



ROAD DEPARTMENT

GATE PERMIT APPLICATION

\$100.00 NON-REFUNDABLE PERMIT FEE

This gate permit application is to be used pursuant to Resolution No. 90-081.

APPLICANT INFORMATION

APPLICANT NAME: Jason Bethers Eastbourne LLC

MAILING ADDRESS: PO Box 6313

CITY: Bend STATE: OR ZIP CODE: 97701

TELEPHONE NUMBER: 541-788-4868 EMAIL ADDRESS: jason@elitebend.com

PROPOSED GATE LOCATION

ROAD NAME: Conquest Road

GATE LOCATION(S) (NEAREST INTERSECTION, SITUS ADDRESS, ETC.): _____

See attached detailed drawings and specifications

Application must include:

- \$100.00 non-refundable permit processing fee.
- Map depicting location of proposed gate(s).

APPLICANT SIGNATURE: _____

Jason Bethers

Digitally signed by Jason Bethers
DN: C=US,
E=jason@elitebend.com, O="Elite
Electric ", CN="Jason Bethers "
Date: 2025.08.05 03:58:38-07'00'

DATE: 8/5/25

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