County Planning Division, PO Box 6005, Bend OR 97708.

**TYPE OF APPLICATION(S):**

**FEE:** \_\_\_\_\_

**Administrative Determination (AD)** \_\_\_\_\_

**Partition (MP)** \_\_\_\_\_

**Site Plan (SP)** \_\_\_\_\_

**Conditional Use (CU)** \_\_\_\_\_

**Subdivision (TP)** \_\_\_\_\_

**Declaratory Ruling (DR)** \_\_\_\_\_

**Nonconforming (NUV)** \_\_\_\_\_

**Variance (V)** \_\_\_\_\_

**Setback Exception (SE)** \_\_\_\_\_

**Other** \_\_\_\_\_

Applicant's Name (print): \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Applicant's Email Address: \_\_\_\_\_

Property Owner(s) Name (if different)\*: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Property Owner(s) Email Address: \_\_\_\_\_

1. Request: \_\_\_\_\_

2. Property Address: \_\_\_\_\_

3. Property Description: Township\_\_\_\_ Range\_\_\_\_ Section\_\_\_\_ Tax Lot(s)\_\_\_\_\_

4. Lot of Record? (state reason): \_\_\_\_\_

5. Property Zone(s): \_\_\_\_\_ Property Size (acres or sq. ft.): \_\_\_\_\_

- 6. Present Use of Property: \_\_\_\_\_
- 7. Existing Structures: \_\_\_\_\_
- 8. Property will be served by: Onsite Septic System \_\_\_\_\_ Sewer \_\_\_\_\_
- 9. Domestic Water Source: \_\_\_\_\_

To the best of my knowledge, the proposal complies with all previous conditions of approval and all other applicable local, state, and federal laws. By signing this application, I acknowledge that Deschutes County planning staff may make a site visit(s) to the address(es) listed on this application in order to evaluate the property(ies) with the Deschutes County Code criteria applicable to the land use request(s) submitted. Please describe any special circumstances regarding a potential site visit:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Property Owner's Signature (if different)\*: \_\_\_\_\_ Date: \_\_\_\_\_

Agent's Name (if applicable): \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Agent's Email Address: \_\_\_\_\_

**\*If this application is not signed by the property owner, a letter authorizing signature by the applicant must be attached.**