



Clatsop County Community Development

800 Exchange Street, Suite 100

Astoria, Oregon 97103

Phone 503 325-8611 Fax 503 338-3606

E-Mail to: comdev@clatsopcounty.gov

Website: www.clatsopcounty.gov

<input type="checkbox"/> Development Permit	Fee \$85	<input type="checkbox"/> Flood Review	Fee \$110	<input type="checkbox"/> Geologic Hazard Review	Fee \$85
		<input type="checkbox"/> Flood Renewal	Fee \$50		
<input type="checkbox"/> Grading, Drainage, Erosion Control	Fee \$150	<input type="checkbox"/> Road Approach	Fee \$0	<input type="checkbox"/> Address	Fee \$225 <input type="checkbox"/> Road Name
				<input type="checkbox"/>	Fee \$265
<input type="checkbox"/> Other – Description			Fee \$	Total Due \$	

All owners of record, per Clatsop County Assessment records, **must sign the application**.

Representatives of public agencies, corporations, trusts, etc. must provide documentation of signing authority (Power of Attorney, Trust Document, etc.).

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

Project Description: _____

Property Address _____

Owner: _____ Email: _____

Address: _____ City/State/Zip: _____

Phone: _____ Phone: _____

Signature: _____ Date: _____

Owner: _____ Email: _____

Address: _____ City/State/Zip: _____

Phone: _____ Phone: _____

Signature: _____ Date: _____

Applicant/Other: _____ Email: _____

Address: _____ City/State/Zip: _____

Phone: _____ Phone: _____

Signature: _____ Date: _____

OFFICE USE ONLY

Base Zone(s): _____ Overlay(s): _____

Map ID(s): _____ Acres: _____

Contiguous Properties in same ownership: _____

Existing Structures: _____

ALL HIGHLIGHTED ITEMS ARE REQUIRED.

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

Contact Clatsop County Community Development to determine if additional documentation is required.

SEWAGE DISPOSAL:

Contact the sewer district serving your property or Clatsop County Environmental Health for septic approval at 503-325-9302

- ☐ None Required Signature, & Date: _____
- ☐ Sewer Signer Title & Printed Name: _____
- ☐ Septic Agency: _____

Comments: _____

Permit#/Sign Off _____ Permit Required: Yes ☐ No ☐ Site Approval Granted: Yes ☐ No ☐

WATER AVAILABILITY

Contact the water district serving your property OR

Oregon Water Resources Department at 503-815-1967, nikki.m.hendricks@wrđ.state.or.us

- ☐ None Required Signature & Date: _____
- ☐ Private Water Signer Title & Printed Name: _____
- ☐ Public Water Agency Name: _____
- Gallons per minute _____
- ☐ Well, Spring, etc. ☐ Potability Test and/or Water Master Certificate attached

FIRE ACCESS AND REQUIREMENTS

Contact the fire district serving your property

Signature & Date: _____

Signer Title, Printed Name & Agency: _____

Applicant must contact fire official prior to final building inspection: Yes ☐

Comments: _____

Water/Fire Flow: _____ Number of Hydrants: _____ Hydrant Location(s) _____

- ☐ Firebreak, clear and maintain firebreak of at least _____ feet radius around proposed structure.

MANUFACTURED/MOBILE HOME PLACEMENT

Contact Clatsop County Assessment & Taxation, 820 Exchange #210, Astoria, OR 97103 503-325-8522

Signature & Date: _____

Printed Name & Title: _____

REQUIRED DOCUMENTS – ALL PERMITS

- ☐ Erosion Control Plan ☐ Plot Plan ☐ Stormwater Drainage Plan

Development Permit – Supporting Documents

Permit#: _____

- ☐ Outdoor Lighting Plan
- ☐ Parking Plan
- ☐ Other: _____

Flood Hazard Permit – Supporting Documents

Permit#: _____

- ☐ Elevation Certificate
☐ Foundation Plan
☐ Building Elevation Drawings
☐ Other: _____

Geologic Hazard Review – Supporting Documents

Permit#: _____

- ☐ Certified Engineering Geologist or Registered Professional Geologist Report or Waiver Letter
☐ Other: _____

Grading, Drainage, Erosion, Road Access – Supporting Documents

Permit#: _____

- ☐ Completed Application and Road Access Permit/Application

FOR OFFICE USE ONLYFront Setback determined by access to the property not front of building.

