



**Planning Division
Development Permit Application**

Final action on development application or zone change is required within 120 days in accordance with provisions of ORS 227.175

A pre application conference is normally required prior to submittal of an application. Please visit the City's website for submittal requirements

Pre-Application Meeting Date: _____

Incomplete applications will not be scheduled for public hearing until all of the required materials are submitted.

29799 SW Town Center Loop E, Wilsonville, OR 97070
Phone: 503.682.4960 Fax: 503.682.7025
Web: www.ci.wilsonville.or.us

Applicant:

Name: _____
Company: _____
Mailing Address: _____
City, State, Zip: _____
Phone: _____ Fax: _____
E-mail: _____

Authorized Representative:

Name: _____
Company: _____
Mailing Address: _____
City, State, Zip: _____
Phone: _____ Fax: _____
E-mail: _____

Property Owner:

Name: _____
Company: _____
Mailing Address: _____
City, State, Zip: _____
Phone: _____ Fax: _____
E-mail: _____

Property Owner's Signature:

Printed Name: _____ Date: _____

Applicant's Signature: (if different from Property Owner)

Printed Name: _____ Date: _____

Site Location and Description:

Project Address if Available: _____ Suite/Unit _____

Project Location: _____

Tax Map #(s): _____ Tax Lot #(s): _____ County: Washington Clackamas

Request:

Project Type: **Class I** **Class II** **Class III**

Residential Commercial Industrial Other: _____

Application Type(s):

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Appeal | <input type="checkbox"/> Comp Plan Map Amend | <input type="checkbox"/> Parks Plan Review |
| <input type="checkbox"/> Final Plat | <input type="checkbox"/> Major Partition | <input type="checkbox"/> Minor Partition | <input type="checkbox"/> Request to Modify Conditions |
| <input type="checkbox"/> Plan Amendment | <input type="checkbox"/> Planned Development | <input type="checkbox"/> Preliminary Plat | <input type="checkbox"/> Site Design Review |
| <input type="checkbox"/> Request for Special Meeting | <input type="checkbox"/> Request for Time Extension | <input type="checkbox"/> Signs | <input type="checkbox"/> Stage II Final Plan |
| <input type="checkbox"/> SROZ/SRIR Review | <input type="checkbox"/> Staff Interpretation | <input type="checkbox"/> Stage I Master Plan | <input type="checkbox"/> Variance |
| <input type="checkbox"/> Type C Tree Removal Plan | <input type="checkbox"/> Tree Permit (B or C) | <input type="checkbox"/> Temporary Use | <input type="checkbox"/> Other (describe) _____ |
| <input type="checkbox"/> Villebois SAP | <input type="checkbox"/> Villebois PDP | <input type="checkbox"/> Villebois FDP | |
| <input type="checkbox"/> Zone Map Amendment | <input type="checkbox"/> Waiver(s) | <input type="checkbox"/> Conditional Use | |