



File No. 247-_____

Community Development Department

Planning Division Building Safety Division Environmental Soils Division

P.O. Box 6005 117 NW Lafayette Avenue Bend, Oregon 97708-6005

Phone: (541) 388-6575 Fax: (541) 385-1764

<http://www.deschutes.org/cd>

TEMPORARY USE APPLICATION MANUFACTURED HOME STORAGE

<p>You <i>must</i> include the following with this application:</p> <ol style="list-style-type: none">1. A completed application form, with appropriate original signatures. To ensure timely processing of your application, all materials must be submitted on single-sided, 8.5" x 11" paper. Do not use binders, tabs/dividers, staples or tape2. A plot plan, drawn to scale, showing all property lines and existing and proposed structures, septic system, parking, etc.3. The correct application fee.	<p>For Office Use Only: _____ <i>Date Stamp</i></p> <p>APPROVED BY (<i>Planner's Name and Signature</i>): _____</p> <p>Fee Paid: _____</p>
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Applicant's Name (print): _____ Phone: (____) _____

Mailing Address: _____ City/State/Zip: _____

Property Owner's Name (if different)*: _____ Phone: (____) _____

Mailing Address: _____ City/State/Zip: _____

Property Description: Township _____ Range _____ Section _____ Tax Lot _____

Property Zone(s): _____ Property Size (acres or sq. ft.): _____

Lot of Record? (state reason): _____

A manufactured home may be stored on an individual lot subject to obtaining zoning approval from the Planning Division and subject to the following [DCC 18.116.040(D)]:

1. Storage period shall not exceed one year.
2. No utilities other than electric may be connected.
3. The mobile home shall not be inhabited.
4. The subject lot is not located in a CH, Conventional Housing Combining Zone.

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 on the following page:

(over) ➡

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. By signing this application, the applicant understands and agrees that Deschutes County may require a deposit for hearings officers' fees prior to the application being deemed complete. If the application is heard by a hearings officer, the applicant will be responsible for the actual costs of the hearings officer.**