WASHINGTON COUNTY



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

Application Instructions for: Type I Replacement Dwelling in EFU/AF-20 *OR* AF-10/AF-5/RR-5 when 2 or more Lawful Dwellings Exist

Standards for Type I Replacement Dwellings are found in CDC Section 430-8.1. Please review to ensure your request qualifies for the Type I Replacement Dwelling.

| | ieview | to ensure your request qualities for the Type I Replacement Dwelling. | |
|---|--|---|--|
| 1. Submit three (3) of each of the following: | | | |
| | □ A. | Completed Type I Replacement Dwelling Application included in this packet, with date and original signature of the property owner. | |
| | □ B. An accurate site plan of the property showing the location of the existing and replacement dwelling. The plan shall show: 1) building setbacks; 2) proper dimensions; 3) all structures on the property labeled with their use; 4) existing proposed easements; 5) dimensions of the driveway; 6) dimensions of the acce approach; 7) bodies of water; 8) delineation of flood plain and/or drainage haza areas; 9) delineation of significant natural resource areas; 10) wells and sep drainfield systems and their distances from all structures | | |
| | □ C . | Completed Type I Replacement Dwelling Supplemental Information form included in this packet. | |
| | □ D. | Copy of Washington County's Official Tax Map that contains the subject property. Available either from Current Planning or online at: http://washims.co.washington.or.us/InterMap/ | |
| | □ E . | Photos showing intact exterior walls and roof structure | |
| | □ F. | Photos of interior wiring for interior lights (photos of lights turned on in each room) | |
| | □ G . | Photo of heating system (photos of furnace, baseboard heaters, wood-burning stove, etc.) | |
| | □ H. | Photos of house front with address, as well as house rear and both house sides as they appear from the public right-of-way or access drive | |
| | □ I. | Photo of kitchen sink with the water running from the faucet | |
| | □ J . | Photos of toilet bowl/tank with water and bathing facilities with water running from the faucet | |
| | □ K . | Fire Marshal Comments/Approval if the driveway is or will be over 150 feet in length. The comments from the Fire Marshal must be: 1) on letterhead stating the driveway meets or can meet Fire District standards with improvements; or, 2) a site plan signed and/or stamped by the Fire Marshal. | |
| | □ L. | Flood Plain/Drainage Hazard Area Alteration Application if the replacement dwelling or necessary driveway improvements/culvert crossings will be located in Flood Plain/Drainage Hazard Area | |

| 2. | <u>Pay Fees:</u> Please refer to the current copy of the Current Planning fee schedule and required payment when submitting the application. Checks payable to: Washington Court | | |
|------|--|--|--|
| | Type I Replacement Dwelling: | | |
| | Groundwater Study Rural Surcharge: | | |
| lf y | you have any questions regarding the Washington County Community Development Code | | |

If you have any questions regarding the Washington County Community Development Code standards or application requirements for a Type I Replacement Dwelling in EFU/AF-20 or AF-10/AF-5/RR-5 when 2 or more lawful dwellings exist, please contact **Current Planning at (503) 846-8761.**

<u>NOTE:</u> This application must be submitted, reviewed and approved BEFORE you are able to apply for a building permit. Once the application is approved, please contact Building Services at (503) 846-3470 for building permit information.

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| Type I Replacen | nent Dwelling – EFU/AF-20 | | |
|---|---|--|--|
| | R-5 for 2 or more dwellings | PHONE: | |
| | | FAX: | |
| CPO: COM | MUNITY PLAN: | E-MAIL ADDRESS: | |
| Rural | /Natural Resource | APPLICANT'S REPRESENTATIVE: NOTE: The | |
| LAND USE DISTRICT | T: | Applicant's Representative will be the primary contact for the County. | |
| EFU | | COMPANY: | |
| AF-20 | | CONTACT: | |
| AF-10 (two o | r more dwellings) | ADDRESS: | |
| AF-5 (two or RR-5 (two or | more dwellings) more dwellings) TAX LOT NUMBER(S): | PHONE: FAX: | |
| NOTE: Contiguous property under identical ownership will be | | E-MAIL ADDRESS: | |
| conditions of approval. of all contiguous propert | application and may be subject to List assessor map and tax lot numbers ty under identical ownership: | PHONE:FAX: | |
| | - | E-MAIL ADDRESS: | |
| SITE ADDRESS: | | ALSO NOTIFY: NAME: ADDRESS: | |
| | | PHONE: | |
| | | FAX: | |
| EXISTING USE OF S | ITE: | | |
| DDODOSED DEVELO | DEMENT ACTION, DEDI ACEMENI | T DWELLING | |

CASEFILE #: ____

CONTACT:

APPLICANT:

COMPANY:

