



# *Vacation Checklist*

City of Klamath Falls Development Services, 226 South 5th Street, Klamath Falls, OR 97601

## **REQUIRED CONTENTS**

- Completed General Review and Vacation Application forms (**TO BE COMPLETED IN INK**)
- Public Notice Mailing List (property owner mailing list)
- Completed Acknowledgement of Mailing List Form
- Consent of Landowner Forms/Consent Petitions (all abutting the proposed vacation and at least two-thirds of the affected area)
- Completed Applicant and Owner Statement form and Copy of Deed
- Vicinity Map (Tax Map/Assessor's Map) identifying:
  - the area to be vacated
  - the affected properties (all properties to be notified – show parallel street or 200 foot radii, and 400 foot radii)
- Legal description of area to be vacated
- \$600 Application Fee
- Mailing Notice Costs (current postage rate + 10 cents x number of property owners)
- Legal Notice Costs (this will be billed and shall be paid within 30 days of the final decision on the application)

## **Remember: a vacation may only be approved if it meets all applicable review criteria as follows:**

- Consent of landowners in affected area has been obtained (2/3 of affected landowners)
- Notice of the proposed vacation has been duly given (the City will file Notice)
- The public interest will not be prejudiced by the vacation
- The proposed vacation conforms to the Comprehensive Plan, all applicable provisions of Chapters 10-14 and any applicable street plans

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# General Review Application

City of Klamath Falls Development Services  
226 South 5<sup>th</sup> Street, Klamath Falls, OR 97601

File Number(s): \_\_\_\_\_

### OFFICIAL USE ONLY

Date Received: \_\_\_\_\_ Date Application Complete: \_\_\_\_\_  
 Hearing Date: \_\_\_\_\_ Date of Pre-App Meeting: \_\_\_\_\_  
 ⌄ DATE OF DLCD NOTICE—FOR ANNEXATION AND ZONE CHANGE ONLY ⌋  
 Notice of Proposal: \_\_\_\_\_ Notice of Adoption: \_\_\_\_\_

### APPLICATION TYPE

⌄ Applications processed through the City Planning Department – *Check all that apply* ⌋

- Design Review—Major (\$750)
- Design Review—Minor (\$300)
- Conditional Use Permit (\$1,000)
- Variance—Major (\$750)
- Variance—Minor (\$300)
- Annexation (\$500)
- Land Partition—Tentative (\$750)
- Subdivision—Tentative (\$1,500)
- Zone Change (\$2,000)
- Nonconforming Use Exception (\$175)
- Other → Please Describe: \_\_\_\_\_

### APPLICANT INFORMATION

*Please check primary contact person*

**TO BE COMPLETED IN INK**

Landowner Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
 Applicant Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
 Agent (e.g. Architect, Engineer, Surveyor): \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
 City Business License No: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

### SUBJECT SITE INFORMATION

Property Address: \_\_\_\_\_  
 Map & Tax Lot Number(s): \_\_\_\_\_  
 Subdivision, Lot & Block: \_\_\_\_\_  
 Current Zoning: \_\_\_\_\_ Total Size of Parcel(s): \_\_\_\_\_  
 Describe current uses, existing structures, other improvements and vegetation on the property: \_\_\_\_\_  
 \_\_\_\_\_  
 Existing easements and/or deed restrictions—Purpose and Description: \_\_\_\_\_  
 \_\_\_\_\_  
 Volume & Page Number: \_\_\_\_\_

(continued)

**PROJECT INFORMATION**

- Briefly describe the project and proposed use: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Will any portion of the facility, once operational, be age restricted?  Yes  No

**TRAFFIC STATEMENT**

- Describe the amount of traffic the proposal will generate and the impact on local streets and traffic conditions: \_\_\_\_\_  
\_\_\_\_\_

**ENVIRONMENTAL IMPACTS**

- Describe any noise potentially generated by the proposed use (including during construction): \_\_\_\_\_  
\_\_\_\_\_
- Describe pollution emissions that will be generated by the proposed use: \_\_\_\_\_  
\_\_\_\_\_
- Describe the impact of the proposal on adjacent scenic views, historical resources or other environmental resources: \_\_\_\_\_  
\_\_\_\_\_

**CONSTRUCTION IMPACTS**

- If excavation or fill is planned, explain the purpose, location and amount of each: \_\_\_\_\_  
\_\_\_\_\_
- If tree removal is planned, explain the purpose of removal and the location and number of trees to be removed: \_\_\_\_\_  
\_\_\_\_\_

**PLEASE NOTE**

- If driveways are planned as part of your proposal, please note the type (residential or commercial), width and location of each on the site plan.
- If sidewalks are planned, show the width and location on the site plan.
- If water and sewer are planned, show the main lines and service lines on the site plan.
- If storm water is planned, show the main lines and service lines or on-site detention/retention on the site plan.