PERMIT # _____ OWNER & PARCEL ID: _____

Setbacks	Required	Actual	Notes
(N, S, E, W) Front	_____	_____	_____
(N, S, E, W) Side	_____	_____	_____
(N, S, E, W) Side	_____	_____	_____
(N, S, E, W) Rear	_____	_____	_____

Structure Height

- ☐ 18 feet maximum Oceanfront (Zones RSA-SFR, CBR, CR)
☐ 26 feet maximum
☐ 35 feet maximum
☐ Other _____

Other

- ☐ Access – County or ODOT Permit# _____
☐ Average Grade Calculations
☐ Beaches & Dunes Stabilization and/or Revegetation
☐ Coastal Shorelands
☐ Conditional Use Permit # _____
☐ Deed Restriction County Clerk Recording # _____
☐ DSL Wetland Fill/Removal Permit# _____
☐ Lot Coverage
☐ Resource Zone Certification County Clerk Recording # _____
☐ Road Improvement
☐ Temporary Use Permit # _____
☐ WLUN Submit Date _____ Permit # _____

Preparing an Erosion Control Plan

Preparing Your Erosion Control Plan

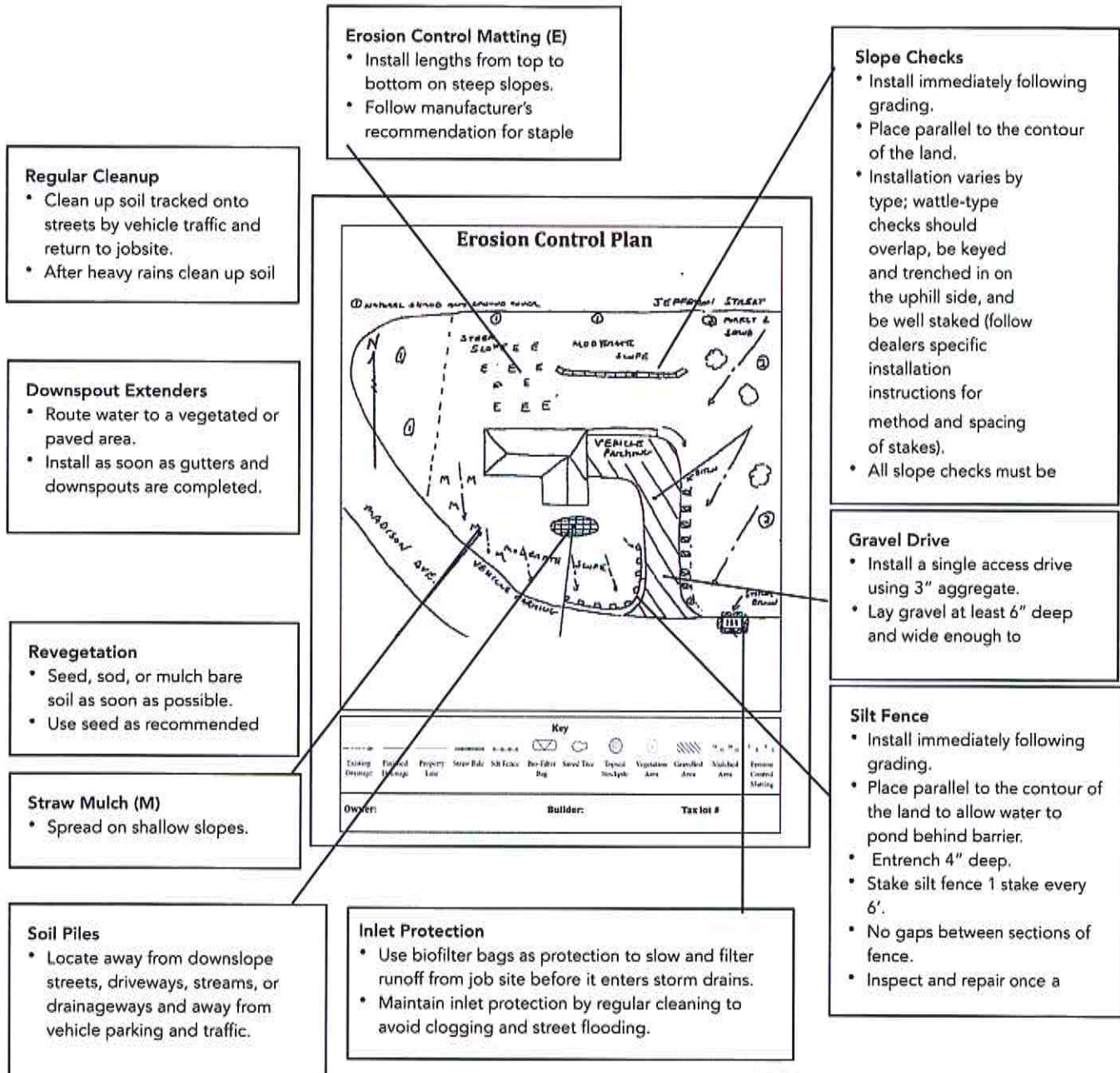
Included in this guidance is a blank form that you can use to draw your Soil Erosion Control Plan. A photocopy of your architectural site plan could be substituted for this form.

