



**CITY OF MANZANITA**

543 Laneda Avenue

P.O. Box 129

Manzanita, OR 97130

Ph: (503) 368-5343 Fax: (503) 368-4145

**PLANNING – PLANS SUBMITTAL FORM**

**ALL INFORMATION MUST BE FILLED OUT COMPLETELY**

Job Location: \_\_\_\_\_ Zoning: \_\_\_\_\_

Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Map: \_\_\_\_\_ Tax Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Lot #: \_\_\_\_\_ Sub-Division: \_\_\_\_\_

**SUBMITTAL CHECKLIST – APPLICANT, CHECK THE BOX AND FILL IN THE INFORMATION TO INDICATE ITEMS ARE INCLUDED IN THIS SUBMITTAL. IF AN ITEM IS NOT APPLICABLE, INDICATE N/A.**

- Survey Use \_\_\_\_\_
- Site Plan Grade Elevation \_\_\_\_\_
- Storm Water Retention Building Height \_\_\_\_\_
- Clear Vision Area Lot Coverage \_\_\_\_\_
- Parking (2 Spaces) Setbacks: Front \_\_\_\_\_ Rear \_\_\_\_\_ Left \_\_\_\_\_ Right \_\_\_\_\_
- Tree Replacement Plan Decks in to Setbacks: Rear \_\_\_\_\_ Left \_\_\_\_\_ Right \_\_\_\_\_
- Accessory Structure Setbacks: Rear \_\_\_\_\_ Left \_\_\_\_\_ Right \_\_\_\_\_

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sign: \_\_\_\_\_ Date: \_\_\_\_\_

**STAFF USE:**

Fee to be paid with Submittal:

Commercial or Multifamily \$200.00

1 & 2 Family or Manufactured Dwelling \$125

Accessory Structure \$60.00

Professional Reports \$60.00

Amount Paid: \_\_\_\_\_

Receipt Number: \_\_\_\_\_

Planning Approval

Plans Approved:      Yes      No

Signed: \_\_\_\_\_

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

**APPROVAL EXPIRES 90 DAYS FROM DATE UNLESS BUILDING PERMIT APPLICATION SUBMITTED**