

#### **Scappoose Planning Department**

33568 E. Columbia Ave. Scappoose, OR 97056 Phone: 503-543-7146 Fax: 503-543-7182

www.ci.scappoose.or.us

### SUBDIVISION PRELIMINARY PLAT APPLICATION

NOTICE TO APPLICANT: On original application form, please print legibly using black/dark blue ink or type. Applicants are advised to review the list of submittal requirements and recommendations indicated on each land use application form and in the applicable code section prior to submitting an application. Applicants are also advised to schedule a pre-application meeting with staff prior to submitting final application. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED UNTIL THE PLANNING DEPARTMENT RECEIVES ALL REQUIRED SUBMITTAL MATERIALS. REFER TO SUBMITTAL CHECKLIST.

TRACKING INFORMATION (For Office Use Only)

Application Submittal Includes:			
2 Hard Copies Required (Initial Submittal)	☐ Electronic Submittal	Fee	
7 Hard Copies Required (Final Submittal, one	e deemed complete by City Planner)		
Date Submitted with payment:	e e e e e e e e e e e e e e e e e e e	Receipt #:	
File #	Hearing Date		
SITE LOCATION & DESCRIPTION			
Tax Map #(s) 3N2W 12CB	Tax Lot #(s) <u> </u>		
Frontage Street or Address <u>IP WeS+</u>	Road (No Address)		
Nearest Cross Street Captain Roge	er Kucera Way	-	
Plan Designation LDR Ze	oning R -   Site Size   /	acres sq. ft.	
Dimensions Highly Variable			
SUMMARY OF REQUEST	*		
Proposed Project Name BUXton Ray	ich		
Project Type/Narrative Summary: (Provide a brief summary and specify project type: Single Family Residential (SFR), Multifamily Residential (MFR), Commercial (C), Industrial (I))			
48 Lot Single Family 1	esidential subdivision	n with Planned	
48 Lot Single Family a Development, Condition	onal Use & Sensitive La	nds Review	
NOTE: If a residential project is proposed, a Residential Density Calculation Worksheet (page attached) must be submitted.			
Is a Variance Requested?	Yes	🌠 No	
If Yes, identify type of request:	Minor Variance	Major Variance	
NOTE: Procedures and Applicable Criteria for variances may be found in SDC Chapter 17.134			

## SUBDIVISION PRELIMINARY PLAT

### (CONTINUED)

Does the owner of this site also own any adjacent property? 🔘 Yes 🔙 No (If Yes, please list tax map and tax lots)
Property Owner(s) Signature(s) Date:
If more than one property owner, please attach additional sheet with names and signatures.)
Applicant: Name_Steve Puls
Business Name David Weekley Homes
Mailing Address 1905 NW 169+4 Place, #102 City Reaverton State OR Zip 97006
thone # 503-213-4403 Fax# Email Address Spuls@dwhames.co
applicant's Signature Date:
pplicant's interest in property Purchaser/Developer
Additional Project Team Members
pplicant's Representative: Contact Name Watt Sprague
Business Name Pioneer Design Group, Inc.
90205W Washington Mailing Address Square Road, Ste 170 City Portland State OR Zip 97223
thone # 971-708-6249 Fax # Email Address MSpragveapd-grp.com
vill Engineer: Contact Name Brent Fitch
usiness Name Pigneer Design Group, Inc
usiness Name Pigneer Design Group, Inc 90205W was ning for ailing Address Square Road, Ste 270 City Portland State OR Zip 97223
none # 503-643-8286 Fax# Email Address b fitch a pd-grp. con
chitect: Contact Name Steve Puls
usiness Name David Weekley Homes
lailing Address 1905 NW 169th Place, #102 City Beverton State OR Zip 97006
one # 503-213-4403 Fax # Email Address Spuls @ Awhomes Com
ndscape Architect: Contact Name Ben Holmes
usiness Name Pion eer Design Group Inc.
9020SW Washingford ailling Address Square Road, Ste. 170 City Portland State OR Zip 97223
one # 503-643-8286 Fax # Email Address bholmes@pd-grp.com

# SUBDIVISION PRELIMINARY PLAT

#### (CONTINUED)

Does the owner of this site also own any adjacent property? 🔲 Yes 🥅 No (If Yes, please list tax map and tax lots)
Property Owner(s) Signature(s) $\frac{2}{16/2022}$ (If more than one property owner, please attach additional sheet with names and signatures.)
Applicant: Name_Steve Pols
Business Name David Weekley Homes
Mailing Address 1905 NW 16944 Place, 702 City Beaverton State OR Zip 97006
Phone # 503-213-4403 Fax # Email Address Spuls@dwhomes.com
Applicant's Signature Date:
Applicant's interest in property <u>Purchaser/Developer</u>
Additional Project Team Members
Applicant's Representative: Contact Name Watt Sprague
Business Name Pioneer Design Group, Inc. 90205W Wasnington Mailing Address Square Road, Ste 170 City Portland State OR Zip 97223
Phone # 971-708-6249 Fax # Email Address MSpragveapd-grp.com
Civil Engineer: Contact Name Brent Fitch
Business Name Pianeer Design Group, Inc 90205W Washing for Mailing Address Square Road, Ste, 270 City Portland State OR Zip 97223
Phone # 503-643-8286 Fax # Email Address britch @ pd-grp. com
Architect: Contact Name Steve Puls
Business Name David Weekley Homes
Mailing Address 1905 NW 169th Place, 702 City Benverton State OR Zip 97006
thone # 503-213-4403 Fax # Email Address Spv / S @ dwhomes . Com
andscape Architect: Contact Name Ben Holmes
Business Name Pioneer Design Group Inc.
Business Name Pioneer Design Group Inc. 90205W Washingfor Mailing Address Square Road, Ste. 170 City Portland State OR Zip 97223
hone # 503-643-8286 Fax # Email Address bholmes@pdgrp.com