

CITY OF WESTFIR DEVELOPMENT APPLICATION



The following information must be fully completed in order to process your application. Some types of applications also require site plans, as noted below. Thank you for your cooperation.

Applicant's Name _____ **Phone No.** _____

Applicant's Address _____

Property Owner's Name _____

Property Owner's Address _____

Site Address _____ **Westfir, OR 97492**

Check one box:

Site Plan Required?

TYPE I: ADMINISTRATIVE DECISION	
<i>Director Decision (City Hall or City Council)</i>	
<input type="checkbox"/> Building / Site Plan Review	yes
<input type="checkbox"/> Minor Modifications / Additions	yes
<input type="checkbox"/> Sign Permit	yes
<input type="checkbox"/> Ordinance Variance (Fence)	yes
<input type="checkbox"/> Ordinance Variance (Animals)	no
<input type="checkbox"/> Temporary Use Permit *(Special Events less than 10 days)	yes
<i>Planning Commission Decision (req'd 30 days prior to mtg)</i>	
<input type="checkbox"/> Property Line Adjustment	yes
<input type="checkbox"/> Lot Consolidations	yes
<input type="checkbox"/> Ordinance Variance * (Building / Site Plan)	yes
TYPE III: QUASI-JUDICIAL (Public Hearing; req'd 45 days prior)	
<input type="checkbox"/> Conditional Use	yes
<input type="checkbox"/> Temporary Use Permit * (Temporary Structures)	yes
<input type="checkbox"/> Temporary Use Permit * (Mobile Home)	no
<input type="checkbox"/> Temporary Use Permit * (Seasonal & Special Events more than 10 days)	yes
<input type="checkbox"/> Home Occupation Permit	yes
<input type="checkbox"/> Major Modifications	yes
<input type="checkbox"/> Land Use Variance	yes

I understand that any false statements on this application or on any site plans may cause subsequent approval to be null and void.

Applicant's Signature: _____ **Date:** _____

FOR OFFICIAL USE ONLY

STAFF REVIEW

Date Received: _____ Received By: _____ File Name: _____

Fee paid Amount: \$ _____

Fee waived / No fee

Applicant's Signature

All required site plans

Date Notice Mailed (if applicable): _____

Planning Commission Hearing Date (if applicable): _____

City Council Meeting Date (if applicable): _____

DEVELOPMENT PERMIT APPROVAL

Approval Entity:

Planning Director (Type I)

City Council (Type I)

Planning Commission (Type I)

Planning Commission (Type III)

Approval Date: _____

Authorizing Signature: _____

Title: _____

NOTICE: The approval of this application, after all applicable conditions of approval have been met, constitutes a Development Permit under *The Westfir Land Development Code* Section 3.5.0, Development Permits.

City of Westfir
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