



## **CLATSOP COUNTY ASSESSMENT AND TAXATION**

820 Exchange Street, Suite 210 Astoria, Oregon 97103

Phone: (503) 325-8522

Fax: (503) 338-3638



# CLATSOP COUNTY SHORT-TERM RENTAL TABLE OF CONTENTS

Permit Application Process	1
Checklist	2
Application	4
Applicant Statement	6
Land Use Compatibility Statement / Development Permit	7
Transient Room Tax Registration Form	8
Fee List	9
Land Use and Building Codes - Requirements and Standards	10
Public Health – Septic System Requirements	13
Complaint Process and Form	15



## CLATSOP COUNTY SHORT-TERM RENTAL APPLICATION PROCESS

#### **STEP #1**

Before applying, please contact the Clatsop County Planning Division to verify that the property is zoned for short-term rentals. Land Use Planning staff must sign the Land Use Compatibility Statement (LUCS) included in this packet (page 7) certifying that the property is zoned for short-term rental use.

#### **STFP #2**

Submit completed application packet, including all documents on the checklist to:

Clatsop County Assessment and Taxation
820 Exchange Street, Suite 210, Astoria, Oregon 97103
Phone: (503) 325-8522 Fax: (503) 338-3638
assessor@clatsopcounty.gov
Wonday through Friday 8:30 a.m. to 5:00 p.m. (except holidays)

### **STEP #3**

Public Health staff will contact the applicant to determine the status of the septic system and verify what documentation may be required from the applicant. If repairs are required, these repairs must be completed prior to Public Health issuing a septic approval.

#### **STEP #4**

Building Codes staff will contact the applicant to schedule an inspection. Any repairs or code-related health and safety requirements must be completed prior to Building Codes issuing an approval.

### **STEP #5**

Clatsop County Assessment & Taxation issues a Display Permit once tax accounts are verified in good standing. Permits are valid for a maximum of two (2) years. Original permits will be mailed to the first owner listed on the application form unless a written request is submitted.

#### **STEP #6**

Clatsop County will mail the required notice to surrounding property owners within 300 feet.



In order for a short-term rental application and/or renewal to be complete, the following documents must be submitted. If any documents are missing, the application must be returned to the applicant along with a letter outlining the missing elements.

TO BE	PROVIDED BY THE APPLICANT
	\$550 permit fee Payment may be made in cash (if in person), credit card, debit card or check payable to Clatsop County Assessment and Taxation Department. Payment must accompany the application.
	Clatsop County Short-Term Rental Application (Page 4) All property owners and the designated agent (if applicable) must sign the application form. Use additional sheets of paper for more than two owners.
	Signed Applicant Statement (Page 6)
	Short-Term Rental Land Use Compatibility Statement/Development Permit (LUCS) (Page 7) Signed documentation from the Clatsop County Planning Division must verify that the proposed use is permitted in the zone.
	Map Depicting the Tsunami Evacuation Route (if applicable)
	Scaled Site Drawing The site drawing must show property lines and buildings, including garages parking spaces, driveways and other off-street parking spaces. This sketch does not need to be the quality of a formal "engineering drawing" but does need to be to scale (Example: 1" = 25').
	Floor Plan The floor plan must show the location of all sleeping areas, beds, windows and doors.
	Proof of Liability Coverage on the Short-Term Rental  The insurance must include the address of the short-term rental.
	Information on Renter Notification of Regulations  The statement should describe how renters will be notified in writing regarding regulations, location of parking, quiet hours, garbage removal and recycling.
	<b>Transient Room Tax Registration Form (Page 8)</b> All application packets must include a completed Transient Room Tax Registration Form (as required by the Assessor's Office).
	Bacteria and Nitrate Water Testing (if applicable) All applicants with properties that utilize a non-public supply for potable water (i.e. well, cistern, etc.) must submit a Bac-T test from a currently licensed potable water testing lab in the State of Oregon.
	Instructions Regarding Delivery of Permit  If the permit is to be mailed to someone other than the first owner listed in our records, or picked up in person, please provide written delivery instructions.

