Print Form

CITY OF CANNON BEACH
AMENDMENT TO THE COMPREHENSIVE PLAN TEXT

Please fill out this form completely. Please type or print.

Applicant Name: _____
Mailing Address: _____
_____
Telephone: _____
Property-Owner Name: _____
(if other than applicant)
Mailing Address: _____
_____
Telephone: _____
Property Location: _____
(street address)
Map No.: _____ Tax Lot No.: _____

AMENDMENT TO THE COMPREHENSIVE PLAN REQUEST:

1. Description of the proposal.

2. Justification for the Comprehensive Plan amendment request. Explain how the request meets each of the following criteria for granting an amendment to the Comprehensive Plan.

   a. The amendment is consistent with the Comprehensive Plan.

Note: Use extra sheets, if necessary, for answering the above questions.
Fee: $750.00

Applicant Signature: _____ Date: _____
Property Owner Signature: _____ Date: _____

If the applicant is other than the owner, the owner hereby grants permission for the applicant to act on his/her behalf. Please attach the name, address, phone number, and signature of any additional property owners.

For Staff Use Only:

Received on: _____ By: _____
Fee Paid: _____ Receipt No.: _____