

LAND USE APPLICATION FORM

(Please print or type the information below)

Planning Department 39250 Pioneer Blvd. **Sandy OR 97055** 503-668-4886

Name of Project			
Location or Address			
Map & Tax Lot Numbe	r T, R, Secti	on; Tax Lot(s)	
Plan Designation	Zoning Desi	gnation	Acres
Request:			
		ne property listed above a ts true, complete and corn	
Applicant		Owner	
Address		Address	
City/State/Zip		City/State/Zip	
Phone		Phone	
Email		Email	
Signature		Signature	
If signed by Agent, owner's written authorization must be attached.			
File No.	Date	Rec. No.	Fee \$
Type of Review (circle one): Type I Type II Type III Type IV			