

**CITY OF COLUMBIA CITY**  
1840 Second Street - P.O. Box 189 - Columbia City, Oregon 97018  
Phone: (503) 397-4010 Fax: (503) 366-2870  
E-mail: [colcity@columbia-city.org](mailto:colcity@columbia-city.org)

**VARIANCE APPLICATION**

APPLICANT \_\_\_\_\_ PHONE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

PROPERTY OWNER \_\_\_\_\_ PHONE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

REQUEST \_\_\_\_\_

ZONE DESIGNATION \_\_\_\_\_

LOCATION \_\_\_\_\_

LEGAL DESCRIPTION \_\_\_\_\_

Fee: \$550 deposit. Note: Fees for all applications requiring a deposit are billed at actual costs.

SIGNATURE (applicant) \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE (owner) (agent) \_\_\_\_\_ DATE \_\_\_\_\_

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\*\*\*OFFICE USE ONLY\*\*\*

|                                  |                    |                      |
|----------------------------------|--------------------|----------------------|
| Date filed _____                 | Fee paid _____     | Receipt No. _____    |
| Fee Agreement _____              | Hearing date _____ | Notices mailed _____ |
| Planning Commission action _____ | Date _____         |                      |
| Appeal filed _____               | Hearing date _____ | Notices mailed _____ |
| Council action _____             | Date _____         |                      |