CITY OF CANNON BEACH APPLICATION FOR WAIVER FROM REQUIREMENT TO REMOVE AN ENCROACHMENT OF PRIVATE IMPROVEMENT INTO PUBLIC STREET RIGHTS-OF-WAY

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

Applicant Name:

Mailing Address:

Telephone:

Property-Owner Name:

(if other than applicant)

Mailing Address:

Telephone:

Property Location:

(street address)

Map No.:

Tax Lot No.:

Encroachment Description: please attach a sketch or copy of survey. Use additional sheets as necessary.

Explain how this encroachment represents (1) an exceptional circumstance that does not generally apply to other properties; or (2) that requiring the removal of the encroachment would create a practical difficulty or an unnecessary hardship that is not proportional to the proposed action of the requested

Waiver Application Fee: \$400.00

building permit.

Applicant Signature:	Date:
Property Owner Signature:	Date:
herbehalf. Please attach the name As Property Owner, my signature	address, phone number, and signature of any additional property owner or an authorized applicant's signature, allows any duly authorized all properties affected by this permit for the purpose of follow-up
For Staff Use Only:	Signature:
Received on:	By:
Fee Paid:	Receipt No.: