



**WASHINGTON COUNTY**

Dept. of Land Use & Transportation  
Planning and Development Services  
Current Planning  
155 N. 1<sup>st</sup> Avenue, #350-13  
Hillsboro, OR 97124  
Ph. (503) 846-8761 Fax (503) 846-2908  
<http://www.co.washington.or.us>

**Development Application**

PROCEDURE/CATEGORY TYPE: TYPE III

CPO: 7 COMMUNITY PLAN: Sunset West

EXISTING LAND USE DISTRICTS: Neighborhood Commercial (NC)

ASSESSOR MAP: 1N1 19BC TAX LOT NUMBER(S): 500 and 600

*NOTE: Contiguous property under identical ownership will be reviewed as part of this application and may be subject to conditions of approval. List assessor map and tax lot numbers of all contiguous property under identical ownership:*

SITE ADDRESS: 18450 NW West Union Road

SITE SIZE: 1.21 Acres

Date of Pre-app. Conference: 9/30/2020  
Staff Member: Paul Schaefer  
*(Please attach copy of Pre-application notes)*

EXISTING USE OF SITE: Restaurant/Vacant

PROPOSED DEVELOPMENT ACTION: Special Use, Dev. Review for 5,000 SF convenience store & gas station (5 fuel islands) and an Access Management Plan to permit access to NW West Union and two variances (Type III) for reduced setbacks.

We, the undersigned, hereby authorize the filing of this application and certify that the information contained in this application is complete and correct to the best of our knowledge. This also authorizes the designated Applicant's Representative (if applicable) to act on behalf of the Applicant for the processing of the request.

X [Signature] 6-3-21  
 OWNER  CONTRACT PURCHASER DATE

Print Name: KJ Barman  
West Union Chevron

X  
 OWNER  CONTRACT PURCHASER DATE

Print Name: \_\_\_\_\_

PLEASE NOTE:

- o This application must be signed by ALL the owners or ALL the Contract Purchasers of the subject property.
- o If this application is signed by the Contract Purchaser(s), the Contract Purchaser is also certifying that the Contract Vendor has been notified
- o The Applicant or a Representative should be present at all Public Hearings.
- o No approval will be effective until the appeal period has expired.
- o Corporations require proof of signature authority for that entity according to their Articles of Incorporation or as registered with the State of Oregon Corporation Division at <http://www.filinginoregon.com>

CASEFILE #: \_\_\_\_\_ (to be assigned by county)

**APPLICANT:**

COMPANY: CJRW, LLC.

CONTACT: Robert Barman

ADDRESS: PO Box 2092

Lake Oswego, OR 97035

PHONE: \_\_\_\_\_

FAX: \_\_\_\_\_

E-MAIL ADDRESS: bobbarmanaz717@gmail.com

**APPLICANT'S REPRESENTATIVE:** NOTE: The Applicant's Representative will be the primary contact for the County.

COMPANY: 3J Consulting, Inc.

CONTACT: Mercedes Serra

ADDRESS: 9600 SW Nimbus Avenue, Suite 100

Beaverton, OR 97008

PHONE: 503-946-9365 x211

FAX: \_\_\_\_\_

E-MAIL ADDRESS: mercedes.serra@3j-consulting.com

**OWNER(S):** (attach additional sheets if needed)

NAME: CJRW, LLC.

ADDRESS: PO Box 2092

Lake Oswego, OR 97035

PHONE: \_\_\_\_\_

FAX: \_\_\_\_\_

E-MAIL ADDRESS: bobbarmanaz717@gmail.com

**ALSO NOTIFY:**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

FAX: \_\_\_\_\_

X [Signature] 6-3-21  
APPLICANT DATE

Print Name: KJ Barman  
West Union Chevron

X  
APPLICANT DATE

Print Name: \_\_\_\_\_