



# CITY OF CANNON BEACH

## PARTITION APPLICATION

Please fill out this form completely. Please type or print.

Applicant Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Property-Owner Name: \_\_\_\_\_

(if other than applicant)

Mailing Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Property Location: \_\_\_\_\_

(street address)

Map No.: \_\_\_\_\_ Tax Lot No.: \_\_\_\_\_

### Partition Description:

*Please see Municipal Code Sections 16.04.180 and 16.04.190 for Partition information that must be included with this application.*

**Application Fee: \$500.00**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If the applicant is other than the owner, the owner hereby grants permission for the applicant to act on his/her behalf. Please attach the name, address, phone number, and signature of any additional property owners.

*For Staff Use Only:*

Received on: \_\_\_\_\_ By: \_\_\_\_\_

Fee Paid: \_\_\_\_\_ Receipt No.: \_\_\_\_\_

*(Last revised March 2021)*