



City of Aumsville

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SIGN VARIANCE APPLICATION TYPE II ACTION

SITE ADDRESS/LOCATION: _____

APPLICANT _____

ADDRESS _____

EMAIL _____

PHONE NO. _____

FAX NO. _____

PROPERTY OWNER: _____
(if different than applicant)

ADDRESS: _____

PHONE NO. _____

FAX NO. _____

FOR OFFICE USE ONLY

Filing fee: \$620	
Date Rec'd/Fee Pd	
Receipt No.	
Date copies to: Planner, Engineer & Marion Co. PW (if applicable)	
Date Application Deemed Complete: _____	
Initials: _____	
Decision Deadline Date:	
(60 days) APC _____	
(95 days) ACC _____	
(120 days) ACC _____	
Date of Posting	
Date of Mailing (Attach Mailing List) _____	
Date of Public Hearing:	
APC _____	
ACC (if appealed) _____	
List of People Requesting "NOTICE OF DECISION"	
Yes (attached)	No
"NOTICE OF DECISION" Date sent within 10 days	
Appeal: YES	NO

We, the undersigned property owner(s) or authorized agent(s), request a variance from Aumsville Development Ordinance Section No. _____ for property legally described as:
 Marion County Map No.(s) _____, if available
 Marion County Parcel No.(s) _____ Marion County Tax Acct No.(s) _____
 Addition/Subdivision Name (if available) _____ Lot _____ Block _____

For the following reason:

1. Current Property Information

- a. Address and general location of the property: _____

- b. Current zoning: _____
- c. Total current area (square feet): _____
- d. Dimensions of the current property: _____
- e. Current use of the property: _____
- f. Number of existing structures and general description:

- g. Is this area served by curbs and sidewalks? YES _____ NO

2. Additional Comments and Explanations

3. Attachments

- a. Certified list obtained from Marion County, or a title company, of the names of the owners of all property within 250 feet of the boundary of the property proposed for a variance, the mailing addresses, and the description of their properties as it appears on the most recent assessment and tax roll of Marion County, or as it appears in the deed records of the county, if such records be later, shall be attached. Property owned by the City of Aumsville shall not be deemed as part of the affected area. Please include the name and address of the applicant and property owners of the subject property. (See attached sample mailing list format)
- b. A scale drawing showing the boundary of the property with dimensions, the location of existing structures, and the location of the variance request. **PLEASE SUBMIT AN ORIGINAL AND TEN COPIES.**

4. Criteria For a Sign Variance Application

a. Are there unique circumstances or condition(s) of the lot, building or traffic pattern such that the existing sign regulations create an undue hardship?

Yes _____ No _____ Please explain: _____

b. Does the variance conflict with the purpose of the Aumsville Development Sign Ordinance?

Yes _____ No _____ Please explain: _____

c. Would the granting of this variance compensate for circumstances in a manner equitable with other property owners and is thus not a special privilege?

Yes _____ No _____ Please explain: _____

d. Is the variance requested the minimum variance needed which would alleviate the hardship?

Yes _____ No _____ Please explain: _____

e. Does the variance decrease traffic safety or detrimentally affect any other identified items of public welfare?

Yes _____ No _____ Please explain: _____

f. Would the granting of a variance confer any special privileges or a special advertising advantage upon the applicant that is denied by the Aumsville Development Ordinance to other lands, structures, or buildings within the same zone?

Yes _____ No _____ Please explain: _____

g. Are the special conditions and circumstances a result from actions of the applicant?

Yes _____ No _____ Please explain: _____

5. This application must be signed by the applicant and all owners of the applicable property.

Applicant Signature: _____ Date _____

Applicant Signature: _____ Date _____

Property Owner Name: (please print) _____

Property Owner Signature: _____

Mailing Address: _____

Property Owner Name: (please print) _____

Property Owner Signature: _____

Mailing Address: _____

Prepare and attach additional signatures, if necessary.