IO BE	PROVIDED BY COUNTY STAFF
	Approval from Clatsop County Public Health Department Staff from the County's Public Health Department will contact the applicant to confirm whether records are available for the existing septic system or whether an Evaluation of Existing System (EES) is required. All required repairs and upgrades must be completed prior to receiving approval.
	Home Inspection Form completed by the Clatsop County Building Official Staff from the County's Building Codes Division will contact the applicant to schedule an inspection time. All repairs/upgrades required to address life safety requirements must be completed prior to final approval from Building Codes.
	Approval from Clatsop County Assessment and Taxation Staff from the County's Assessment and Taxation Department will confirm that all applicable tax accounts are in good standing prior to approval.
	<b>Display Permit</b> The final display permit will be issued once all County approvals have been acquired. A permit is valid for two (2) years.
	Notification of Surrounding Property Owners  Clatsop County staff will mail the required notices to surrounding property owners within 300 feet of the short-term rental property



### **CLATSOP COUNTY SHORT-TERM RENTAL PERMIT APPLICATION**

Clatsop County Assessment and Taxation 820 Exchange Street, Suite 210, Astoria, Oregon 97103 Phone: (503) 325-8522 Fax: (503) 338-3638 assessor@clatsopcounty.gov www.ClatsopCounty.gov

FEE: \$550

Effective July 1, 2018, Clatsop County requires approval of a revocable permit for short-term (up to 30 consecutive days) rental of residential property in unincorporated areas of Clatsop County, including within urban growth boundaries. In Arch Cape, these rentals are limited to either a minimum period of seven nights or, if fewer than seven nights, then to no more than one rental within a seven (7) night period. These permits are processed and reviewed similar to a Type 1 Development Permit.

## INSTRUCTIONS TO APPLICANT – COMPLETE THIS FORM – PLEASE PRINT CLEARLY REQUIRED ATTACHMENTS:

- \$550 application fee
- Completed Application
- Signed Applicant Statement
- Signed Land Use Compatibility Statement/Development Permit from the Clatsop County Planning Division
- Map depicting the tsunami evacuation route (if applicable)
- · Scaled site drawing showing property lines and buildings, including all garages, parking spaces, driveways and off-street parking
- Floor plan showing sleeping areas, beds, doors and windows
- Proof of liability coverage on the short-term rental (including address of rental property)
- Statement describing how renters will be informed of regulations and location of parking, quiet hours, garbage removal and recycling
- Completed Transient Room Tax Registration form
- Bacteria and Nitrate Water Testing (if applicable)
- · Written instructions regarding delivery of permit if it is to be mailed to someone other than the first owner listed in our records

#### ALL PROPERTY OWNERS MUST SIGN THIS APPLICATION

INCOMPLETE APPLICATIONS CANNOT BE ACCEPTED OR PROCESSED

			- 0111110010011
Property Address			
Township	Range	Section	Tax Lot
			or sleep): Property in Arch Cape? Y N
Mailing Address		City State 2	Zip
Phone: Daytime	Even	ing	Cell
Use additional she	ets of paper for more than two prop	erty owners. <mark>NOTE: Owner c</mark>	ontact information will be displayed on permit.
<sup>1</sup> Owner Name		Email	
Mailing Address		City State ?	Zip
Phone: Daytime	Even	ing	Cell
Signature:	property owner does not sign this applic	ation, a letter authorizing signatu	Date: ure by the applicant must be attached.
<sup>2</sup> Owner Name		Email	
Mailing Address		City State 2	Zip
Phone: Daytime	Even	ing	Cell
Signature:	property owner does not sign this applic		Date:
	property owner does not sign this applic AND AUTHORIZED TO ACT PF		
Agent/Manager Name _		Email	
Mailing Address		City State :	Zip
Phono: Doutime	Frania	~	Call



## **CLATSOP COUNTY SHORT-TERM RENTAL PERMIT APPLICATION**

Clatsop County Assessment and Taxation 820 Exchange Street, Suite 210, Astoria, Oregon 97103 Phone: (503) 325-8522 Fax: (503) 338-3638 assessor@clatsopcounty.gov www.ClatsopCounty.gov

Department Use Only –		
Permit No.	_ Date Issued:	Authorization:
FEE \$550.00	_	
PUBLIC HEALTH APPROVAL		
# Sleeping Areas Authorized by Publi	ic Health:	
Public Health Approval Date:		
Public Health Signature:		
BUILDING CODES APPROVAL		
Initial Inspection Date:		
Requires Re-inspection? Y	N	
Re-inspection date (if applicable):		
Requires Re-inspection	? (Additional fee require	d) Y N
FEE \$125.00		
Building Codes Approval Date:		
Building Codes Signature:		
ASSESSMENT AND TAXATION AP	PROVAL	
Tax Accounts Current? Y	_ N	
Assessment and Taxation Approval D	Date:	
Assessment and Taxation Signature:		



