

City of The Dalles Building Permit Application

CITY OF THE DALLES
Community Development Department
313 Court Street
The Dalles, OR 97058
(541) 296-5481, ext. 1125
Fax (541) 298-5490
www.ci.the-dalles.or.us

Date Issued _____

Building Permit Log # _____

APPLICANT

Name _____

Address _____

Telephone # _____

Email address _____

LEGAL OWNER (If Different than Applicant)

Name _____

Address _____

Telephone # _____

PROPERTY INFORMATION

Address _____

Map and Tax Lot _____

Zone District/Overlay _____ In City Limits _____ YES _____ NO _____

Geohazard Zone _____ Flood Designation _____

GENERAL INFORMATION

Describe current use of the property _____

Describe how proposal will change use of property _____

INFORMATION REQUIRED Building Permit Application Review

- 1 and 2 family residential development: Scaled plot plan indicating property boundaries, setbacks, landscaping (section 6.010.020), building location(s) with orientation(s), garage/carport/parking location and surface material, height of structures, street address, utility locations if known.

OVER →

- All other development approved through a development review process: a final site plan including construction and landscape detail addressing all conditions of approval.
- 1 and 2 Family residential dwelling design checklist, where applicable.
- Completed Physical Constraints Permit, where applicable for flood plain, cut/fill, or geohazard issues.
- Completed Neighborhood Compatibility Review form, where applicable.
- Completed Systems Development Charges (SDC) forms for water and sewer, where applicable.

Note:

The property owner is responsible for identifying the property lines and locating structures so that they do not violate The City of The Dalles Land Use and Development Ordinance. Should a violation occur, it will be the sole responsibility of the property owner to correct the violation.

Signature of Applicant

Signature of Property Owner* or Owners Agent

_____ Date

_____ Date

*Notarized Owner Consent Letter may substitute for signature of property owner.

<u>STAFF REVIEW:</u>		
ZONE DISTRICT: _____	GEOHAZARD ZONE: _____	
HISTORIC DISTRICT/STRUCTURE: Yes/No	FLOOD DESIGNATION: _____	
PREVIOUS PLANNING ACTIONS:	_____	
ARE THERE EROSION CONTROL ISSUES? ACCESS ISSUES? DOES THIS PROPERTY HAVE ALL UTILITIES AND PUBLIC IMPROVEMENTS SUCH AS SIDEWALKS, SEWER AND WATER? ARE THERE ANY OTHER ITEMS THAT NEED ATTENTION?		

DATE OF SITE VISIT:	PLANNER: _____	PUBLIC WORKS: _____
PLANNING APPROVAL: _____		
PUBLIC WORKS APPROVAL: _____		