



CITY OF
JOHN DAY

Land Partition Application

Applicant: _____ **Phone:** _____ **Email:** _____

Property Owner(s): _____

Property Address: _____

Township, Section, Range, and Tax Lot: _____

Zone: _____ **Present Parcel Size:** _____ **Number of Proposed Parcels:** _____

Proposed Parcel Size: #1: _____ **#2:** _____ **#3:** _____

Present Use: _____

Proposed use(s): _____

Additional Information: _____

As part of your land use request, you must submit the following information:

- The Property Deed



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- Names and addresses of landowners within 100 feet of property boundaries
- Map of proposed division lines and proposed area of each parcel
- Requirements outlined in Preliminary Plat Subdivision Requirements as contained in 5-4.3.060 of the John Day Development Code, including a preliminary plat that consists of drawings and supplemental written material.

Signatures

Note: All owners must sign this application or submit a letter of consent authorizing another individual to submit application. Incomplete or missing information may delay the review process.

Owner: _____ Date: _____

Owner: _____ Date: _____

For Office Use Only

Date Stamp:

Received By: _____

Required Fee: \$ _____ **Date Received:** _____ **120 Day Deadline:** _____