## CLATSOP COUNTY SHORT-TERM RENTAL APPLICANT STATEMENT

- I declare that I am the legal owner of subject property or an authorized agent of the legal owner of record. I will obtain all necessary permits and complete any modifications required for renting the subject property as a short-term rental. All statements in this application are true and accurate to the best of my knowledge. I understand that if a permit is issued based on false statements, or it is determined that I have failed to fully comply with all requirements that are part of this permit, any permit approval may be revoked.
- 2. I will at all times fully abide by all State, Federal and local laws, rules and regulations governing my activities conducted or planned pursuant to this permit.
- As a condition for issuing this Clatsop County Short-Term Rental Permit, I agree to hold Clatsop County harmless from and indemnify the county for any liability that might arise from short-term rentals of this property and for any and all claims, damages, actions, causes of action or suits of any kind or nature whatsoever, which might result from the undersigned's failure to fully abide by any of the requirements in Clatsop County Ordinance No. 22-03 and/or any other applicable law.
- 4. WAIVER OF VESTED RIGHTS DURING APPEAL PERIOD. The issuance of a short-term rental permit by the Clatsop County Assessment and Taxation Director may be appealed within twenty (20) calendar days of the date of the notice of conditions, suspension or revocation. I understand that the issuance of a permit may be reversed on appeal. I further understand that actions taken by me during the appeal period shall be at my own risk. I agree that Clatsop County is not responsible for consequences or damages in the event that the issuance of a permit is reversed in appeal.
- I am aware that my failure to abide by Clatsop County ordinances may result in revocation of this permit or enforcement action by the County and that enforcement action may result in revocation of this short-term rental permit.
- 6. I understand that this permit is not transferrable and that an ownership change may result in revocation of this short-term rental permit.
- 7. I understand that a change in use, or any modifications to the dwelling that require a building permit, may require a new inspection by Clatsop County Building Codes and a new Clatsop County Short-Term Rental Permit. (Check first with the Clatsop County Community Development Department).

I have read and understand the APPLICANT'S STATEMENT and agree to abide by the terms. I have met and will continue to comply with the standards under this ordinance.

Applicant Signature	Date:	



## Clatsop County - Land Use Planning Division

800 Exchange Street, Suite 100
Astoria, Oregon 97103
Phone 503 325-8611 Fax 503 338-3606
comdev@clatsopcounty.gov www.clatsopcounty.gov

### **Short-Term Rental Land Use Compatibility Statement**

Applicant Name:		
Address:	City/State/Zip:	
Phone:	Phone:	
Owner Name:	Email:	
Address:		
Phone:		
Other Name:		
Address:		
Phone:	Pnone:	
SIGNATURES:		Dato
Applicant: Owner:		Date:
Agent/Other:		Date:
OR OFFICE USE ONLY		
Base Zone:	Overlay District(s):	
hort-Term Rental Location:		
R S	TL	Acres
Outstanding Code Violation(s): Y		(if Yes, enter violation #) N
Based upon the above zoning, it is determined that Sho no active code violations on the property. Short-Term F This ordinance applies to Short-Term Rentals located w within the urban growth boundaries that are NOT subject Authorization:	Rentals are subject to the control of the control o	he regulations outlined in Ordinance 22-03. ed areas of Clatsop County, including



### Clatsop County Tax Office 820 Exchange Street, Suite 210 Astoria, OR 97103

## **Transient Room Tax Registration**

Rental Property Address		Map and Tax lot Number	
Owner Information:			
<sup>1</sup> Owner Name:		Email	
Mailing Address:			
Phone: Day	Evening	Cell	
<sup>2</sup> Owner Name:		Email	
Mailing Address:			
Phone: Day	Evening	Cell	
Property Manager Inform	ation:		
Agency Name:		Agent Name:	
Mailing Address:			
Phone:	E	Email:	
*** The inform	nation above is subject to	Public Information request***	
Lodging Intermediaries:			
List the Intermediaries that	will be collecting Transier	nt Room Tax on your behalf i.e. VRBC	):
Will you be collecting rents from	om tenants separately from t	the Lodging Intermediaries listed above?	
At least one Owner and M	anager must sign this form	n in order for it to be considered comp	lete.
Owner		Date	
Owner		 Date	
Property Manager		 Date	

