



*For Office Use Only*  
RECORD No. 217 \_\_\_\_\_ - \_\_\_\_\_ PLNG

**Crook County Community Development  
Planning Division**  
300 NE 3<sup>rd</sup> Street, Room 12, Prineville Oregon 97754  
541-447-3211  
[plan@co.crook.or.us](mailto:plan@co.crook.or.us)  
[www.co.crook.or.us](http://www.co.crook.or.us)

## Site Plan Modification

### PROPERTY OWNER

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Day-time phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Email: \_\_\_\_\_

### AGENT / REPRESENTATIVE

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Day-time phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Email: \_\_\_\_\_

### PROPERTY LOCATION

Township \_\_\_\_\_ South, Range \_\_\_\_\_ East WM, Section \_\_\_\_\_, Tax lot \_\_\_\_\_  
Size of property: \_\_\_\_\_ Acres Zoning: \_\_\_\_\_  
Physical address: \_\_\_\_\_  
Subdivision name, if applicable: \_\_\_\_\_

### FLOOD ZONE

Is the property located within a Flood Zone? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, submit a "Special Flood Hazard Area Development Permit".

**Original "Land Use" approval Permit Number:** \_\_\_\_\_

**Reason for your request for modification:**

**(Check all that apply)**

- Modifying Site Map from original approval.
- Approval has expired.
- Adding a new structure and verifying existing development records.
- Addition to existing structure and verifying existing development records.
- Other: \_\_\_\_\_

**Please attach any exhibits to better explain your reasons of modification.**

**Dwelling:**

Is this dwelling **Existing** or **Proposed**? (Circle one)

Is this dwelling a **Site Built Dwelling** or **Manufactured Home**? (Circle one)

What is the square footage?:

Dwelling/habitable: 1st floor \_\_\_\_\_ sq. ft. and 2nd floor \_\_\_\_\_ sq. ft.

Attached garage: 1st floor \_\_\_\_\_ sq. ft. and 2nd floor \_\_\_\_\_ sq. ft.

Number of stories: \_\_\_\_\_ Height: \_\_\_\_\_ (to the peak)

If the dwelling is a **Manufactured Dwelling** please complete the following:

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

**Accessory Structure #1**

Is this structure **Existing** or **Proposed**? (Circle one)

Building Use: \_\_\_\_\_

Size: 1st floor \_\_\_\_\_ sq. ft. and 2nd floor \_\_\_\_\_ sq. ft.

Height: \_\_\_\_\_ ft. to eave Number of stories: \_\_\_\_\_

Personal use: Yes \_\_\_\_\_ No \_\_\_\_\_ Commercial Use: Yes \_\_\_\_\_ No \_\_\_\_\_

Is this structure a **cargo container**? Yes \_\_\_\_\_ No \_\_\_\_\_

Is this an addition to an existing accessory structure: Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what is the existing accessory structure size: \_\_\_\_\_ sq. ft.

If you answer yes to any of the below, a floor plan of the structure will be required with submittal.

Will there be:

Bedrooms? Yes \_\_\_\_\_ No \_\_\_\_\_

Plumbing? Yes \_\_\_\_\_ No \_\_\_\_\_

Electrical? Yes \_\_\_\_\_ No \_\_\_\_\_

Mechanical? Yes \_\_\_\_\_ No \_\_\_\_\_

## **Accessory Structure #2**

Is this structure **Existing** or **Proposed**? (Circle one)

Building Use: \_\_\_\_\_

Size: 1st floor \_\_\_\_\_ sq. ft. and 2nd floor \_\_\_\_\_ sq. ft.

Height: \_\_\_\_\_ ft. to eave Number of stories: \_\_\_\_\_

Personal use: Yes \_\_\_\_\_ No \_\_\_\_\_ Commercial Use: Yes \_\_\_\_\_ No \_\_\_\_\_

Is this structure a **cargo container**? Yes \_\_\_\_\_ No \_\_\_\_\_

Is this an addition to an existing accessory structure: Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what is the existing accessory structure size: \_\_\_\_\_ sq. ft.

If you answer yes to any of the below, a floor plan of the structure will be required with submittal.

