

255 N. Main Street • P.O. Box 188 Brownsville, OR 97327 • 541.466.5666 Fax 541.466.5118 • TT/TDD 800.735.2900

Fee: 750.00

Commercial Conditional Use Application

APPLICANT INFORMATION

Name of Applicant:		Phone:			
Mailing Address:					
Applicant is:	_Legal Owner	Contract Purchaser _	Agent	Renter	
DESCRIPTION OF SUBJ	ECT PROPERTY				
Legal Owner:	Phone:				
Mailing Address:					
Taxlot No:					
Address of Property:					
General Location: Fronting	neral Location: Fronting Side of Name or Number of Road				
DESCRIBE THE PROP	OSED CONDIT	IONAL USE			
EXISTING CONDITION	<u>NS</u>				
Zone:	Compreh	ensive Plan Designation_			
Present Use of Property					
Is the property serviced by c	ity sewer and water	?			

SUPPORTING REASONS FOR A CONDITIONAL USE REQUEST

The Brownsville Zoning Ordinance, Section 7.010 specifies criteria that must be addressed before granting a conditional use. Applicants must respond to the following criteria (refer to your site plan where appropriate):

1.	The proposal is consistent with the applicable policies of the Comprehensive Plan, the applicable provisions of the zoning ordinance and other applicable policies, regulations, and standards adopted by the City of Brownsville.
2.	The location, size, design and operating characteristics of the proposal will have minimal adverse impact on the livability, value, or appropriate development of abutting properties and surrounding area considering such factors as:
	A. Location, size, and bulk of buildings.
	B. Location, size, and design of parking areas.

	C. Screening, landscaping, exterior lighting, nours of operation, venicular access, and similar factors.
3.	The proposal will preserve those historical, archeological, natural, and scenic assets of significance to the community and the surrounding area.
4.	The proposal will not place an excessive burden on street, sewage, water supply, drainage systems, parks, schools or other public facilities in the area.
ATT	ACHMENTS
1.	A site plan, drawn to scale, showing the dimensions and arrangement of the proposed development.
2.	Filing Fee.

STATEMENT

I (we) hereby certify that the foregoing statements and answers and any other information (such as maps and drawing) attached hereto are true and accurate to the best of my (our) knowledge and belief.

<u>APPLIC</u>	ANT:			
(Name prir	nted)	(Signature)	(Date)	
(Name prir	nted)	(Signature)	(Date)	
<u>OWNER</u>	<u>k:</u>			
(Name prir	nted)	(Signature)	(Date)	
(Name prir	nted)	(Signature)	(Date)	
		FOR CITY USE ONLY		
		Date		
		Receipt No: _		
	City Administrate	or		