<sup>\*\*\*</sup> Pursuant to Clatsop County Ordinance 17-01 and 22-03 it is the responsibility of the Property Owner to ensure Transient Room Tax is collected and remitted to the Tax Administrator. \*\*\*



820 Exchange St., Suite 210 (503) 325-8522 phone / (503) 338-3638 fax <u>www.clatsopcounty.gov</u>

## **Short-Term Rental Application Fees** *Adopted May 27, 2022*

Short-Term Rental Application	\$550
Building Codes Re-inspection Following 2 <sup>nd</sup> Inspection Fee per additional inspection	\$125
Display Permit Update - Neighbor Notification	\$100



## LAND USE AND BUILDING CODES REQUIREMENTS AND STANDARDS

Minimum required standards for short-term rentals are listed in the tables below. Complete copies of Ordinance 22-03 are available upon request.

### **Building Code Requirements:**

- **1.** House numbers clearly visible from the street.
- 2. The current short-term rental permit permanently and prominently displayed inside and near the front entrance of the short-term rental.
- **3.** At least one off-street parking space available for each approved sleeping area plus one additional parking space. On street parking is not allowed.
- **4.** Dwelling equipped with adequate and secured garbage storage containers. Weekly service required when dwelling is occupied.
- 5. At least one functioning fire extinguisher accessibly located within each floor of the dwelling. Fire extinguisher has a minimum rating of 2-A:10-B:C. The extinguisher is mounted on a wall with the handle between 3-4 feet above the floor.
- **6.** Smoke alarms installed in all sleeping rooms, outside all sleeping areas, and on each floor.
- 7. Carbon monoxide alarms installed inside each sleeping room or within 15' of each sleeping area.
- **8.** All stairways with four or more risers equipped with an approved handrail.
- **9.** All guardrails able to withstand a 200-hundred-pound lateral impact force.
- 10. All sleeping rooms/areas have windows or doors designed to emergency egress requirements. Rooms that do not meet the required egress standards are locked at all times when the dwelling is used as a short-term rental. The sills of required egress windows do not exceed 44" above the floor. The minimum net clear opening of grade floor egress windows at least 5.0 square feet; the net clear opening of upper floor egress windows at least 5.7 square feet. All required egress windows have minimum clear width of at least 20" and minimum height of 24".
- 11. Exterior hot tub has adequate structural support and a locking cover or other barrier to adequately protect against potential drowning when the hot tub is not available for permissive
- **12.** No broken windows or damaged doors.
- **13.** Doors have working locks openable from the inside without a key or special knowledge.
- **14.** All plug-ins and light switches have face plates.
- **15.** The electrical panel has all circuits labeled and is accessible to the tenants.
- **16.** Ground Fault Circuit Interrupter (GFCIs) protected receptacles provided at all outdoor locations, kitchen and bathroom sinks.
- **17.** All fireplaces, fireplace inserts and other fuel burning appliances or heat sources properly installed and vented.
- 19. If the fireplace, fireplace insert or other fuel burning appliance does not have a chimney or flue in compliance with the code and the manufacturer's installation requirements the appliance must be permanently secured and signed "NOT FOR USE".

AREA SPECIFIC SHORT-TERM RENTAL REQUIREMENTS  (short-term rentals must meet these standards based upon the location of the property)			
REQUIREMENT	ARCH CAPE ONLY	UNINCORPORATED CLATSOP COUNTY (EXCLUDING ARCH CAPE)	
Maximum Number of Short-Term Rental Units	One rental per lot or parcel, excluding a	One dwelling unit per single lot or parcel	
per Lot	caretaker residing in the Residence or ADU		
Length of Rental	Minimum of seven (7) nights, or if fewer	Not to exceed thirty (30) consecutive nights	
	than seven (7) nights, no more than one		
	rental within a seven (7) night period		
Parking	County staff will determine the number of	One (1) off-street parking space for each	
	parking spaces based on information in the	approved sleeping area, plus one (1) additional	
	approved Building Codes checklist.	parking space. Trailers for boats and all-terrain	
		vehicles may be allowed in available off-street	
	On-street parking may be used only if off-	parking spaces	
	street parking spaces are not physically		
	available. If on-street parking must be		
	used, the renter is required to use the		
	parking along the frontage of the rental		
	unit.		
Maximum Occupancy	Two (2) people per sleeping room, plus an	Calculated on the basis of the lesser of either:	
	additional four people, up to a maximum	1) the maximum onsite sanitary capacity, as	
	of 14 people.	approved by the Clatsop County Environmental	
		Health Division, or 2) an average of two	
		persons per sleeping area, up to a maximum of	
		14 persons. For the purpose of maximum	
		occupancy, those under two years of age shall	
		not be counted. Tents and recreational vehicles	
		shall not be used to increase the number of	
		people approved to occupy a short-term rental.	

