

Ph: 503-988-3043 Fax: 503-988-3389

https://multco.us/landuse/



FORM

	±
PROPERTY IDENTIFICATION	Paid: 16-Mar-2022 15:26:19 PDT
Property Address 16900 NW Sauvie Island Rd	Method: CC Fees: LOR \$990.00
State Identification Site Size 20.5 Acre	NF \$241.00 Total: \$1,231.00
A&T Alternate Account Number R# R325150	
OTHER PARCEL (if applicable)	For Staff Use
Property Address <u>N/A</u>	CASE NUMBER
State Identification Site Size	T2-2022-15447
A&T Alternate Account Number R#	LAND USE PERMIT(S)
PROPERTY OWNER(S) ♥ OR CONTRACT PURCHASER(S) □	LOR
Name Michael Robideau	
Mailing Address 16900 NW Sauvie Island Rd	DATE SUBMITTED
City Portland State OR Zip Code 97231 Phone#	_03/16/2022
I authorize the applicant below to make this application.	RECEIVED BY
Mytho Motor Ca	RK/HK
Property Owner Signature #1 Property Owner Signature #2	Compliance Related □
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.	Adjacent to Washington/
If no owner signature above, a letter of authorization from the owner is required.	Clackamas/Columbia County □
APPLICANT'S NAME AND SIGNATURE	N/A
Applicant's Name Patrick Maker	PF/PA No.
Mailing Address 5429 SE 72W Ave	TO 2021 14261
City Portland State OR Zip Code 97206 Phone #503-935-3005	T2-2021-14361 Related Case No.
Fax N/A E-mail atlastow at Gmail. com	Related Case 140.
And Muhan	Related Case No.
/ Applicant's Signature	Related Case No.
GENERAL DESCRIPTION OF APPLICATION (REQUIRED)	Zoning
Please provide a brief description of your project and permits you are seeking. Neguest for a lot of vecord verication and the seeking.	EFU
on Tax lot 1100.	Zoning District
TWO III TO THE TOTAL THE TOTAL TO THE TOTAL TO THE TOTAL	FH
	Zoning Overlay