# Vacation Application

City of Klamath Falls Development Services  
226 South 5<sup>th</sup> Street, Klamath Falls, OR 97601

File Number: _____
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## APPLICANT INFORMATION

*Please check primary contact person*

**(TO BE COMPLETED IN INK)**

Landowner Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

General Contractor: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contractor's License No: \_\_\_\_\_ City Business License No: \_\_\_\_\_

## PROPERTY INFORMATION

Property Address: \_\_\_\_\_

Map & Tax Lot Number(s): \_\_\_\_\_

Subdivision, Lot & Block: \_\_\_\_\_

Current Zoning: \_\_\_\_\_ Total Size of Parcel(s): \_\_\_\_\_

Describe the area to be vacated (current use, dimensions, etc.): \_\_\_\_\_

\_\_\_\_\_

Briefly describe proposed use after the vacations: \_\_\_\_\_

\_\_\_\_\_

## REQUIRED FINDINGS

The Community Development Ordinance (Sections 13.005-13.055) and Oregon Revised Statutes (271.080-271.230) allow the granting of a vacation only when all of the findings required by law can be made. Please explain below how you think the requested vacation will satisfy the required findings.

1. Explain how the public interest will not be prejudiced if the vacation is granted:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>FILE INFORMATION</b> <i>Official Use Only</i>	
File Number: _____	Concurrent Application: _____
Date Received: _____	Hearing Date: _____
Consent Petitions: _____	

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# Mailing List and Consent Petitions

City of Klamath Falls Development Services, 226 South 5<sup>th</sup> Street, Klamath Falls, OR 97601

## INSTRUCTIONS FOR PROVIDING PUBLIC HEARING NOTICE INFORMATION AND OBTAINING CONSENT PETITIONS FOR A VACATION:

When applying for a vacation, please provide the information necessary for notifying nearby property owners about all public hearings for your project. This information will also be useful to you when obtaining signed petitions of consent.

Obtain a current copy of the county assessor maps (tax maps) that include the area to be vacated and the affected area: *all parcels abutting the proposed vacation area and extending laterally to the next street that serves as a parallel street* (or a maximum of 200 feet). In addition, land located within *400 feet of both terminus* of the proposed vacation shall also be included. Clearly outline on the map(s) your property and the area proposed for vacation. Also, draw two lines indicating the distances of 200 feet (if appropriate) and 400 feet from both terminus (affected area). Check the scale shown on each map and use the adjoining maps if necessary to include all property. *See example on the back of this form.*

As required by Oregon Revised statute 271.080, signed petitions of consent from all property owners abutting the proposed vacation and at least two-thirds of property owners in the affected area must be obtained. If the vacation involves a plot (or portion of a plot) the consent of the owners of two-thirds of the property included within the plot to be vacated shall be sufficient. When the vacation of a street and plat is proposed, then the requirements regarding consent for street vacations shall apply.

Obtain names, addresses and tax lot numbers of all owners of property abutting the proposed vacation and those in the affected area, as listed on the last preceding tax roll of the Assessor of Klamath County. List the above information on the attached form, in the following order:

1. Tax Account Number
2. Property Owner Name
3. Street Address
4. City, State and Zip Code

**NOTE:** Type or print labels on the form LEGIBLY, or the mailing list will be returned. Typed mailing labels will speed up the application process.

You are required to pay for the Mailing Notice costs (current postage rate x number of property owners to be notified) along with your application fee. You are also required to pay for Legal Notice costs which will be billed to you and shall be paid within 30 days of the final decision.

### ACKNOWLEDGMENT OF MAILING LIST

STATE OF OREGON  
 COUNTY OF KLAMATH  
 CITY OF KLAMATH FALLS } SS

I, \_\_\_\_\_, do hereby certify that on the \_\_\_\_\_ day of \_\_\_\_\_, I submitted with my application, such names, addresses and tax account numbers as are listed on the last preceding tax roll of the Assessor of Klamath County.

