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

### REZONING APPLICATION SUPPLEMENT

Please answer the following questions. Attach additional sheets if necessary

### **REQUIRED FINDINGS**

The Community Development Ordinance (Sections 11.400-11.440) and the Oregon Revised Statutes (Chapter 227) regulate rezoning within the City limits. Zone changes may only be approved when all the findings required can be made. Please complete this form to explain how you think the requested change of zoning will satisfy the required findings.

1.		owed in conjunction with such zo	is adequate in size and shape to accommoning.	
2.	The site for the proposed use must be served by streets and highways adequate in width and pavement type to carry the quantity of traffic generated by the proposed use.  How wide and what pavement type are the streets/highways adjacent to the proposed site?			
	Street #1 Name	Width	Pavement type	
	Street #2 Name	Width	Pavement type	
	Street #3 Name	Width	Pavement type	
	Street #4 Name	Width	Pavement type	
	How much traffic is the propo	osed use going to generate (cars	per day)?	
3.	Explain what types of effects those properties.	s the proposed use will have on	abutting properties or the permitted us	ses on
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## Zone Change Checklist

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	Strongly recommended: Attend a Pre-Application meeting with City Staff (Cost: 10% of the filing fee. This fee will be credited toward the filing fee.)			
<u>RE</u>	REQUIRED CONTENTS			
	Completed General Permit Application (TO BE COMPLETED IN INK)			
	Completed Zone Change Application (TO BE COMPLETED IN INK)			
	Public Notice Mailing List (Property owner mailing list for a 500 foot radius)			
	Completed Acknowledgment of Mailing List Form			
	Completed Applicant and Owners Statement Form and Copy of Deed			
	Site Plan (10 copies on 8 ½" X 11" sheets for lots less than 10,000 square feet; for larger lots, provide 10 copies; at least on must be 11" X 17" & the others may be a maximum of 24" X 36" sheets) including:			
	<ul> <li>□ Date</li> <li>□ North arrow</li> <li>□ Written &amp; graphic scale</li> <li>□ Location &amp; type of handicap access</li> <li>□ Location &amp; dajacent streets</li> <li>□ Existing Utilities (easements, poles, lines, etc.)</li> <li>□ Existing site features</li> <li>□ Present zoning &amp; intended use of the property</li> <li>□ Location of existing &amp; proposed signs</li> <li>□ Lot &amp; building dimensions, setback dimensions &amp; height of all existing structures</li> <li>□ Proposed layout of parking lot, including location &amp; dimension of parking spaces, handicap parking spaces, curb islands, internal planter strips, maneuvering aisles &amp; access driveways indicating directions of travel</li> <li>□ Location of all recreational amenities such as open play areas, swimming pools, tennis courts, tot lots, etc.</li> <li>□ Site data in tabular form: total area of property, building coverage, existing gross floor area, parking lot coverage, parking lot landscape coverage, and number of parking stalls required</li> <li>□ Finished floor elevations-show existing grade contours and finished grades or contours clearly</li> <li>□ Size &amp; location of all existing and proposed public and private utilities, easements or rights-of-way</li> <li>□ Location, dimensions and names of proposed internal streets showing center line radii and curb return radii (location and dimensions of sidewalks shall also be shown)</li> <li>□ Proposed gross floor area and number of residential units as appropriate (in tabular form)</li> <li>□ Residential Stormwater Plan including:</li> <li>□ Existing and proposed final grade</li> <li>□ Cut/Fill quantities in cubic feet</li> <li>□ Square footage of new impervious areas (pavement, roofs, etc.)</li> <li>□ Where and how stormwater will be directed from all impervious areas</li> <li>□ How erosion will be prevented after construction is complete</li> </ul>			
	Vicinity Map (indicating the relationship and forms of existing developments in the general area)			
	Application fee \$500			
	Mailing Costs (Current postage rate plus 10 cents multiplied by the number of property owners-Major Design Review only)			
	Legal Notice Costs (this will be billed and shall be paid within 30 days of the final decision on the application)			

AR	REMET:
	The zone change must be in conformance with the Comprehensive Plan and all other provisions of Chapters 10-14 and any applicable street plans.
	The property affected by the zone change is adequate in size and shape to facilitate those uses that are normally allowed in conjunction with such zoning.
	The property affected by the proposed zone change is properly related to streets to adequately serve the type of traffic generated by such uses that may be permitted therein.

☐ The proposed zone change will have no adverse effect on abutting property or the permitted uses thereof.

