

CITY OF TALENT . COMMUNITY DEVELOPMENT

PO Box 445, Talent, Oregon 97540 Phone: (541) 535-7401 Fax: (541) 535-7423 <u>www.cityoftalent.org</u>

PRE-APPLICATION FORM

Property Owner Mailing Address (i		clude zip)		Phone
Street Address or Property Location				
Applicant/Consultant (if not owner	cluding zip)		Phone	
Assessor's Map Number (Township	Tax Lots	Acres	Zone	
38-1W-				
38-1W-				
Subzone (if applicable)				
Required Submittals: Tentative Plat or Site Plan—Drawn to scale, including ALL applicable provisions of the Talent Subdivision or Zoning Code. Applicant's Statement — Including ALL applicable provisions of the Talent Subdivision or Zoning Code. One electronic copy of plat/site plan and applicant's statement in PDF format. Plat shall be reduced to 11x17. Supplementary information as required by the Talent Subdivision Code or the Talent Zoning Code. I hereby certify that the statements and information contained in this application, including the enclosed drawings and the required findings of fact, are in all respects, true and correct. I further understand that the information provided during this pre-application conference is valid on the date of the conference and may not include all of the provisions with the applicable ordinances. As the applicant, I understand that I will be responsible for all applicable provisions within the Subdivision and/or Zoning Code. Any changes in the property owner(s)/applicant proposal or City/State regulations may render the information provided by the City invalid.				
Applicant's Signature	Date	Date		
Property Owner's Signature (requi	ired)	Date		_
FOR OFFICE USE ONLY				
Deposit Paid (Amount):	Date:	Received By:		File Number:

In compliance with the Americans with Disabilities Act, if you need special assistance, please contact TTY phone number 1-800-735-2900 for English and for Spanish please contact TTY phone number 1-800-735-3896.

The City of Talent is an Equal Opportunity Provider