



REQUEST FOR PRE-APPLICATION CONFERENCE

555 S Main St | PO Box 7 Independence, OR 97351

Phone 503-838-1212 | Fax 503-606-3282

www.ci.independence.or.us

GENERAL INFORMATION

Project Address:

Project Summary:

PROPERTY OWNER

Name:

Mailing Address:

City:

State:

Zip:

Phone:

Cell:

Email:

Does the owner of this property own any adjacent property? Yes No

If yes, please list tax map and tax lots _____

Property Owner Signature:
(if more than one property owner, please attach multiple sheets)

Date:

APPLICANT

Name:

Business Name (if Applicable):

Mailing Address:

City:

State:

Zip:

Phone:

Cell:

Email:

Applicant's Interest in Property:

Applicant's Signature:

Date:

ADDITIONAL PERSONNEL

Name:

Role:

Business Name (if Applicable):

Mailing Address:

City:

State:

Zip:

Phone:

Email:

PROJECT DETAILS

Tax Map:

Tax Lot(s):

Frontage Street or Address:

Nearest Cross Street:

Comprehensive Plan Designation:

Zoning Designation:

Site Size:

Site Dimensions:

PRE-APPLICATION SUBMITTALS

- Pre-Application Form (Completed, Signed)** – The primary contact person responsible for the application must be identified on the form.
- Application Fees** – A \$300 fee, payable to the City of Independence.
- Project Narrative** – A narrative statement that describes the project, the improvements proposed, and the specific issues or questions that the applicant would like the City to address in the Pre-Application Conference.
- Site Plan** – A preliminary site plan to scale that shows:
 - Basic information to orient the project including a north arrow; the scale of the map/plan; abutting streets and alleys, including street names; property lines of the subject site; and the length of each line.
 - Existing and proposed driveway locations. Please label whether they are gravel or paved.
 - Existing and proposed structures on the site and the distance between the buildings and property lines.
 - Existing and proposed uses and the square footage of all buildings (if known).
 - Existing and proposed building entries for pedestrians and vehicles.
 - Existing and proposed parking areas.
- Optional Information** – The following optional information may also be included:
 - The location of any private wells, septic tanks and drainfields.
 - The location of any existing public or private recorded easements.
 - The location of private service laterals (both sewer and water) that are on the site.
 - The location of driveways on abutting properties.
 - The street elevations of the proposed buildings.

SIGNATURE

By signing this form, I certify that the above statements and the statements in the attachments and exhibits transmitted herewith are true. I also acknowledge that any permit subsequently issued on this application may be revoked if it is found that any such statements are false.

Authorized Signature: _____ Date: _____

Print Name: _____

OFFICE USE ONLY

Date Received:	Application Fee: \$300.00
Received By:	Meeting Date/Time: