



*City of Florence*  
Community Development Department  
250 Highway 101  
Florence, OR 97439  
Phone: (541) 997-8237  
Fax: (541) 997-4109  
[www.ci.florence.or.us](http://www.ci.florence.or.us)

### Type of Request

#### THIS SECTION FOR OFFICE USE ONLY

☐ Type I ☐ Type II ☐ Type III ☐ Type IV

Proposal: \_\_\_\_\_

### Applicant Information

Name: Alison Myers

Phone 1: [REDACTED]

E-mail Address: alison@myers

Phone 2: \_\_\_\_\_

Signature: Alison Myers

Date: Oct 20th 2012

Applicant's Representative (if any): \_\_\_\_\_

### Property Owner Information

Name: Alison Myers

Phone 1: [REDACTED]

E-mail Address: [REDACTED]

Phone 2: \_\_\_\_\_

Address: [REDACTED]

Signature: Alison Myers

Date: 10-20-2012

Applicant's Representative (if any): \_\_\_\_\_

NOTE: If applicant and property owner are not the same individual, a signed letter of authorization from the property owner which allows the applicant to act as the agent for the property owner must be submitted to the City along with this application. The property owner agrees to allow the Planning Staff and the Planning Commission onto the property. Please inform Planning Staff if prior notification or special arrangements are necessary.

### For Office Use Only:

Received

Approved

Exhibit

### Property Description

Site Address: \_\_\_\_\_

General Description: lot 5900 - Fowlweather

Assessor's Map No.: 18 - 12 - 04 - 42 Tax lot(s): 05900

Zoning District: \_\_\_\_\_

Conditions & land uses within 300 feet of the proposed site that is one-acre or larger and within 100 feet of the site that is less than an acre OR add this information to the off-site conditions map

(FCC 10-1-1-4-B-3): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Project Description

Square feet of new: \_\_\_\_\_ Square feet of existing: \_\_\_\_\_

Hours of operation: \_\_\_\_\_ Existing parking spaces: \_\_\_\_\_

Is any project phasing anticipated? (Check One): Yes ☐ No ☐

Timetable of proposed improvements: \_\_\_\_\_

Will there be impacts such as noise, dust, or outdoor storage? Yes ☐ No ☐

If yes, please describe: \_\_\_\_\_

Proposal: (Describe the project in detail, what is being proposed, size, objectives, and what is desired by the project. Attach additional sheets as necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### For Office Use Only:

Date Submitted: \_\_\_\_\_ Fee: \_\_\_\_\_

Received by: \_\_\_\_\_

Paid

PETITION FOR ANNEXATION

to the

*City of Florence, Oregon*

The undersigned hereby petitions for and gives our consent for the area described below to be included in the request for annexation to the City of Florence. With these signatures, we are verifying that we have the authority to consent to annexation as the property owner(s) and/or elector(s) or on behalf of our corporation, business, or agency.

The property to be annexed is as follows:

Assessors Map Reference and Tax Lot: ~~18-12-04-42~~ 18-12-04-42 Tax lot 05900  
Property Address (if appropriate):

Property Owner /Electors Name(s): Myers Revocable Living Trust

Signature(s):

Alison Myers

Date:

October 20<sup>th</sup> 2022