



City of The Dalles
Community Development Dept
313 Court Street
The Dalles, OR 97058
(541) 296-5481, ext. 1125
www.thedalles.org

Application #: _____

Filing Fee: _____

Receipt #: _____

Deemed Complete: _____

Ready to Issue: _____

Date Issued: _____

Received: _____

Land Use Application

Building Permit

Demolition

Physical Constraints

Change of Use

Property Line

Minor Partition /

Adjustment

Fence

Adjustment

Tract Map

Applicant

Name: _____

Address: _____

Phone #: _____

Email: _____

Legal Owner (if different than Applicant)

Name: _____

Address: _____

Phone #: _____

Email: _____

Property Information

Address: _____

Map and Tax Lot: _____

Project Description:

Department Use Only

City Limits: Yes No Zone: _____ Overlay: _____ Airport Zone: Yes No

Geohazard Zone: _____ Flood Designation: _____

Historic Structure: Yes No Current Use: _____

Previous Planning Actions:

Erosion Control Issues? Access Issues? Utilities and Public Improvements? Items Needing Attention?

Ministerial

Administrative

Quasi-Judicial

Application Policy

I certify that I am the applicant or owner identified below. I acknowledge that the final approval by the City of The Dalles, if any, may result in restrictions, limitations, and construction obligations being imposed on this real property. I understand that if the property is owned in part or totality by a trust, partnership, corporation or LLC, I will be required to present legal documentation listing all persons that make-up the entity, as well as proof of my authorization to act on the entity's behalf. I consent and hereby authorize City representative(s) to enter upon my property for any purpose of examination or inspection related to this application. I certify that all information provided is true and correct, and consent to the filing of the application, authorized by my original signature below.

If the undersigned is different from the legal property owner, a notarized letter of authorization signed by the legal property owner must accompany this form.

Signature of Applicant

Signature of Property Owner

Date

Date

Additional Information

Department Comments

Conditions of Approval

Decision

Approved

Denied

Community Development Department

Public Works

Date

Date