



**Wasco County Planning Department**

*"Service, Sustainability & Solutions"*

2705 East Second St. • The Dalles, OR 97058  
(541) 506-2560 • wcplanning@co.wasco.or.us  
www.co.wasco.or.us/planning

# TYPE 1 APPLICATION

FILE NUMBER: \_\_\_\_\_

FEE: \_\_\_\_\_

Date Received: \_\_\_\_\_ Planner Initials: \_\_\_\_\_

**APPLICANT INFORMATION:**

**OWNER INFORMATION:**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

**PROPERTY INFORMATION:**

Township/Range/Section/Tax Lot(s)	Acct #	Acres	Zoning

Property address (or location): \_\_\_\_\_

Zoning Designation: \_\_\_\_\_ Environmental Protection District: \_\_\_\_\_

Proposed Use: \_\_\_\_\_ Permitted Subject to Section: \_\_\_\_\_

Water source: \_\_\_\_\_ Sewage disposal method: \_\_\_\_\_

Name of road providing access: \_\_\_\_\_

Current use of property: \_\_\_\_\_ Use of surrounding properties: \_\_\_\_\_

Do you own neighboring property?  NO  YES (description) \_\_\_\_\_

**DETAILED PROJECT DESCRIPTION (proposed use, structures, dimensions, etc.):** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Additional description/maps/pictures attached

Approved \_\_\_\_\_

Denied Decision Date \_\_\_\_\_

PROPOSED Improvements				
Structure/Development	Length	Width	Height	Square Footage
Dwelling				
Deck				
Accessory Structure				
Agricultural Structure				
EXISTING Development				
Dwelling				

**LEGAL PARCEL STATUS:**

Partition, Subdivision, OR

Most Recent Pre-9/4/1974 Deed #: \_\_\_\_\_ Date Filed: \_\_\_\_\_

Current Deed #: \_\_\_\_\_ Date Filed: \_\_\_\_\_

*The deed and a map showing the property described in the deed(s) must accompany this application.*

**SIGNATURES:**

**Applicant(s)** \_\_\_\_\_ Date: \_\_\_\_\_

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

**Property Owner(s)** \_\_\_\_\_ Date: \_\_\_\_\_

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

**PLEASE NOTE:** Before this application will be processed, you **must** supply all requested information and forms, and address **all listed or referenced criteria**. Pursuant to ORS 215.428, this office will review the application for completeness and notify Applicant of any deficiencies within 30 days of submission. By signing this form, the property owner or property owner’s agent is granting permission for Planning Staff to conduct site inspections on the property.

**ALL TYPE 1 APPLICATIONS MUST INCLUDE:**

- Application Fee – Cash or Check (credit cards now accepted with additional fee)
- Site Plan
- Elevation Drawing
- Fire Safety Self-Certification
- Other applicable information/application(s):

\_\_\_\_\_

\_\_\_\_\_

**SHADED AREA TO BE COMPLETED BY PLANNING DEPARTMENT**

**Legal Parcel**  NO  YES  
Deed/Land Use Action: \_\_\_\_\_

**Previous Map and Tax Lot:** \_\_\_\_\_

**Past Land Use Actions:** If yes, list file #(s) \_\_\_\_\_  NO  YES  
\_\_\_\_\_  
\_\_\_\_\_

Still subject to previous conditions?  NO  YES

**Assessor Property Class:** \_\_\_\_\_

**Zoning:** \_\_\_\_\_

**Environmental Protection Districts – List applicable EPDs:**

- EPD # \_\_\_\_\_
- EPD # \_\_\_\_\_
- EPD # \_\_\_\_\_
- EPD # \_\_\_\_\_

**Water Resources**

Are there bodies of water on property or adjacent properties?  NO  YES

Describe: \_\_\_\_\_

- Fish bearing (100/50 ft buffer)       Non fish bearing (50 ft)       Not identified (25 ft)
- Irrigation ditch (50 ft buffer)

**Access:**

County or ODOT approach permit on file?  NO  YES, # \_\_\_\_\_

**Address:**

Address exists and has been verified to be correct?  NO  YES

Address needs to be assigned after approval?  NO  YES

**Fire District:** \_\_\_\_\_