

Molalla Planning Department

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PRE-APPLICATION CONFERENCE

_____/_____/_____ DATE	_____:_____ TIME	\$_____ FEE'S
STAFF CONTACT (This section to be filled in by staff)		

Pre-application conferences occur on a weekly basis with some exceptions. In order to be scheduled for a conference, this form, the pre-application fee, and accompanying materials must be submitted at least 14 days in advance of the conference date. Twenty-four hour notice is required to reschedule.

_____ APPLICANT'S NAME	_____-_____-_____ PHONE NUMBER
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ADDRESS (OR MAP/TAX LOT) OF SUBJECT PROPERTY

APPLICANT'S MAILING ADDRESS

BRIEF DESCRIPTION OF PROPOSAL

Please attach additional materials relating to your proposal. Of most importance is information regarding existing conditions on or adjacent to the property. Detailed project design is discouraged at this level--it is important to remain open as to future project design. The most useful submittal for staff in reviewing your proposal would be a rough site plan on paper up to 11 x 17 inches in size depicting the following items:

- | | |
|--------------------------------------|---|
| ➤ North arrow | ➤ Access to and from the site, if applicable |
| ➤ Scale | ➤ General location of existing trees |
| ➤ Property dimensions | ➤ Location of creeks and/or wetlands |
| ➤ Streets abutting the property | ➤ Location of existing utilities (water, sewer, etc.) |
| ➤ Conceptual design (non-engineered) | ➤ Easements (access, utility, all others) |

While this material is not required, the more detail you can provide about existing conditions of your site, the better input you will receive from city staff at the pre-application conference. Submittal of this material must occur at least 14 days prior to the pre-application conference, or the conference will be rescheduled.

By my signature below, I verify that all of the material submitted is true to the best of my knowledge, and I grant city staff right of entry onto the subject property in order to prepare for the pre-application conference.

_____ PROPERTY OWNER'S SIGNATURE	_____/_____/_____ DATE
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MAILING ADDRESS (IF DIFFERENT FROM ABOVE)