



**CITY OF COOS BAY**  
 Public Works & Community Development Department  
 500 Central Avenue, Coos Bay, Oregon 97420  
 Phone 541-269-8918 Fax 541-269-8916

Permit No. 187- \_\_\_\_\_ - \_\_\_\_\_

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

## LAND USE/PLANNING APPLICATION

<sup>1</sup>**Type of Review** (Please check all that apply):

*\*Pre-application review may be required*

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Adjustment Review (Type II, III)*           | <input type="checkbox"/> Estuarine Use/Activities (Type I)         | <input type="checkbox"/> Subdivision (Type II, III)*                  |
| <input type="checkbox"/> Annexation (Type IV)*                       | <input type="checkbox"/> Comp. Plan Amendment-Map/Text (Type IV)*  | <input type="checkbox"/> Temporary Use (Type I, II)                   |
| <input type="checkbox"/> Appeal and Review (Type III)                | <input type="checkbox"/> Dev. Code Amendment-Map/Text (Type IV)*   | <input type="checkbox"/> Tourist Habitation-Home Stay (Type II)       |
| <input type="checkbox"/> Architectural Design Review (Type II, III)* | <input type="checkbox"/> Home Occupation (Type I, II)              | <input type="checkbox"/> Tourist Habitation-Vacation Rental (Type II) |
| <input type="checkbox"/> Accessory Dwelling Unit-Historic (Type I)   | <input type="checkbox"/> Partition (Type II)                       | <input type="checkbox"/> Variance (Type I, II)                        |
| <input type="checkbox"/> Conditional Use (Type II, III)*             | <input type="checkbox"/> Property Line Adjustment (Type I)         | <input type="checkbox"/> Zone Change (Type III, IV)*                  |
| <input type="checkbox"/> Cultural Resources (Type II, III)*          | <input type="checkbox"/> Planned Unit Development (Type II, III)*  | <input type="checkbox"/> Code Interpretation (Type I)                 |
| <input type="checkbox"/> Cottage Cluster (Type II, III)*             | <input type="checkbox"/> Modification to Approved Permit (Type II) | <input type="checkbox"/> Legal Lot Determination (Type I)             |
| <input type="checkbox"/> General Review _____                        | <input type="checkbox"/> Floodplain Development (Type I)           | <input type="checkbox"/> Other: _____                                 |
- (Identify Type: See [Table 173.130.030](#))

Site Location/Address \_\_\_\_\_ [Assessor's Map No./Tax Lot\(s\)](#) \_\_\_\_\_

Zoning \_\_\_\_\_ Total Land Area \_\_\_\_\_

Applicant/Owner Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Applicant's Representative Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Project Description:** Describe the project in detail, including what is being proposed, its size, hours of operation, any proposed phasing, timetable for improvements etc. Attach separate sheet with additional details as needed.

**Your submittal must also include:**

<sup>1</sup>*Pre-Application and Appeal applications require a different application form, inquire of staff*

