



CITY OF JACKSONVILLE
 110 E. Main St. – P. O. Box 7, Jacksonville, OR 97530
 Phone: (541) 899-6873 Fax: (541) 899-7882

Office Hours:
 Mon - Tues - Thurs – Fri - 8:30am – 2:00pm
Wednesday: Closed to the public all day

PLANNED UNIT DEVELOPMENT

(Pre-Application Conference Required)

Filing Fee: **\$840.00 + subdivision fee**
 Amt. Due: _____
 Receipt # _____

SUBJECT PROPERTY: _____

To obtain property section, taxlot, zoning and square footage: **Contact a local Title company**

TOWNSHIP 37 RANGE 2W SECTION _____ TAX LOT _____

ZONING _____ AREA IN ACRES _____ SQ. FT. _____

APPLICANT (Property Owner): _____

MAILING ADDRESS: _____

PHONE: _____ FAX: _____ E-MAIL: _____

APPLICANT’S REPRESENTATIVE: _____

MAILING ADDRESS: _____

PHONE: _____ FAX: _____ E-MAIL: _____

IN A SEPARATE DOCUMENT PLEASE PROVIDE ALL APPLICABLE SUBMITTAL REQUIREMENTS DESCRIBED IN *17.64.030 AND ADDRESS ALL OF THE CRITERIA INCLUDED IN *17.64.060.

*Section 17.64.030 & 17.64.061 of the Municipal Code can be found under the Planning tab on the City of Jacksonville website at www.jacksonvilleor.us under “Planning Codes.”

PROPERTY OWNER’S SIGNATURE: _____ DATE: _____