STAFF USE ONLY

CASE: PCR 16-00002 DATE FILED: 5/10/2016 DATE COMPLETE: _____

☒ FEE PAID $100 RECEIPT #:

CORVALLIS
ENHANCING COMMUNITY LIVABILITY

City of Corvallis - Development Services Division
501 SW Madison Ave.
Corvallis, OR 97333
Telephone: (541) 766-6929
FAX: (541) 766-6936
www.corvallispermits.com

Plan Compatibility Review Application

Location / Description of Subject Property(ies)

Street Address: 3020 SW MORRIS AVE.

Benton County Tax Assessor Map: _____ Tax Lot(s) #: _____

Subdivision Name or Partition #: _____

Zone _____ Size (acres) _____ Density Range _____ du/ac - _____ du/ac

☐ Historic Overlay ☐ Natural Features ☐ Related Land Use Cases _____

Applicant Information

Applicant(s) Name(s): ROBINSON (Last) JOHN (First) _____ (M.I.)

☐ Same as Property Owner

QUALITY RESIDENTIAL CONST. LLC
2500 DEL RIO CT. SE
Street Address

ALBANY (City) OR (State) 97322 (Zip Code)

Phone # 541-619-5787 Email Address johnrobinson1234@hotmail.com

Contact preference ? ☐mail ☒phone ☐email

Property Owner Information (where different than Applicant)

Property Owner(s) Name(s): FISHER (Last) CATHERINE (First) _____ (M.I.)

3020 SW MORRIS AVE.
Street Address

CORVALLIS (City) OR (State) 97333 (Zip Code)

Phone # 541 979.9898 Email Address catherine@tnrealty.com

Contact preference ? ☐mail ☒phone ☒email

Property Owner(s) Signature(s) Date 5/10/2016
(If Legal Representative: provide supporting documentation)

Attachments (refer to the following pages)

corvallispermits.com
land use planning • permits • inspections

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