



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 Number T_____, R_____, Section_____; Tax Lot(s)_____

Plan Designation _____ Zoning Designation _____ Acres _____

Request:

I am the (check one) owner lessee of the property listed above and the statements and information contained herein are in all respects true, complete and correct to the best of my knowledge and belief.

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			