



595 Main St. Aumsville, Oregon 97325  
(503) 749-2030 • TTY 711 • Fax (503) 749-1852  
www.aumsville.us

## COMPREHENSIVE PLAN MAP AMENDMENT TYPE III ACTION

*I acknowledge that if the actual cost to process and review the application by contracted or full-time staff exceeds the application fee, the applicant will be responsible for the excess charges. The fee would be considered a deposit toward the actual cost.*

### FOR OFFICE USE ONLY

Filing Fee - \$500

Date Rec'd/Fee Pd

Receipt No.

**Applicant(s):** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Property Owner:** (if different than applicant) \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

We, the undersigned property owner(s) or authorized agent(s), request amendments to the comprehensive plan map for property legally described as: \_\_\_\_\_

Marion County Map No.(s) \_\_\_\_\_, if available

Marion County Parcel No.(s) \_\_\_\_\_, Marion County Tax Account No.(s)

Addition/Subdivision Name (if available) \_\_\_\_\_, Lot \_\_\_\_\_, Block \_\_\_\_\_

For the following reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Proposed comprehensive plan designation: \_\_\_\_\_

1. **Current Property Description**

- a) Address and general location of the property: \_\_\_\_\_  
\_\_\_\_\_
- b) Current Comprehensive Plan Designation/Zoning: \_\_\_\_\_
- c) Total Current Area (square feet): \_\_\_\_\_
- d) Dimensions of the Current Property: \_\_\_\_\_
- e) Current Use of the Property: \_\_\_\_\_
- f) Number of existing structures and general description: \_\_\_\_\_  
\_\_\_\_\_
- g) Is this area served by curbs and sidewalks?      **YES** ☐ **NO** ☐

2. **Attachments**

- a) The names of the owners of all property within 250 feet of the boundary of the property proposed for a comprehensive plan map amendment, the mailing addresses, and the description of their properties as it appears on the most recent assessment and tax roll of Marion County, or as it appears in the deed records of the county, if such records be later, shall be attached. Property owned by the City of Aumsville shall not be deemed as part of the affected area.
- b) A plat map showing the location of all property in the affected area shall be attached.
- c) An affidavit of the person(s) preparing the plat and list of names and addresses of owners therein, showing that said person(s) is qualified and competent to prepare such plat and to examine the public records pertaining to ownership of real property, and certifying that the list of names of the owners and descriptions of the property in such lists are accurate and correct and that no name of any property owner in the affected area is omitted from the list shall be attached. The certificate of an abstract or title company duly incorporated under the laws of Oregon shall be deemed a compliance with this provision.
- d) The certificate of the notary public or other official authorized to make acknowledgments, acknowledging property owners signature on this petition, or notarized affidavit, whichever is applicable. (see attached sample)
- e) Any special studies or other resources which can be used to support/justify the change.

- f) Documentation of the public need and justification for a change.

3. **Criteria for Comprehensive Plan Amendments**

- a) Is the change in conformance with the Aumsville Comprehensive Plan?

**YES** ☐ **NO** ☐ **Please explain:** \_\_\_\_\_

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

- b) Was there a mistake in the original ordinance or map?

**YES** ☐ **NO** ☐ **Please explain:** \_\_\_\_\_

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

- c) Have conditions in the area changed since adoption of the ordinance and/or zoning map?

**YES** ☐ **NO** ☐ **Please explain:** \_\_\_\_\_

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

- d) Will the amendment interfere with the development or value of other land in the vicinity?

**YES** ☐ **NO** ☐ **Please explain:** \_\_\_\_\_

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

- e) Will the amendment be detrimental to the general interest of the city?

**YES** ☐ **NO** ☐ **Please explain:** \_\_\_\_\_

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

- f) Is there a public need for the proposed amendment?

**YES** ☐ **NO** ☐ **Please explain:** \_\_\_\_\_

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

- g) Is there other appropriately zoned property that could be used?

**YES** ☐ **NO** ☐ **Please explain:** \_\_\_\_\_

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

h) Will the amendment over-burden existing and future capacity of public facilities?

**YES** ☐ **NO** ☐ **Please explain:** \_\_\_\_\_

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i) Does the amendment comply with applicable State and Federal laws and regulations as may now or later provide?

**YES** ☐ **NO** ☐ **Please explain:** \_\_\_\_\_

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j) Does the amendment comply with the Urban Growth Boundary and Policy Agreement between the city and Marion County?

**YES** ☐ **NO** ☐ **Please explain:** \_\_\_\_\_

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**4. This petition must be filed within sixty (60) days after the making of the affidavit or certificate of person(s) preparing the plat. All property owners signing the petition shall acknowledge the same before a Notary Public or some other official authorized to make acknowledgments, and the certificate of the Notary Public or other official shall be attached to the petition; or in lieu of having the signers of the petition acknowledge before a Notary Public or other officer, the person(s) circulating the petition may execute and file with the petition an affidavit to the effect that such person(s), or as he/she certified, that each name was signed freely, voluntarily, without undue influence of any nature, and under no misrepresentation as to facts.**

**Property Owner (Printed)** \_\_\_\_\_

**Property Owner Signature:** \_\_\_\_\_

**Property Owner (Printed)** \_\_\_\_\_

**Property Owner Signature:** \_\_\_\_\_

**Property Owner (Printed)** \_\_\_\_\_

**Property Owner Signature:** \_\_\_\_\_

AFFIDAVIT

STATE OF OREGON       )  
COUNTY OF MARION    ) ss,

I, \_\_\_\_\_, being duly sworn upon oath, say that I secured each name appearing on the within and foregoing petition, and each name was signed freely, voluntarily, without undue influence of any nature and under no misrepresentation as to the facts, further affirm, that to the best of my knowledge the individuals above named constitute a majority of the electors registered in the territory proposed for the change in the comprehensive plan map and the owners/contract purchasers of more than half of the land in that territory.

(Signature) \_\_\_\_\_ Date: \_\_\_\_\_

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC FOR OREGON

My Commission Expires: \_\_\_\_\_