



File No. 247-\_\_\_\_\_

**COMMUNITY DEVELOPMENT**

**TEMPORARY USE APPLICATION  
PRIOR TO FINAL APPROVAL OF A LAND USE APPLICATION**

**FEE:** \$\_\_\_\_\_

Applicant's Name (print): \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Applicant's Email Address: \_\_\_\_\_

Property Owner's Name (if different)\*: \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Owner's Email Address: \_\_\_\_\_

Associated Land Use Permit Application Number: \_\_\_\_\_

Property Description: Township\_\_\_\_ Range\_\_\_\_ Section\_\_\_\_ Tax Lot\_\_\_\_\_

Lot of Record? (state reason):\_\_\_\_\_

Proposed Use: \_\_\_\_\_

Reason (continue on reverse if necessary, or attach separate sheet): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

"Good Cause" includes only hardship or emergency situations arising due to factors that, through the exercise of ordinary diligence, the Applicant could not have foreseen.

As the Applicant, I agree to accept each and every risk of loss and damage that may result if the land use permit is denied, and further agree to hold Deschutes County, its officers, agents and employees, harmless from any loss and/or damage.

As the Applicant, I agree to restore the site to its original condition if the application for a land use permit is denied.

(over)

To the best of my knowledge, the proposal complies with all previous conditions of approval and all other applicable local, state, and federal laws. By signing this application, I acknowledge that Deschutes County planning staff may make a site visit(s) to the address(es) listed on this application in order to evaluate the property(ies) with the Deschutes County Code criteria applicable to the land use request(s) submitted. Please describe any special circumstances regarding a potential site visit:

---

---

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Property Owner's Signature (if different)\*: \_\_\_\_\_ Date: \_\_\_\_\_

Agent's Name (if applicable): \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Agent's Email Address: \_\_\_\_\_

**\*If this application is not signed by the property owner, a letter authorizing signature by the applicant must be attached.**