	CORPORATED COUNTY-WIDE SHORT-TERM RENTAL REQUIREMENTS s in unincorporated Clatsop County, including Arch Cape, must meet these standards)
Number of Sleeping Rooms	Each sleeping room must be a fully enclosed habitable space with a heat source and an exterior exit that opens directly to the outside or an emergency escape/rescue window.
Payment of Transient Room Tax	Building Codes staff will determine the number of qualified sleeping rooms.
Home Inspection	All applicable county room taxes shall be paid pursuant to County Code Chapter 3.16  Clatsop County Building Codes approval of the home inspection. Required inspection items are detailed on Building Codes Checklist Included in this packet.
Parking	Parking shall not, under any circumstances, hinder the path of any emergency vehicle.  Renters may be cited and fined under existing State law in the event they park illegally.
	The owner or contact person shall notify every renter in writing of the required off- street parking and other parking spaces available to serve the short-term rental.
Garbage Removal	The owner shall provide covered garbage containers that can be secured. All garbage must be placed and be kept in secured containers provided for that purpose. Containers shall not block access to the property or dwelling unit. Garbage shall be removed a minimum of one (1) time per week unless the short-term rental is not rented. Owners shall provide guests with information about recycling opportunities.
Hours	The hours of 10:00 p.m. until 7:00 a.m. the next day are required quiet time. Renters who violate this standard may be issued a citation and be subject to a fine pursuant to Clatsop County Code §8.12.
	The owner or contact person shall notify every renter, in writing, of the quiet times and that a renter may be fined for violations under this ordinance.
Complaints	The owner or contact person shall attempt to contact a renter by phone, text, email and/or other method within twenty (20) minutes of receiving any complaint concerning the conduct of a renter.
On-Site Wastewater Treatment	If the property is not connected to a public sewer the on-site wastewater treatment system must be able to handle the capacity of the number of bedrooms of the home and the total number of occupants. Specific information regarding the certification process is provided in the Public Health – FAQs Sheet, included in this packet.



# CLATSOP COUNTY ENVIRONMENTAL HEALTH FAQS

- Q: What is the first step in the approval process for assuring my septic system is adequate for complying with the short-term rental ordinance?
- A: The first step is to determine whether Clatsop County Public Health has records on your septic system. This can be accomplished by coming into the Public Health office located at 820 Exchange Street in Astoria, Oregon, or by calling 503-325-9302. You will need to have a site address and the Section, Township and Range of the property to help us find the records.
- Q: What is needed to receive an Approval from Clatsop County Public Health?
- A: There are several routes to receive Public Health Approval. Here are the most likely scenarios:
  - If records of the septic system are available for a given property and the septic system is less than 10 years old, is not in a state of failure, and the system is not pressurized, the owner would be approved by Clatsop County Public Health.
  - If records of the septic system are available, and the septic system is 10 years old or older,
     <u>OR</u> if a property <u>does not</u> have septic system records, an Evaluation of Existing System report (EESR) is required. If the EESR indicates that the system is functioning properly, no repairs will be required on the system.
  - If the EESR indicates that the system is **not** operating properly, a letter of non-compliance will be provided to the owner outlining the problems with the system that must be addressed. Owners will have 60 days to correct the problems noted on the EESR. **Please** note that a repair permit issued by Clatsop County Public Health is required for all septic system repairs.
  - **Pressurized Systems:** In addition to the items above, if the system is pressurized, an Operation and Maintenance contract with a third party provider will be required. Once the Operation and Maintenance contract has been submitted to Clatsop County Public Health, the owner would be approved.
  - If the EESR finds that a cesspool, drywell or similar system that is inadequate for treating residential strength sewage is the type of septic system serving the property, the owner will receive a letter of noncompliance. The owner would be required to abandon that system and install a new (repaired) system within 60 days. Once the system has been properly repaired, and an Operation and Maintenance contract has been submitted to Clatsop County Public Health, the owner would be approved.