Will there be:

Bedrooms? Yes \_\_\_\_\_ No \_\_\_\_\_

Plumbing? Yes \_\_\_\_\_ No \_\_\_\_\_

Electrical? Yes \_\_\_\_\_ No \_\_\_\_\_

Mechanical? Yes \_\_\_\_\_ No \_\_\_\_\_

**If there are more than 2 structures, please attach an additional page.**

## **ACCESS / ROADS**

Is there existing access to the property? Yes \_\_\_\_\_ No \_\_\_\_\_

The access is from what kind of road: County \_\_\_\_\_ Public \_\_\_\_\_ Private \_\_\_\_\_ State (ODOT) \_\_\_\_\_

\*Provide recorded easement or ODOT approval

Road Approach Permit Number: \_\_\_\_\_

**If there isn't an existing permit, a grandfather road approach will be required for County or Public.**

## **DOMESTIC WATER**

Water will be supplied by:

\_\_\_\_\_ An existing or proposed individual well

\_\_\_\_\_ 4 to 14 dwellings on one well State regulated system

\_\_\_\_\_ Shared well (Number of dwellings \_\_\_\_\_)

\_\_\_\_\_ Other: Please explain \_\_\_\_\_

\_\_\_\_\_ Community Water System: Name \_\_\_\_\_

### **Community Water System Authorization**

Print Name: \_\_\_\_\_ Daytime phone: \_\_\_\_\_

Authorization Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**IRRIGATION WATER**

Does the property have irrigation water right? Yes \_\_\_\_\_ No \_\_\_\_\_

If the property has irrigation water rights, who is the supplier:

\_\_\_\_\_ Central Oregon Irrigation District - 541-548-6047

\_\_\_\_\_ Ochoco Irrigation District - 541-447-6449

\_\_\_\_\_ Water Resources Department - 541-306-6885

\_\_\_\_\_ People’s Irrigation District - 541-447-7797

\_\_\_\_\_ Other: \_\_\_\_\_

**Watermaster Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Print Name Clearly: \_\_\_\_\_ Phone: \_\_\_\_\_

**Irrigation District Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Print Name Clearly: \_\_\_\_\_ Phone: \_\_\_\_\_

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ON-SITE SEPTIC – WASTEWATER:**

Soil/Site Evaluation Crook County File #: \_\_\_\_\_

Existing System Permit #: \_\_\_\_\_

**SUPPLEMENTAL INFORMATION**

IMPORTANT NOTICE: The Crook County Planning Department is required to review all applications for accuracy and to determine whether the staff and/or the Planning Commission have the information needed to make a decision. The County has 30 days to determine whether the application is complete. Within that 30-day period, the Planning Department will request additional information, if necessary. A decision on your application will be postponed until the information is received. State law requires that all information to support an application be available for public inspection at our office 20-days before a public hearing. Any information submitted after this date may require a postponement of the hearing date if necessary. Please make sure your application is complete. The burden of proof lies with the applicant.

## **SIGNATURES**

I agree to meet the standards governing the laws as outlined in the State of Oregon's OAR, ORS, Crook County Code, and Crook County – Prineville Comprehensive Plan. I agree that all the information contained in this application is true to the best of my knowledge.

Property Owner Signature: \_\_\_\_\_ Date \_\_\_\_\_

Print name: \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_ Date \_\_\_\_\_

Print name: \_\_\_\_\_

Agent/Representative Signature: \_\_\_\_\_ Date \_\_\_\_\_

Print name: \_\_\_\_\_

## **CHECK LIST OF REQUIREMENTS**

- Signed application form
- Copy of the current owners Warranty Deed
- Signed Authorization Form; if applicable
- Detailed "Plot Plan/Site Plan" of the subject property
- Special Flood Hazard Area Development Permit; if applicable
- Supplemental Information



