

CITY OF COLUMBIA CITY
1840 Second Street - PO Box 189 - Columbia City, OR 97018
Phone: (503)397-4010 Fax: (503)366-2870
E-mail: colcity@columbia-city.org

PARTITION or SUBDIVISION APPLICATION

APPLICANT _____ PHONE _____

MAILING ADDRESS _____

EMAIL _____

PROPERTY OWNER _____ PHONE _____

MAILING ADDRESS _____

EMAIL _____

REQUEST _____

LOCATION _____

TAX ACCOUNT NO. _____ ZONING: _____ ACRES: _____

SIGNATURE (applicant) _____ DATE _____

SIGNATURE (owner)(agent) _____ DATE _____

Refer to the Columbia City Development Code:

**Chapter 7.152 for Partition Requirements / Chapter 7.154 for Subdivision Requirements
Chapter 7.120 for Site Development Review (for all new developments) separate application & fee**
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FEES: (To be paid at time of application - an executed Agreement to Meet Costs of Development Review
and Approval Compliance must accompany the application - see attached Exhibit "B")

Partition Request: \$700 deposit

Subdivision Request: Deposit equal to \$750 plus \$100 per lot

Note: Fees for all applications requiring a deposit are billed at actual costs.

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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 _____