



CITY OF LYONS

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LYONS, OREGON 97358
cityoflyons@wavecable.com

Received By: _____

Date: _____

Paid: _____

CONDITIONAL USE PERMIT APPLICATION

Name of applicant: _____

Applicant's Contact Information

Mailing Address: _____

Phone Number: _____ email: _____

Address of subject property: _____

TWP: _____ RANGE: _____ SEC: _____ TAX LOT: _____

Zoning on property: _____

Size and dimensions of property: _____

Current uses of property: _____

Proposed uses on property: _____

Describe the physical features on the properties surrounding the subject property: _____

Describe the vehicular access to the property: _____

Is there currently water hook-up to the property? _____

Has Environmental Health approved the septic system for the proposed use? (attach copy of approval)_____

Reason for the request:_____

In order to approve a request for a conditional use permit, the City must determine that the request meets the criteria listed below. Please comment on each one.

1. The location, size, design, and operating characteristics of the proposed development are compatible with and will not adversely affect the livability or appropriate development of abutting properties and the surrounding neighborhood. _____

2. The proposed development site has the physical characteristics needed to support the use considering factors such as potential drainage problems and access to a public street. _____

3. The proposed development will not unduly affect the capacity of current public facilities, including streets and utility systems. _____

4. The proposed development is consistent with the goals and policies in the comprehensive plan. _____

Attach a scale drawing which shows the area included in the conditional use permit request. The drawing shall show:

1. The shape and dimensions of the lot.

- 2. The location and sizes of all existing and proposed structures.
- 3. The intended use of each structure.
- 4. The number of families to be accommodated, if any.
- 5. The location of vehicular ingress and egress, including the width and surfacing of abutting roads.
- 6. The location, size, access and number of spaces for proposed off-street parking areas.
- 7. The location and type of screening and landscaping.
- 8. The relation of the site to surrounding streets and land uses.

Attach a certified list of property owners within 500 feet of the subject property. Lists obtained from a title company incorporated under Oregon laws or the Linn County Tax Assessor's office shall be acceptable.

I have read and understand LMC 18.25. I understand that it will be at least 30 days from the submission of the completed application before it will be reviewed before the Planning Commission.

SIGNATURE OF APPLICANT: _____ DATE: _____

PLANNING COMMISSION APPROVAL: _____ DATE: _____