On the next page is an example Erosion Control Plan with descriptions of the various components and measures that make up the plan.













Steps to prepare the plan:

1. Draw the streets and roadways leading to the property.
2. Draw the boundaries of the property.
3. Indicate which direction is north.
4. Draw the proposed location of the building on the site.
5. Add arrows showing the direction water will flow off the property.
6. Indicate the steepness of slopes by classifying them as steep, moderate, or gentle.
7. Designate areas where vegetation will be left undisturbed.
8. Draw the access driveway and designate an area for vehicle parking.
9. Determine where soil will be stockpiled.
10. Determine what erosion control measures will be used. Draw and label the control measures.

Sample Erosion Control Plan



Erosion Control Plan

Key											
											
Existing Drainage	Finished Drainage	Property Line	Straw Bale	Silt Fence	Bio-Filter Bag	Saved Tree	Topsoil Stockpile	Vegetation Area	Gravelled Area	Mulched Area	Erosion Control Matting
Owner:			Builder:				Tax lot #				

Residential Plot Plan

Proposed Use: _____

Owner(s): _____

Applicant: _____

Map ID: _____

Situs Address: _____

Must include all of the following information in the space provided below

All property lines

Location of all existing and proposed structures and distances of each structure from **ALL** property lines

Distance of all structures from surface waters (lakes, streams, wetlands, etc.)

Location of all waste water systems, including septic tanks, drain fields, holding tanks, etc.

Location of all access roads, driveways, parking and easements

Storm water drainage plan

Identify the location(s) and type(s) of outdoor lighting to be installed

North

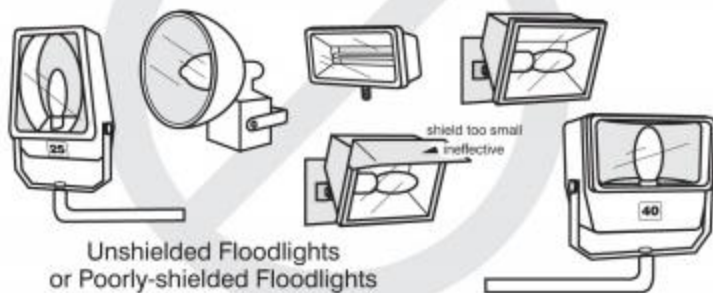
West

East

South

Unacceptable / Discouraged

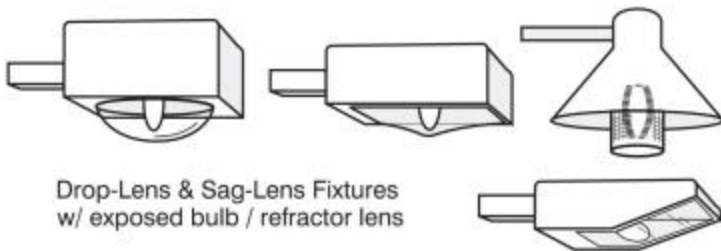
Fixtures that produce glare and light trespass



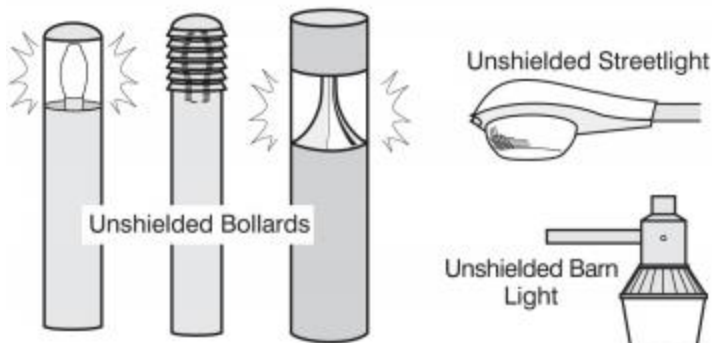
Unshielded Floodlights
or Poorly-shielded Floodlights



