



DEPARTMENT OF PLANNING AND DEVELOPMENT

210 SW 2nd Street
Newport, OR 97365
541-265-4192 (Phone)
541-265-6945 (Fax)

Zoning Clearance Application
Form for Building Permit Reviews

!!! COUNTY USE ONLY !!!

RECEIVED BY: _____

DATE RECEIVED: _____

BUILDING PERMIT NUMBER _____

PLANNING/EHS PERMIT NUMBER _____

ZONE / COMP PLAN: _____

FLOODPLAIN: _____

APPLICANT INFORMATION

Full Name: _____

First: _____ MI: _____ Last: _____

Organization (Company) Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ *Email: _____

Mobile Number: _____ Fax Number: _____

EXISTING USES / DEVELOPMENT

Existing Uses: _____

Existing Structures (#): _____

Water Supply: _____

Existing Septic System: [] YES [] NO

Number of Bedrooms: _____

EXISTING STRUCTURE/DWELLING

[] Remodel/Repair/Renovation

[] Addition¹: _____

¹ Provide the total existing square footage.

NEW CONSTRUCTION~

[] New Single-Family Residence

[] Manufactured Home Placement

[] Accessory Structure

[] Other: _____

~ A plot plan is required for all new structures and additions to existing structures.

EXISTING/PROPOSED SETBACKS

Front: _____ Rear: _____

Side 1: _____ Side 2: _____

NEW SQUARE FEET/HEIGHT

Structural/Covered Deck: _____

Uncovered Deck/Porch: _____

Floors (New and/or Existing): _____

Height (Final Grade to Peak): _____

Bedrooms: _____ Parking: _____

[] SAME AS APPLICANT

PROPERTY OWNER INFORMATION^

Full Name: _____

First: _____ MI: _____ Last: _____

Organization (Company) Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email: _____

Mobile Number: _____ Fax Number: _____

^By signing this application you are asserting you are a representative of the property owner and have the authority/permission to apply for permits on their behalf.

PROJECT LOCATION

Situs Address: _____

Assessor's Map and Tax(s): _____

Acres/Square Feet: _____ Number of Lots/Parcels: _____ Street: _____

PROPOSED DEVELOPMENT

Application/Project Name (if applicable): _____

Description of Work: _____

*Lincoln County Planning and Development staff will correspond with applicants by email. You are advised to monitor your email spam filter for emails ending with "@co.lincoln.or.us". If you do not provide an email address with this application, you may receive communication from this department by USPS.

Applicant Signature: _____ Date: _____