REMEMBER: REZONING MAY ONLY BE APPROVED IF ALL OF THE APPLICABLE REVIEW CRITERIA

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 dee described above, complete the following or submit a separate wri		
AUTHORIZATION TO ACT AS	SAGENT	
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:	



## General Review Application

City of Klamath Falls Planning Department

	/
File Number(s):	

226 South 5<sup>th</sup> Street, Klamath Falls, OR 97601

	OFFICIAL USE ONLY	
Date Received:	Date Application Complet	e:
Hearing Date:	Date of Pre-App Meeting:	
FDATE OF DLCD NO	OTICE—FOR ANNEXATION AND ZONE	CHANGE ONLY I
		_
$\Gamma$ Applications processed th	APPLICATION TYPE nrough the City Planning Departme	ent – Check all that apply ↓
☐ Design Review—Major (\$300)	☐ Design Review—Minor (\$100)	☐ Conditional Use Permit (\$350)
☐ Variance—Major (\$250)	☐ Variance—Minor (\$125)	☐ Annexation (\$500)
☐ Land Partition—Tentative (\$250)	☐ Subdivision—Tentative (\$500)	☐ Zone Change (\$500)
☐ Nonconforming Use Exception (\$175)	☐ Other → Please Describe:	
Please check primary contact person	APPLICANT INFORMATION	TO BE COMPLETED IN INK
☐ Landowner Name:	Da	ytime Phone:
Mailing Address:	E-	Mail:
☐ Applicant Name:	Da	ytime Phone:
Mailing Address:	E-	Mail:
☐ Agent (e.g. Architect, Engineer, Survey	or):	
Mailing Address:	E-	Mail:
City Business License No:	ytime 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:		
PROJECT INFORMATION		
Briefly describe the project & proposed use:		
TRAFFIC STATEMENT  • Describe the amount of traffic the proposal will generate & its 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 environmen resources:		
CONSTRUCTION IMPACTS		
If excavation or fill is planned, explain the purpose, location and amount of each:		

•	f tree removal is planned, explain the purpose of removal and the location and number of trees to l	De
	emoved:	
EC	NOMIC IMPACTS	
•	New Business or Expansion:	
•	New Employment Positions:	
•	stimated Valuation:	
•	Estimated Revenue:	

### 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.

City of Klamath Falls Planning Department – Phone: (541) 883-5361 Fax: (541) 883-5390



# Public Hearing Notice Mailing List

City of Klamath Falls Planning Department, 226 South 5th Street, Klamath Falls, OR 97601

#### INSTRUCTIONS FOR PROVIDING PUBLIC HEARING NOTICE INFORMATION FOR:

Subdivision, Urban Growth Boundary, Zone Change

When applying for any of the above, please provide the information necessary to notify the nearby property owners about all public hearings for your project. This information is to be provided in the following manner:

Obtain a current copy of the County Assessor map (tax maps) that include your project site and all parcels within 500 feet of any part of the parcel on which your project is located, including public rights-of-way. The exterior property lines of the parcel(s) on which your project is located, even if your project will occupy only a portion of the parcel(s), must be clearly outlined on the map, and another line must be clearly drawn indicating a distance of 500 feet from all exterior property lines you have outlined. Check the scale shown on each map (they may be different), and use the adjoining maps if necessary to include all property within 500 feet. The County Assessor Office may be able to print a list of addresses for you. If interested, you may inquire with them at the County Government Center at 305 Main Street, Klamath Falls, OR 97601.

Obtain names, addresses and tax lot numbers of all owners of property within 500 feet, as listed on the last preceding tax roll of the Assessor of Klamath County. List the above information in the following order:

	Tax Account Number Property Owner Name Street Address City, State and Zip Code	
NOTE: Type or print labels on the form provided or on a sheet of labels. Print them legibly or the mailing list will be returned. Typed mailing labels will speed the application process.		
You are required to pay for the Mailing Notice costs (current postage rate plus 10 cents multiplied by the number of property owners to be notified) with your application fee.  You may also be required to pay for Legal Notice costs. These costs will be billed to you and shall be paid within 30 days of the final decision.		
	ACKNOWLEDGMENT OF MAILING LIST	
STATE COUNT CITY O	OF OREGON TY OF KLAMATH OF KLAMATH FALLS	
	, do hereby certify that on theday of, I submitted y application, such names, addresses and Tax Account Numbers as are listed on the last preceding tax roll of the or of Klamath County.	
That said list contains a true copy of all property owners within 500 feet of the subject property.		
Applica	ants SignatureDate	
Subscribed and Sworn to before me thisday of		
Notary Public for Oregon		