Unshielded Wallpacks
& Unshielded or
Poorly-shielded Wall
Mount Fixtures



Drop-Lens & Sag-Lens Fixtures
w/ exposed bulb / refractor lens

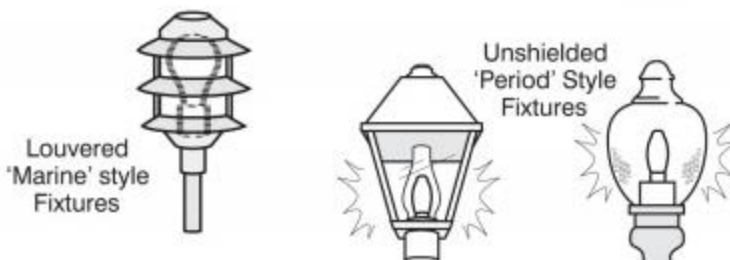


Unshielded Bollards

Unshielded Streetlight



Unshielded Barn
Light

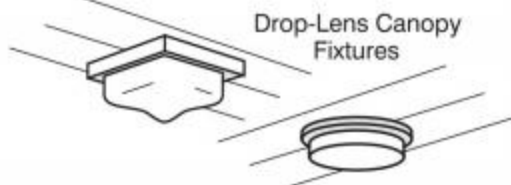


Louvered
'Marine' style
Fixtures

Unshielded
'Period' Style
Fixtures



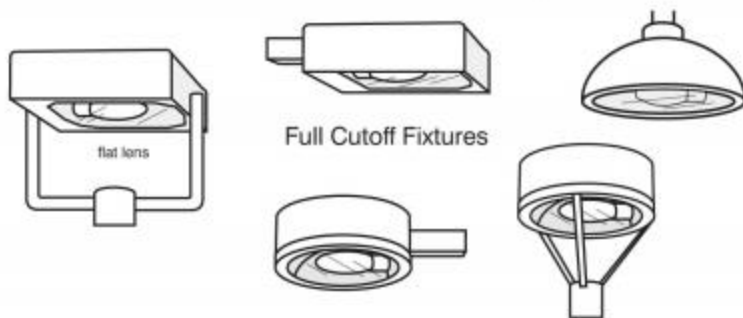
Unshielded PAR
Floodlights



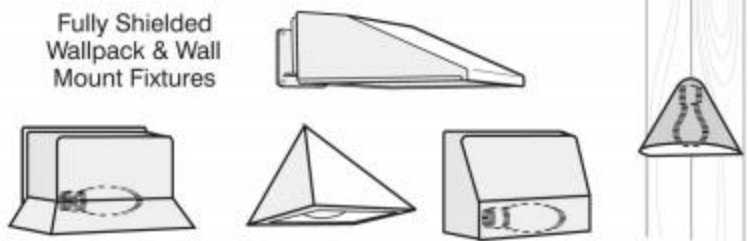
Drop-Lens Canopy
Fixtures

Acceptable

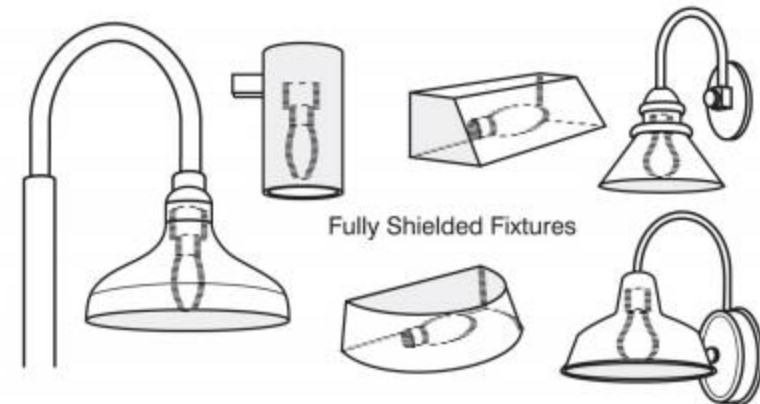
Fixtures that shield the light source to minimize glare and light trespass
and to facilitate better vision at night



Full Cutoff Fixtures



Fully Shielded
Wallpack & Wall
Mount Fixtures



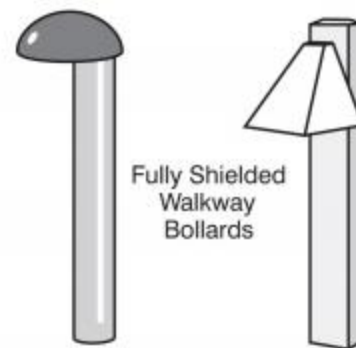
Fully Shielded Fixtures



Full Cutoff Streetlight



Fully Shielded
Barn Light



Fully Shielded
Walkway
Bollards



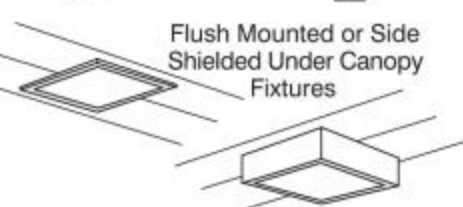
Fully Shielded
Decorative
Fixtures



Fully Shielded
'Period' Style
Fixtures



Shielded / Properly-aimed
PAR Floodlights



Flush Mounted or Side
Shielded Under Canopy
Fixtures

Circle lighting fixture(s) to be used and sign here: