

CROOK COUNTY BUILDING DEPARTMENT

300 NE 3RD STREET • PRINEVILLE, OREGON 97754 • (541) 447-3211 • FAX (541) 416-2139



PETITION TO NAME OR RENAME A ROAD

PROCEDURE AND REQUIREMENTS

12.12.230 Application

A request to name or rename a road shall be made as follows:

(1) A petition to name or rename a road may be submitted to the county building department. The petition shall include, at a minimum, the following:

- a) Signatures of not less than 75 percent of the residents along the road, plus, in the event a resident is not the legal or equitable title holder, the signatures of the last owner of record according to the county assessor's office.
- b) The name and phone number of the designated contact person.
- c) The location of the road by description and map.
- d) The legal status of the road, if known.
- e) The existing road name, if known.
- f) The proposed road name. (*A unique road name is recommended, also it is recommended that the Road Name be one that would be less likely to increase the chances for the sign to be stolen.*)
- g) The reason for the request.

Note: Any existing addresses may be subject to change in order to comply with Crook County Code 12.12.550

This petition must also be accompanied by the applicable fee. This fee is non-refundable, non-transferable, and applies to the road name requested in this petition/application only. Should the road name request be denied by County Court during the hearing process, a new petition/application and applicable fee would be required to submit a different name.

PROCESSING THE APPLICATION

Once your application is deemed complete, the Addressing Staff will begin processing your application. A hearing date will be set with the County Court and notice of the request will be sent to all residents abutting the road to determine the general consensus concerning the proposed road name. All affected agencies and departments will also be notified of the request. A recommendation and proposed order will be prepared for the County Court.

The County Court will conduct a public hearing on the recommendation and order at a regular court meeting. Following the public hearing, the court shall adopt, reject, or modify and adopt the proposed order. All parties of record will be notified, in writing, of the decision.

Attachment "A"



REQUEST

This is a request to: NAME A ROAD Proposed Name: _____

RENAME A ROAD Existing Name: _____

APPLICANT INFORMATION

If there is more than one applicant making this request, please designate a contact person.

Applicant Name: _____

Mailing Address: _____

Phone #: _____ Email: _____

ROAD INFORMATION

What is the legal status of the road? County Public Private Easement

Is this a Condition of Planning Approval? Yes No

Is there an approved Road Approach? Yes No

What is the reason for this request? _____

RESIDENT INFORMATION

How many residents currently use this road for access to their property? _____

Have you contacted and received signatures of concurrence of not less than 75% of the current residents (one signature per dwelling) along the subject road, plus, in the event a resident is not the legal or equitable title holder, the signature of the last owner of record according to the County Assessor's office? Yes No

If not, why? _____

****Note: This petition/application must be accompanied by the resident signatures and will not be deemed complete without this required documentation.***

Attachment "B"



RESIDENT NAMES & SIGNATURES

Resident 1.

Name _____

Address _____

Signature _____

Resident 2.

Name _____

Address _____

Signature _____

Resident 3.

Name _____

Address _____

Signature _____

Resident 4.

Name _____

Address _____

Signature _____

Resident 5.

Name _____

Address _____

Signature _____

Resident 6.

Name _____

Address _____

Signature _____

Resident 7.

Name _____

Address _____

Signature _____

Resident 8.

Name _____

Address _____

Signature _____

Resident 9.

Name _____

Address _____

Signature _____

Resident 10.

Name _____

Address _____

Signature _____

Resident 11.

Resident 12.



Name _____

Address _____

Signature _____

Resident 13.

Name _____

Address _____

Signature _____

Resident 15.

Name _____

Address _____

Signature _____

Resident 17.

Name _____

Address _____

Signature _____

Resident 19.

Name _____

Address _____

Signature _____

Resident 21.

Name _____

Address _____

Signature _____

Attachment "C"

Name _____

Address _____

Signature _____

Resident 14.

Name _____

Address _____

Signature _____

Resident 16.

Name _____

Address _____

Signature _____

Resident 18.

Name _____

Address _____

Signature _____

Resident 20.

Name _____

Address _____

Signature _____

Resident 22.

Name _____

Address _____

Signature _____



This petition/application must be accompanied by a legible map showing in detail the following:

- a. Location of proposed road
- b. Width of proposed road
- c. Length of proposed road
- d. All adjoining property
- e. All intersecting roads
- f. North Indicator
- g. Tax Map Numbers of properties using proposed road (13digit)

Note: Per Crook County Code 12.12.450, a Road Name sign is required. Please request a sign(s) manufactured to the required MUTCDM (Manual for Uniform Traffic Control Devices) specifications, from one of the following:

1. If the sign placement is to be *inside of* the Crook County Right of Way then call (541) 447-4644 – Crook County Road Department.
2. If the sign placement is to be *outside of* the Crook County Right of Way then search for a sign recycling vendor on-line or look under the ‘Signs’ heading in the Yellow Pages.





Crook County Community Development

300 NE 3rd Street, Prineville, OR 97754

Phone: (541) 447-3211 Fax: (541) 416-2139

Email: bld@co.crook.or.us Website: www.co.crook.or.us

AUTHORIZATION FORM

Let it be known that _____
(Print name clearly)

has been retained to act as my authorized agent to perform all acts for development on my property noted below. These acts include: Pre-application conference, filing applications, and/or other required documents relative to all permit applications in regards to this project.

Physical address of property: _____ and described in the records of
CROOK COUNTY, Oregon as map/tax number: _____

The costs of the above actions, which are not satisfied by the agent, are the responsibility of the undersigned property owner.

PROPERTY OWNER (Please print clearly)

Printed Name: _____ Date: _____

Signature: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

eMail: _____

Individual Corporation Limited Liability Corporation Trust

IMPORTANT NOTE: If the property is owned by an entity, include the names of all the authorized signers.

If a Corporation: Provide the name of the President, or other authorized signor (s).

If a LLC: Provide the names of ALL members and managers.

If a Trust: Provide the name of the current Trustee (s).

In addition, if you are a corporation, you will need to include a copy of the bylaws, an operating agreement if you are an LLC, or Certificate of Trust if you are a trust that verifies authority to sign on behalf of the entity

APPROVED AGENT

Printed Name: _____ Date: _____

Signature: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

eMail: _____