



**Application for an Amendment to the  
 Comprehensive Plan or Zoning  
 Maps or Text**

Date Received: 06.12.20

Date Complete: \_\_\_\_\_

File Number: AX 2020-01

Map/Text Amendment Application Fee \$: ~~\$1,030.00~~ \$1,545.00

Zoning Application Fee \$: ~~\$1,030.00~~

Receipt #: 3954

Planning Commission Hearing Date: 07.06.20

City Council Hearing Date: 07.28.20

Within 30 days following the filing of this application, the City Planner will make a determination of completeness regarding the application. If deemed complete, the application will be processed.

**Applicant's Name:**

Cindy Sieg

**Property Owner:**

Cindy Sieg

**Applicant's Address:**

PO Box 464, Sweet Home, OR 97386

**Owner's Address:**

PO Box 464, Sweet Home, OR 97386

**Applicant's Phone and e-mail:**

(541) 409-0113 csieg97386@yahoo.com

**Owner's Phone and email:**

(541) 409-0113 csieg97386@yahoo.com

**Comprehensive Plan Map or Zoning Map Amendment**

**Subject Property Address:**

789 Alder, Sweet Home, OR 97386

**Subject Property Assessor's Map and Tax Lot:**

14S01E06B0 00800

**Subject Property Size:**

0.71 ACRES

**Current Zoning Classification**

in Linn County

**Current Comprehensive Plan Classification:**

in Linn County

**Purpose of Request**

Annex into City of Sweet Home zone R1

**Zoning or Comprehensive Plan Text Amendment**

Sections proposed to be changed:

Proposed language for change.

Attach proposed text to this form.

**Purpose of Request**

**Submittal Requirements**

The checklist on the other side of this application lists the required items must be submitted with this application and the Criteria the request must meet. Please address all items that apply to this request.

**I certify that the statements contained on this application, along with the submitted materials, are in all respects true and are correct to the best of my knowledge and belief.**

**Applicant's Signature:**

*[Signature]*

Date:

6/11/20

**Property Owner's Signature:**

*[Signature]*

Date:

6/11/20



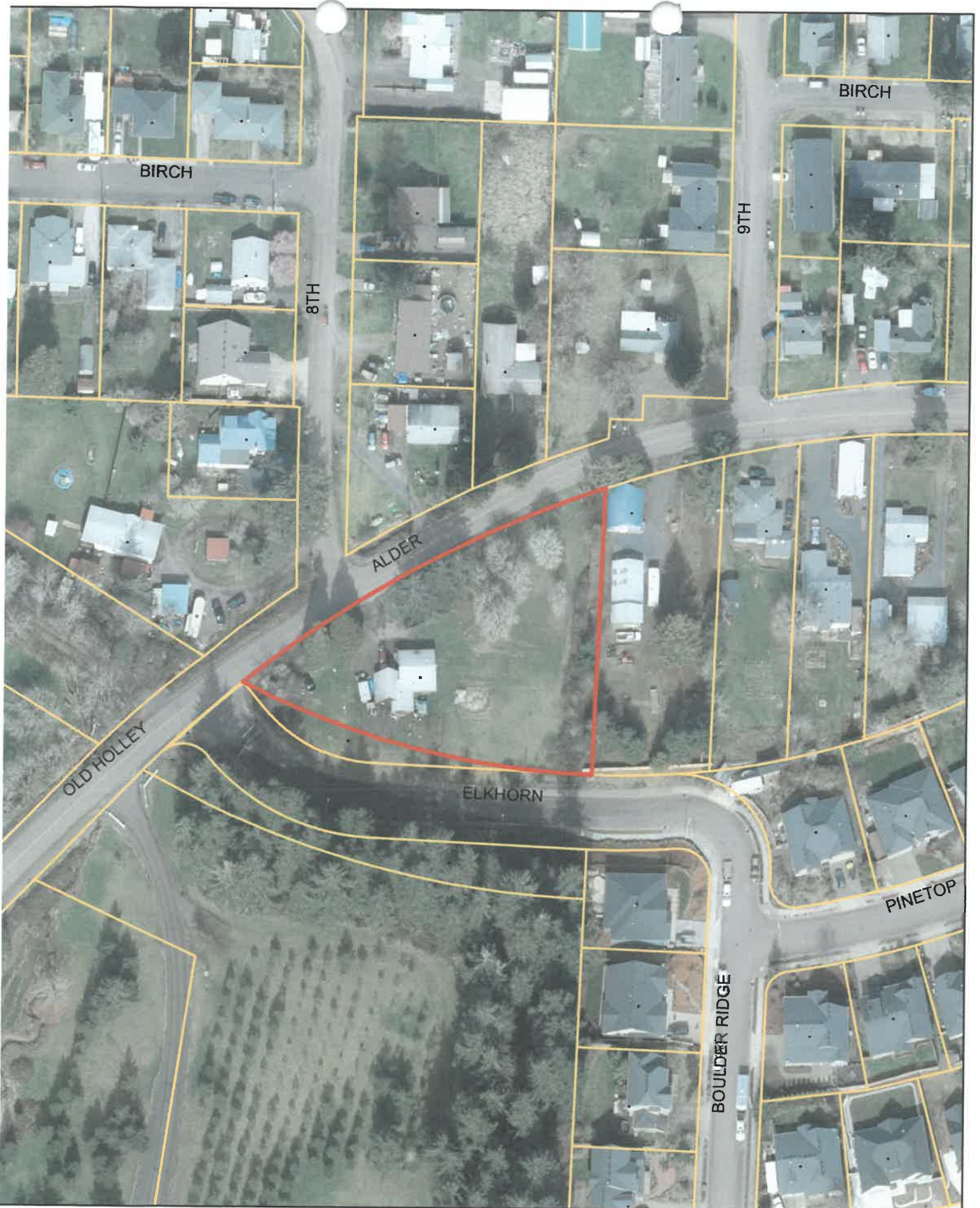
**City of Sweet Home**  
 Community and Economic Development Department- Planning Program  
 3225 Main Street, Sweet Home, OR 97386 541-367-8113

**PETITION FOR ANNEXATION TO THE CITY OF SWEET HOME, OREGON**

To the City Council of the City of Sweet Home:  
 We, the undersigned owners and/or electors, petition and consent to be annexed to the City of Sweet Home.  
 A map is attached, marked Exhibit A, showing the affected territory and its relationship to the present City boundary.

Signature	Printed Name	I Am A* (check both if applicable)		Owner's/Elector's Mailing Address (street, city, zip code)	Property Description	Date**
		PO	RV			
<i>Cindy Sieg</i>	Cindy Sieg	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PO Box 464, Sweet Home, OR 97386	14S01E06B 00800	6/9/20

\*PO = Property Owner      RV = Registered Voter      \*\*Within 1 year from the date of filing the petition with the City



1 inch = 98 feet

789 Alder  
Annexation Petition

Date: 8/7/2018