



City of Lyons

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Lyons, Oregon 97358

www.cityoflyons.org

Received By: _____

Date: _____

Paid _____

SUBDIVISION APPLICATION

Name of Applicant: _____

Mailing Address: _____

Phone Number: _____ email: _____

Proposed name of subdivision: _____

Address of proposed subdivision: _____

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

Zoning on property: _____

Name of surveyor: _____

Surveyor's address & phone number: _____

Number of lots: _____ Total acreage: _____ Average lot size: _____

Describe the current vehicular access to and on the property: _____

How will the access be changed as a result of the subdivision? _____

Describe the status of water supply and sewage disposal systems to serve the property: _____

How will the water supply and sewage disposal be provided in the subdivision? _____

Describe the physical features of the property (i.e. slope, drainage, etc.):- _____

Describe the physical features on the properties surrounding the land to be partitioned: _____

Is all the property owned or controlled by the applicant a part of the subdivision? _____

If not, what is proposed for the remainder of the property? _____

Are deed restrictions proposed for the subdivision? _____ Yes _____ No

If there will be deed restrictions, please attach a copy.

Is there a proposal to phase development of the property? _____ Yes _____ No

If so, please attach a phasing plan.

Please attach maps and supplementary material which will comply with all of the requirements of Sections 5.010, 5.020, 5.030, 5.040, and 5.050 of the Lyons Subdivision Ordinance. (Provided as a supplement to this application.)

Provide a certified list of all property owners abutting 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 received a copy of the subdivision ordinance and the applicable sections of the zoning ordinance. I understand that it will be at least 45 days from the submission of the completed application before it will be heard at a public hearing of the Lyons Planning Commission.

SIGNATURE OF APPLICANT _____ DATE: _____