



Land Use Planning Division
 1600 SE 190th Ave
 Portland OR 97233
 Ph: 503-988-3043 Fax: 503-988-3389
<https://multco.us/landuse/>

**TYPE 1
 APPLICATION
 FORM**

PROPERTY IDENTIFICATION

Property Address _____

State Identification _____ Site Size _____

A&T Alternate Account Number R# _____

OTHER PARCEL (if applicable)

Property Address _____

State Identification _____ Site Size _____

A&T Alternate Account Number R# _____

PROPERTY OWNER(S) OR CONTRACT PURCHASER(S)

Name _____

Mailing Address _____

City _____ State _____ Zip Code _____ Phone# _____

I authorize the applicant below to make this application.

 Property Owner Signature #1

 Property Owner Signature #2

NOTE: By signing this form, the property owner or property owner's agent is granting permission for Planning Staff to conduct site inspections on the property.

If no owner signature above, a letter of authorization from the owner is required.

APPLICANT'S NAME AND SIGNATURE

Applicant's Name _____

Mailing Address _____

City _____ State _____ Zip Code _____ Phone # _____

Fax _____ E-mail _____

 Applicant's Signature

GENERAL DESCRIPTION OF APPLICATION (REQUIRED)

Please provide a brief description of your project and permits you are seeking.

For Staff Use

CASE NUMBER

LAND USE PERMIT(S)

DATE SUBMITTED

RECEIVED BY

Compliance Related

Adjacent to Washington/
 Clackamas/Columbia
 County

PF/PA No.

Related Case No.

Related Case No.

ZONING

Zoning District

Zoning Overlay