



PO Box 145  
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**LAND USE APPLICATION**  
**City of Dufur**

To: Dufur city Council  
Dufur, Oregon

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

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Owner of Property

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Telephone Number

**Check One:** Zoning Ordinance Amendment \_\_\_\_\_ Zoning Map Amendment \_\_\_\_\_  
Variance \_\_\_\_\_ Conditional Use \_\_\_\_\_ Permitted Uses \_\_\_\_\_ Partition \_\_\_\_\_

**Fee:** \_\_\_\_\_

**Legal Description:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**Zone:** Check One OS \_\_\_\_\_ A \_\_\_\_\_ R \_\_\_\_\_ C \_\_\_\_\_

**Brief Description of Proposal:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Show proposal by sketching a plot plan on reverse side of application or on an attached sheet of paper. Show lot dimension, location of all buildings and setbacks.

\_\_\_\_\_  
Signature of Applicant

**FOR CITY USE ONLY:**

Request Granted \_\_\_\_\_ Date: \_\_\_\_\_

Request Denied \_\_\_\_\_ Date: \_\_\_\_\_

Conditions, if any \_\_\_\_\_

\_\_\_\_\_

Signed: \_\_\_\_\_

City Recorder