

# CITY OF JOSEPH ZONING PERMIT APPROVAL

Department of Planning

201 S. Main St. Joseph Or, 97846

Telephone number 541.432.3832

Fax number 541.432.3833

Application # \_\_\_\_\_

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

Received by: \_\_\_\_\_

FEE AMOUNT \$75.00

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APPLICATION FOR: \_\_\_\_\_

Applicant \_\_\_\_\_ Telephone number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Map \_\_\_\_\_ Tax Lot \_\_\_\_\_

Zone \_\_\_\_\_ Council Approval Date \_\_\_\_\_

Flood Zone: Yes No      Historical Zone: Yes No      Existing Structures: Yes No

Setbacks North: \_\_\_\_\_ South: \_\_\_\_\_ East: \_\_\_\_\_ West: \_\_\_\_\_

Do you need to make arrangements for water and sewer service:      Yes No

## A. STATEMENT OF UNDERSTANDING

I understand that I have the burden of proving my request meets all applicable ordinance requirements, and that I must address all of the criteria that apply. I am responsible for knowing where my property lines are and for all setbacks to those property lines. I am responsible for the current zoning and for the uses performed in the zone. The city can only assist with what is expressed by the owner. As owner of the proper you are held responsible for the activity and uses performed on your property.

**(Please initial after reading: \_\_\_\_\_)**

B. I HEREBY APPLY FOR THE ABOVE REQUEST. I certify that I am the property owner, or an authorized representative for the property owner.

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

**City of Joseph Preliminary Approval:** \_\_\_\_\_ Date: \_\_\_\_\_

**\*Final County Approval to obtain a county building permit. Please return this application along with your County building permit to the City of Joseph for the Final City Approval BEFORE any work can be completed.**

## City of Joseph Final Approval:

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

**\*A copy of the County building permit & plat map is required before final approval**

**\*This permit expires one year from final approval.**

**\*All accrued costs associated with this process are the sole responsibility of the applicant.**