That said list contains a true copy of all property owners within the affected area as defined in 271.080 (2).

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_

Notary Public for Oregon \_\_\_\_\_

THIS MAP WAS PREPARED FOR ASSESSMENT PURPOSE ONLY.

# KLAMATH COUNTY

1407

SEE MAP 38 09 33A0



SCALE

APPROX 1/8 COR.

KLAMATH FALL CITY LIMITS

SUBJECT PROPERTY 2  
NORTH ARROW  
ADJOINING MAP  
NEXT PARALLEL STREET 2

400' RADIUS

400' RADIUS

SUBDIVISION 2

TAX LOT NUMBER 2

BLOCK NUMBER 2

LOT NUMBER 2

SEE MAP 38 09 33B0

SEE MAP 38 09 34C0

## DARROW

647	646	645	644	643	642	641	640
3700	3800	3500	3400	3300	3200	3100	3000

4800	4500	4400	4300	4200	4100	4000	3900
655	654	653	652	651	650	649	648

## (FOURTH) AVE.

625	624	623	622	621	620	619	618	617	616	615	614	613	612
1200	1200	1000	1000	1000	900	800	700	600	500	400	300	200	100

2900	2800	2700	2600	2500	2400	2300	2200	2100	2000	1900	1800	1700	1600
639	638	637	636	635	634	633	632	631	630	629	628	627	626

## MILLS

739	738	737	736	735	734	733	732
4700							

4700							
747	746	745	744	743	742	741	740

## (APPGATE) AVE.

717	716	715	714	713	712	711	710	709	708	707	706	705	704
8100	8000	5200	5800	5700	5600	5500	5400	5300	5200	5100	5000	4900	4800

7400	7300	7200	7100	7000	6900	6800	6700	6600	6500	6400	6300	6200		
7500	731	730	728	728	727	726	725	724	723	722	721	720	719	718

## RECLAMATION AVE.

1200	7	6	5	4	3	2	1
10200	10100	10000	10900	10800	10700	10600	10500

14	13	12	11	10	9	8	7	6	5	4	3	2	1
8900	8800	8700	8600	8500	8400	8300	8200	8100	8000	7900	7800	7700	7600

## WANTLAND

12600	12500	12400	12300	12200	12100	12000	11900
12700	12800	12800	13000	13100	13200	13300	13400

## AVE.

14700	14600	14500	14400	14300	14200	14100	14000	13900	13800	13700	13600	13500
14800	14900	15000	15100	15200	15300	15400	15500	15600	15700	15800	15900	16000

## EBERLEIN

## AVE.

SEE MAP 38 09 33D0

MAP NUMBER 2 38-09 33DA



# ***Consent Petition***

City of Klamath Falls Development Services, 226 South 5<sup>th</sup> Street, Klamath Falls, OR 97601

The undersigned hereby consent and agree with the vacation of the following: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

We understand that this consent will be attached to the Application for Vacation which will be filed.

Print Name: \_\_\_\_\_

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

Address: \_\_\_\_\_ Tax Account Number: \_\_\_\_\_

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# ***Applicant & Owner Statement***

City of Klamath Falls Development Services, 226 South 5<sup>th</sup> Street, Klamath Falls, OR 97601

I (we) the undersigned applicant(s) and/or owner(s) of the parcel of land located at the address listed below; identified as the Tax Account Number(s) also listed below, realize that this application rests upon the above answers and accompanying data and do hereby affirm and certify under penalty of perjury, that the foregoing statements and answers are in all respects true and correct to the best of my/our knowledge. By submission of this application, the owner and developer hereby grant the City permission to erect a public notice sign on the subject property for public information purposes.

Subject Property Address: \_\_\_\_\_

Subject Property Tax Account Number(s): \_\_\_\_\_

**APPLICANT(S):**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

If the applicant listed on this application is not the sole deed holder of the property or properties described above, complete the following or submit a separate written authorization from the owner:

**AUTHORIZATION TO ACT AS AGENT**

I (we) the undersigned, hereby certify that as deed holder(s) of record of property or properties described above, hereby authorize the person(s) listed as the applicant(s) on this application to act and appear as agent, with respect to this application.

**LANDOWNER(S):**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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