- Q: Where do I find the list of providers who can perform an Evaluation of Existing System and/or repair a septic system?
- A: You can find the list of licensed providers who can perform EESR's here: https://www.clatsopcounty.gov/media/19981
- Q: Where would I find a list of providers who can perform Operation and Maintenance?
- A: You can find the list of licensed Operation and Maintenance providers who can perform repairs here:

https://www.clatsopcounty.gov/media/37499

- Q: Where are the forms I need to submit to repair a system?
- A: All the forms you will need for this process are located here:

  <a href="https://www.clatsopcounty.gov/publichealth/page/onsite-septic-system-program-application-packets">https://www.clatsopcounty.gov/publichealth/page/onsite-septic-system-program-application-packets</a>
- Q: What is the fee for this process?
- A: The fee for determining septic approval is included in the \$550 short term rental application fee. Please be advised that other fees may be required if a repair is necessary to receive approval.
- Q: How do I go about testing my well/drinking water supply?
- A: You will need to contact a certified laboratory. You can find them using your web browser and the key words, "certified water testing labs near me." Once you have selected a company to work with, ask them for the supplies and instructions to test your water supply for bacteria and nitrates.

After receiving the results, submit them to Clatsop County Public Health for review. If the results indicate your water is free of bacteria and nitrates, no further testing will be required. If the results indicate the presence of bacteria or nitrates, your application will not move forward until the contaminant is eliminated from the water supply. The certified lab you choose to work with can assist you through a re-sampling process.

- Q: If I have questions about this process, who should I contact?
- A: You should contact the On-site Septic System Program at Clatsop County Public Health at 503-325-9302 or by email at health@clatsopcounty.gov.



## CLATSOP COUNTY SHORT-TERM RENTAL COMPLAINT PROCESS & FORM

#### **COMPLIANCE, INVESTIGATIONS, HEARINGS AND PENALTIES:**

- Owners of short-term rental units must obey all applicable ordinances and regulations of Clatsop County and are subject to the enforcement and penalty proceedings contained in the applicable County Ordinances.
- Any property owner who operates a short-term rental in violation of this section is subject to
  the abatement and penalty provisions of ORS 203.065, 203.810, and ordinances adopted under
  the Clatsop County Charter. The enforcement provisions of Clatsop County Code, Chapter 1 also
  apply, except where modified by this section.

### If there is a problem, these are the steps:

- The complaining party notifies the contact person designated on the permit of the alleged violation and outlines the desired remedy.
- The contact person promptly responds and fixes any situation or problem.
- If the response is not satisfactory, the complaining party can file a complaint with Clatsop County. Complaints must be submitted in writing and include a description of the alleged violation as well as the time, date and nature of the alleged violation.
- Complaints may also be submitted at any time to the Clatsop County Short-Term Rental Complaint Hotline at (503) 325-1001 or online at: <a href="https://lodging.munirevs.com/complaint/?cityid=958">https://lodging.munirevs.com/complaint/?cityid=958</a>
- The property owner must allow the County to inspect any records related to the short-term rental dwelling unit upon request. The County can initiate enforcement under Chapter 1 of the Clatsop County Code. After conducting its investigation, the County may:
  - Take no action on the request for the revocation of the short-term rental permit
  - Attach conditions to the existing short-term rental permit
  - Require a new inspection
  - Suspend the short-term rental permit until conditions are met
  - Revoke the short-term rental permit

Anyone dissatisfied with the County's enforcement decision may appeal and seek a hearing in front of the Clatsop County Hearings Officer.

If a permit is revoked, the owner cannot obtain a short-term rental permit prior to one year from the date of revocation.

Any property owner found in violation of the provisions of this ordinance will be required to reimburse Clatsop County for the costs of enforcement including reimbursement of staff time, investigation costs, mailings, service fees, mileage and other costs related to the investigation and prosecution of the violation in question.



## **Clatsop County**

Community Development 800 Exchange Street, Suite 100 Astoria, Oregon 97103

Phone 503 325-8611 Fax 503 338-3606 comdev@clatsopcounty.gov www.clatsopcounty.gov

## **Complaint Form**

Subject Property Address:			
Location: Please describe using landmarks an	d mileposts. Be as deta	ailed as possible.	
Legal Description: MAP ID(s)			
Zoning:	Overlay Districts:		
Owner		Email:	
Address:		City/State/Zip:	
Phone:		Phone:	
Violator:		Email:	
Address:		City/State/Zip:	
Phone:		Phone:	
Have you contacted the violating party?	Yes No No	]	
Complaint filed as follows:			
Complainant:		Email:	
Address:		City/State/Zip:	
Phone:	Ph	none:	
Signature:		Date:	