

Subdivision application

TITLE 15.24

City of Cave Junction, PO Box 1396 - 222 W. Lister St., Cave Junction, OR 97523 541-592-2156

Date : _____ Permit No. _____

1. Name of applicant: _____ Phone _____
2. Mailing Address: _____
3. Owner (if different) _____ Phone _____
4. Mailing Address _____

(Attach copy of owners consent if applicable)

5. Property address : _____
6. Assessor's Map _____ Tax Lot _____ Zone _____
7. Name of Subdivision _____
8. Proposed Land Use: _____ Lot Square Footage _____
 Single Residential (_____ #) Multiple Residential (_____ #)
 Commercial (_____ #) Streets (names & widths)
Proposed Water Source: Well Community Well City
Proposed Sewage Disposal: Septic City
9. Describe request: _____

10. **Site Plan included (no smaller than 11"x 14" + 13 copies)** Yes No Map
 Parcel dimensions & sq ft of each lot North Arrow Scale
 Streets/Sidewalks/Vehicle access to lots (existing & proposed)
 Public & Private Easements, existing & proposed (locations, dimensions & purpose)
 Utility locations, existing & proposed (storm drains, sewer/water mains, fire hydrants)
 Flood Plain Area (check - JO CO Planning)
 Contour lines (elevation) Water Courses Deed Restrictions
 Location of structures (existing & proposed)
 Internal motor vehicle circulation plan
11. Vicinity Map (8 ½" X 11")
12. Existing City Water to Site: Yes No
If no, distance to nearest tap location: _____, Footage _____
13. Existing City Sewer to Site: Yes No
If no, distance to nearest tap location: _____, Footage _____

**Additional fees will be charged for the performance of any outside professional services required by licensed engineers, or any other services deemed necessary. The fees charged shall be at an amount no more than the actual cost of providing that service.

Date: _____ Fee Paid: \$ _____ Receipt No. _____

Applicant Signature: _____

ACTION TAKEN

PLANNING COMMISSION

1. Date of Public Hearing with the Planning Commission: _____
2. The Planning Commission at its regular meeting of: _____
took the following action on this application:
 Recommended Not Recommended
 Tabled No Conditions
 Recommended with attached conditions
Conditions: _____

Reasons for Decisions: _____
4. Signed by Chairman: _____

CITY RECORDER

5. Date received from Planning Commission: _____

CITY COUNCIL

6. A Public Hearing with the City Council was set for (date) _____
7. The City Council, at its regular meeting of the Public Hearing (date) _____
took the following action:
 Approved Approved with Conditions Tabled
 Disapproved No Conditions
Reasons for Council Decisions: _____

8. Signed by Mayor: _____ Date: _____

CITY RECORDER

9. Received from Mayor: _____
10. Forwarded to Applicant: _____
11. Signed by City Recorder/Clerk: _____