



# CITY OF CANNON BEACH

## AMENDMENT TO THE COMPREHENSIVE PLAN TEXT

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

Applicant Name: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
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:** \$1,500

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.: \_\_\_\_\_

*(Last revised March 2021)*