

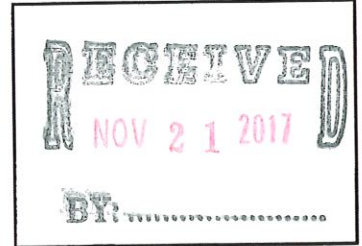


**City of Molalla**  
**Site Plan Review Application**  
 Worksheet No. P73-2017

**Check All That Apply:**

- |   |  |
|---|--|
| <input type="checkbox"/> New Construction   | <input type="checkbox"/> Demolition                |
| <input type="checkbox"/> Manufactured Home  | <input type="checkbox"/> Manufactured Home in Park |
| <input type="checkbox"/> Sign Permit        | <input type="checkbox"/> Other                     |
| <input checked="" type="checkbox"/> Remodel |  |

**Date Stamp**



*Please Print or Type:*

Business License # \_\_\_\_\_  
 Property Owner THE GREENS APARTMENTS, LLC Phone 541-426-3820  
 Mailing Address 200 EAST MAIN STREET/ PO BOX 490  
 City ENTERPRISE State OR Zip 97828  
 Contractor's Name TBD CCB No. \_\_\_\_\_ Phone \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Address of Building Site 511 RIDINGS AVE. Parcel Size 1.2 Acres  
 Tax Account Number(s) 52E08A T \_\_\_\_\_ R \_\_\_\_\_ S \_\_\_\_\_ Tax Lot # 5301  
 Proposed Improvement Monument & building signage, repair concrete, new mailbox location.  
 Intended Use Existing multi-family apartment living/complex  
 Describe all buildings or structures currently on property (number and type) 5 buildings, Units 1-20

Distance of building site from river, creek or stream bank 5,100 ft

City Utilities Required:  Water  Sewer  None No change to existing services

This application represents:  New Development  Re-development  Change of Use

Other No change to existing use

Applicant's Signature *[Signature]* Date: 11-21-17

**For Official Use Only**

|                     |                     |                   |                 |                         |                      |
|---------------------|---------------------|-------------------|-----------------|-------------------------|----------------------|
| City File # _____   | Date Received _____ | Received By _____ | Receipt # _____ | Date App Complete _____ | SDC's Paid <u>20</u> |
| City Approval _____ | Title _____         | Date _____        |                 |                         |                      |



# City of Molalla Site Plan Review: Checklist Worksheet No. \_\_\_\_\_

### Construction Type:

- Commercial
- Industrial
- Single Family
- Duplex
- Multifamily (Number 20 )
- Manufactured Home
- Remodel
- Demolition
- Accessory structure (see Zone for regulations)
- Other \_\_\_\_\_

### Attach Site Plan With All of the Following:

- Lot area
- Building area
- Total impervious surface area (driveways, patios, buildings, etc.) **No change to imp. area**
- Building height **23'-9"**, no change
- Parking area **No change to parking area**
- All easements
- Streets
- Erosion Control plan
- Stormwater drainage plans
- Setbacks/show building footprint
- Lot Coverage
- Existing & proposed screening/fencing
- Existing & proposed lighting
- Existing & proposed landscaping
- Elevation Plans and/or narrative showing conformance with Chapter(s):  
17.08.090 for Residential Proposals  
17.12.070 for Commercial Proposals  
17.16.040 for Industrial Proposals

### Please provide (If Applicable):

- Planning File #(s): \_\_\_\_\_
- Subdivision name/date approved: \_\_\_\_\_
- Special Planning Permits: Condition Use Variance Other: \_\_\_\_\_
- Planning Conditions of Approval: \_\_\_\_\_

# City of Molalla Building Location Plan Worksheet No. \_\_\_\_\_

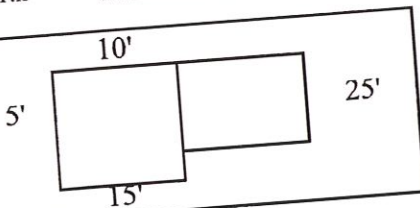
Applicant's Name THE GREENS APARTMENTS, LLC Phone 541-426-3820  
Address 511 RIDINGS AVE. MOLALLA, OR 97038 Tax Acct R# \_\_\_\_\_

**WAIVER: I understand that approval of this Pre-application Worksheet and Plot Plan does not release me from compliance with private covenants, restrictions or easements affecting this property.** DJ  
Initials

## INFORMATION NEEDED

↑  
North

EXAMPLE



1. ASSESSOR'S MAP T \_\_\_ R \_\_\_ SECT <sup>8A</sup> TAX LOT <sup>5301</sup>
2. PROPERTY LINES.
3. PERMANENT LAND MARKS (ROADS, STREAMS AND RIVERS)
4. DISTANCE FROM LANDMARKS AND PROPERTY LINES TO BUILDING SITES.
5. LOCATION AND IDENTIFICATION OF OTHER STRUCTURES ON PROPERTY.
6. LOCATION OF ACCESS.

NAME OF STREET OR ROAD

See survey sheet 03 for location of existing buildings, no changes.





# City of Molalla

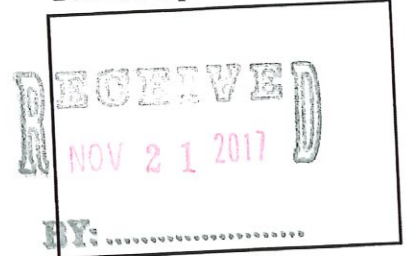
## Site Plan Review Application

Worksheet No. 773-2017

**Check All That Apply:**

- |   |  |
|---|--|
| <input type="checkbox"/> New Construction   | <input type="checkbox"/> Demolition                |
| <input type="checkbox"/> Manufactured Home  | <input type="checkbox"/> Manufactured Home in Park |
| <input type="checkbox"/> Sign Permit        | <input type="checkbox"/> Other                     |
| <input checked="" type="checkbox"/> Remodel |  |

Date Stamp



**Step 1 - Information Provided By Applicant:**

*Please Print or Type:*

Property Owner THE GREENS APARTMENTS, LLC Business License # \_\_\_\_\_  
 Mailing Address 200 EAST MAIN STREET/ PO BOX 490 Phone 541-426-3820  
 City ENTERPRISE State OR Zip 97828  
 Contractor's Name TBD CCB No. \_\_\_\_\_ Phone \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Address of Building Site 517 RIDINGS AVE. Parcel Size .8 Acres  
 Tax Account Number(s) 52E08A T \_\_\_\_\_ R \_\_\_\_\_ S \_\_\_\_\_ Tax Lot # 5303  
 Proposed Improvement Monument & building signage, repair concrete, new mailbox location.  
 Intended Use Existing multi-family apartment living/complex  
 Describe all buildings or structures currently on property (number and type) 3 buildings, Units 21-34  
 Distance of building site from river, creek or stream bank 5,300 ft  
 City Utilities Required:  Water  Sewer  None No change to existing services  
 This application represents:  New Development  Re-development  Change of Use  
 Other No change to existing use  
 Applicant's Signature [Signature] Date: 11-21-17

| For Official Use Only |               |             |                   |            |
|-----------------------|---------------|-------------|-------------------|------------|
| City File #           | Date Received | Received By | Receipt #         | 14         |
| City Approval         |               |             | Date App Complete | SDC's Paid |
|                       |               | Title       |                   | Date       |



# City of Molalla

## Site Plan Review: Checklist

Worksheet No. \_\_\_\_\_

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**City of Molalla**  
**Building Location Plan**  
**Worksheet No. \_\_\_\_\_**

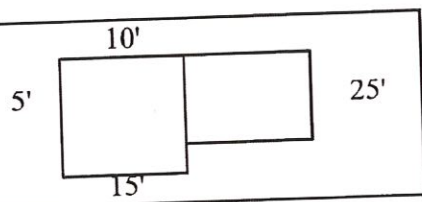
Applicant's Name THE GREENS APARTMENTS, LLC Phone 541-426-3820

Address 517 RIDINGS AVE. MOLALLA, OR 97038 Tax Acct R# \_\_\_\_\_

**WAIVER: I understand that approval of this Pre-application Worksheet and Plot Plan does not release me from compliance with private covenants, restrictions or easements affecting this property.** RA  
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**INFORMATION NEEDED**

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