ADDRESS:

(to be assigned by Washington County)

PROPOSED DEVELOPMENT ACTION: REPLACEMENT DWELLING

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.

| Representative (if applicable) to act on beha | If of the Applicar | nt for the processing of the request. | |
|---|--------------------|---------------------------------------|------|
| X | | X | |
| □ OWNER □ CONTRACT PURCHASER | DATE | APPLICANT | DATE |
| Print Name: | | Print Name: | |
| X | | X | |
| □ OWNER □ CONTRACT PURCHASER | DATE | APPLICANT | DATE |
| Print Name: | | Print Name: | |

PLEASE NOTE:

- o This application must be signed by ALL the owners or ALL the Contract Purchasers of the property.
- IF this application is signed by the Contract Purchaser(s), the Contract Purchaser is also certifying that the Contract Vendor has been notified.
- o No approval will be effective until the appeal period has expired.
- 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.filinginorgeon.com

TYPE I REPLACEMENT DWELLING (EFU/AF-20 or AF-10/AF-5/RR-5 FOR 2 OR MORE DWELLINGS) SUPPLEMENTAL INFORMATION FORM

1. Please indicate which of the following documents will be submitted with this application:

IMPORTANT NOTE: <u>STOP</u> if one of the following requirements cannot be met. You must proceed to a Type II Replacement Dwelling application instead.

| | Development Application Approval for the Dwelling issued on or after April 6, 1959; OR |
|-------|---|
| | Building Permit for the Dwelling issued on or after April 6, 1959; OR |
| | Certificate of Zoning Compliance for the Dwelling issued on or after April 6 |
| | 1959; OR |
| | Documentation from Assessment and Taxation (Room 130) that the dwelling was established PRIOR to April 6, 1959 |
| Plea | se describe, in as much detail as possible, the document(s) submitted. |
| | |
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| | |
| | |
| | |
| Is th | e dwelling currently inhabited, or is it vacant? |
| | cant, when was the dwelling last inhabited? |
| Сор | ies of the most-recent utility bills for the following utilities are included: |
| | Cable |
| | Power |
| | Gas |
| | Landline telephone |
| | Other (please specify): |
| | None (please explain why): |
| | |
| | |
| | |
| | |

| 5. | By initialing each of the lines below, I acknowledge that the submitted site plan shows all the following setbacks for the replacement dwelling: |
|----|--|
| | 10-foot minimum interior side |
| | 30-foot minimum front |
| | 20-foot minimum rear |
| | 30-foot minimum street side (if applicable) |
| 6. | Is the driveway for the replacement dwelling over 150 feet in length as measured from the approach to the replacement dwelling? \Box Yes \Box No |
| 7. | If you answered "yes" to Question 6 above, compliance with the Oregon Fire Code shall be assessed upon submittal of your application. Your application shall indicate all improvements needed for the driveway to meet the standards in the current Oregon Fire Code. Please explain all improvements needed for the driveway to meet the standards in the current Oregon Fire Code and include signed and dated documentation from the Fire Marshal that the driveway either currently meets all standards or acknowledgement that your described improvements, once completed, will bring the driveway up to current Oregon Fire Code. |
| | |
| 8. | The property owner must select one of the following statements below for the disposition of the existing dwelling, once the replacement dwelling has been completed. |
| | I,, acknowledge the existing dwelling shall be removed to a lawful location or demolished within ninety (90) days of completion of the replacement dwelling. |
| | Signature Date |
| | OR |
| | I,, acknowledge the existing dwelling shall be converted to an accessory structure within ninety (90) days of the completion of the replacement dwelling as verified in a site inspection by the building inspector and that I have obtained the required permits, if applicable, for the items listed below: |
| | 1) Removed all kitchen appliances including the stove, oven, refrigerator, dishwasher and trash compactor; removed all kitchen sinks, countertops |

- and cabinets; removed or terminated all 220-volt electrical circuits to kitchen appliances; removed all fuel supply lines to kitchen appliances and capped service lines at the supply source in the wall (CDC Section 430-8.1 G.1); and
- 2) Removed all toilets, bathroom sinks, and tub/shower facilities (CDC Section 430-8.1 G.2); and
- 3) Terminated the water supply to the converted structure and capped off all plumbing fixtures (CDC Section 430-8.1 G.3); and
- 4) Recorded a restrictive covenant stating the converted structure is neither eligible to be, nor will be, used as a dwelling (form obtained from Current Planning) (CDC Section 430-8.1 G.4); and
- 5) Final building inspection approval of the replacement dwelling shall not be granted until the conversion of the existing dwelling structure (all items noted above) is complete (CDC Section 430-8.1 G.).

| Signature | Date |
|-------------|--------|
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