

Planning and Zoning Department of Transportation and Development

Development Services Building 150 Beavercreek Road | Oregon City, OR 97045

503-742-4500 | zoninginfo@clackamas.us www.clackamas.us/planning

## **STATEMENT OF USE(S)**

## For Development or Structure Associated with Marijuana Production in AG/F. EFU, or TBR Districts

Marijuana production, which includes the growing, drying, trimming, and curing of marijuana, is subject to Clackamas County's land use rules in Zoning and Development Ordinance (ZDO) Section 841 if the production occurs in the AG/Forest (AG/F), Exclusive Farm Use (EFU), or Timber (TBR) Districts. In these zoning districts, and in the absence of a valid nonconforming use or vested right, only one premises licensed for marijuana production by the Oregon Liquor Control Commission (OLCC) or one medical marijuana grow site registered by the Oregon Health Authority (OHA) may be located on a tract. A "tract" is one or more contiguous lots of record under the same ownership.

How many total premises that are licensed for marijuana production by the OLCC *and* medical marijuana grows sites that are registered by the OHA, combined, will be located on the subject tract?

Total premises and grow sites on tract: \_\_\_\_\_

SITE INFORMATION & USE(S)							
Site address:						Zoning district:	
Map and tax lot #:						Land area:	
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	Township:	Kange:	Section:	Tax Lot:			
	Township:	Range:	Section:	Tax Lot:			
	Township:	Range:	Section:	Tax Lot:			
Describe in detail how you or the future occupant(s) will use the development/structure. Attach additional pages, if necessary. This information will be used to ensure compliance with land use laws and to determine appropriate building code occupancy classification.							
I hereby certify that the statements contained herein, along with the evidence submitted, are in all respects true and correct							
to the best of my knowledge.							
Printed name(s) of property owner(s) or authorized agent:					Phone num	Phone number:	
Signature(s) of property owner(s) or authorized agent: Date(s)							
FOR OFFICIAL USE ONLY							
Comments:							
Staff person:						Date:	