## 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: \_\_\_\_\_

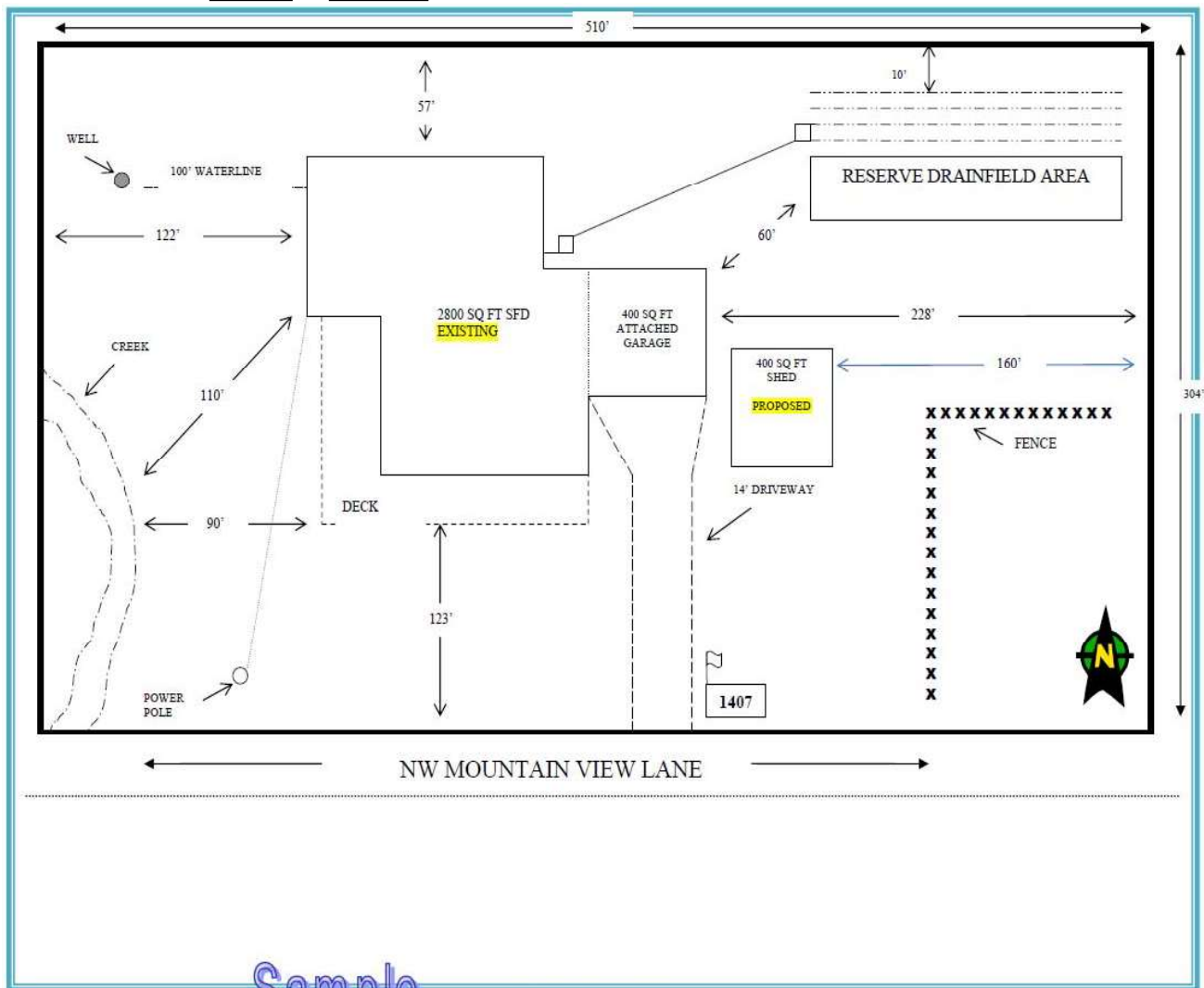
Phone: \_\_\_\_\_

eMail: \_\_\_\_\_

**PLOT PLAN REQUIREMENTS**

“PLOT PLAN” MUST BE DRAWN ON AT LEAST 8 ½ X 11 PAPER, BUT NO LARGER THAN 8 ½ X 14. A PARCEL THAT IS 2 ACRES OR LESS IN SIZE MUST BE DRAWN TO SCALE, AND ALL DIMENSIONS AND BOUNDARIES MUST BE SHOWN. A PARCEL THAT IS MORE THAN TWO ACRES IN SIZE DOES NOT HAVE TO BE DRAWN TO SCALE, HOWEVER, ALL DIMENSIONS AND BOUNDARIES MUST BE SHOWN AND ALL INFORMATION MUST BE ACCURATE. THE DETAILED “PLOT PLAN/SITE PLAN” MUST INCLUDE THE FOLLOWING:

- NORTH ARROW.
- DIMENSIONS AND BOUNDARIES OF THE PROPERTY.
- LOCATION & WIDTH OF ALL EASEMENTS OR RIGHT-OF WAYS.
- IF THE PARCEL OR LOT HAS IRRIGATION WATER RIGHT, INDICATE THE AREA OF THE WATER RIGHT WITH THE NUMBER OF IRRIGATED ACRES. IN ADDITION, SUBMIT A COPY OF A WATER RIGHT MAP FROM THE DISTRICT.
- NAMES AND LOCATIONS OF ALL ROADS ADJACENT TO THE PROPERTY.
- LOCATION OF WELL OR WATER SOURCE ON YOUR PROPERTY. IN ADDITION, INDICATE THE DISTANCE FROM WATER SOURCE TO NEAREST POINT OF SEPTIC SYSTEM DRAIN FIELD AND / OR REPLACEMENT DRAIN FIELD AREA.
- LOCATION OF DRIVEWAYS OR OTHER ROADS ON THE PROPERTY, EXISTING AND PROPOSED.
- DISTANCE (SETBACKS) FROM ALL STRUCTURES TO ALL PROPERTY LINES.
- LOCATION OF ALL MAJOR FEATURES (CANALS, IRRIGATION DITCHES, RIMROCK, ROCK LEDGES, ETC)
- INDICATE LOCATION OF ALL “EXISTING” AND “PROPOSED” STRUCTURES: DWELLINGS, GARAGE, SHOPS, LEAN-TO, BARN, ETC. INDICATE ON THE PLOT PLAN IF EXISTING OR PROPOSED WITH DIMENSION SIZE.



Sample

- NOT TO SCALE -



# SITE PLAN

