



# CURRY COUNTY COMMUNITY DEVELOPMENT

94235 MOORE STREET SUITE 113  
GOLD BEACH, OREGON 97444

*Carolyn Johnson*  
**Planning Director**

**Phone (541) 247-3284**  
**FAX (541) 247-4579**

## ON-SITE SEWAGE DISPOSAL/BUILDING COORDINATION FORM

### I. GENERAL INFORMATION

Date \_\_\_\_\_ Name \_\_\_\_\_

Subject Property: Map \_\_\_\_\_ Tax Lot \_\_\_\_\_

Application Type:

\_\_\_\_\_ Lot Line Adjustment      \_\_\_\_\_ Partition      \_\_\_\_\_ Subdivision  
\_\_\_\_\_ Planned Unit Development      \_\_\_\_\_ Conditional Use      \_\_\_\_\_ Variance

Description: \_\_\_\_\_

\_\_\_\_\_

### II. ON-SITE SEWAGE DISPOSAL COORDINATION AND RESPONSE:

The above referenced application has been presented to a department sanitarian and discussed with that staff member in terms of any additional permits or requirements with regard to on-site sewage disposal. The sanitarian has indicated these requirements, if any, below: \_\_\_\_\_

\_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_  
Sanitation

### III. BUILDING COORDINATION AND RESPONSE:

The above referenced application has been presented to a department building inspector and discussed with that staff member in terms of any additional permits or building code requirements. The building inspector has indicated these requirements, if any, below:

\_\_\_\_\_

\_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_  
Building Inspector

**NOTE: A planning permit application will not be accepted until this form is completed and all signatures have been obtained.**

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

\_\_\_\_\_

\_\_\_\_\_