

Submitted by:

PLANNING DEPARTMENT

6101 SE Johnson Creek Blvd Milwaukie OR 97206

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503-774-8236

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WEB:

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Expedited Annexation **Application**

File #: A-2020-00 RESPONSIBLE PARTIES: APPLICANT (owner or other eligible applicant): Milway tor al zip: 97269-0819 Mailing address: Phone(s): \$63-318-3705 E-mail: APPLICANT'S REPRESENTATIVE (if different than above): Mailing address: Zip: Phone(s): E-mail: SITE INFORMATION: Property size: 10,000 9F Map & Tax Lot(s): 12E30DA04800 Address(es): 5801 **Existing County zoning:** Proposed City zoning: Existing County land use designation: Proposed City land use designation: PROPOSAL (describe briefly): Milwarkie Annex LIST OF ALL CURRENT UTILITY PROVIDERS: Check all that apply (do not list water or sewer service providers) Cable, internet, and/or phone: Comcast ☐ CenturyLink (formerly Qwest) ☐ NW Natural Gas Energy: Hoodview Disposal and Recycling ☐ Mel Deines Garbage hauler: ☐ Waste Management ☐ Wichita Sanitary
☐ Oak Grove Disposal ☐ Clackamas Garbage Other (please list): SIGNATURE: ATTEST: I am the property owner or I am eligible to initiate this application per Milwaukie Municipal Code (MMC) Subsection 19.1001.6.A. I have attached all owners' and voters' authorizations to submit this application. I understand that uses or structures that were not legally established in the County are not made legal upon annexation to the City. To the best of my knowledge, the information provided within this application package is complete and accurate.

CONTINUED ON REVERSE

THIS SECTION FOR OFFICE USE ONLY:

File #: A-2020-001 Fee: \$ 150.00 Receipt #: Rcd. by:	Date stamp:
Associated application file #'s:	
Neighborhood District Association(s): Levelling	RECEIVED
Notes (include discount if any):	JAN U 3 2020
	CITY OF MILWAUKIE PLANNING DEPARTMEN

EXPEDITED ANNEXATION PETITION OF OWNERS OF 100% OF LAND AREA AND PETITION OF AT LEAST 50% OF REGISTERED VOTERS

TO: The Council of the City of Milwaukie, Oregon

RE: Petition for Annexation to the City of Milwaukie, Oregon

We, the petitioners (listed on reverse), are property owners of and/or registered voters in the territory described below. We hereby petition for, and give our consent to, annexation of this territory to the City of Milwaukie.

This petition includes a request for the City to assign a zoning and land use designation to the territory that is based on the territory's current zoning designation in the County, pursuant to the City's expedited annexation process.

The territory to be annexed is described as follows:

(Insert legal description below OR attach it as Exhibit "A") Holly word Park

PETITION SIGNERS

NOTE: This petition may be signed by qualified persons even though they may not know their property description or voter precinct number.

SIGNATURE	PRI	PRINTED NAME I AM A:* DATE		DATE			
SIGNATURE	FRII	VIED NAM	IE.	PO	RV	OV	DATE
				V		V	12-23-19
PROPERTY ADDRESS			KIY DES				VOTER
	TOWNSHIP RANGE 1/4 SE				LOT#	(S)	PRECINCT#
5809 SE Hazel Pl. Milwaukie	15 2E 300A 4800						
SIGNATURE	DDII	NTED NAM	-		I AM A:	*	DATE
SIGNATURE	FNII	VIED NAM		PO	RV	OV	DATE
	PROPERTY DESCRIPTION					VOTER	
PROPERTY ADDRESS	TOWNSHIP	RANGE	1/4 SEC		LOT#	(S)	PRECINCT#
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				PO	RV	OV	
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PROPERTY ADDRESS	TOWNSHIP		% SEC		LOT #	(S)	PRECINCT #
PROPERTY ADDRESS	TOWNSHIP		_			(S)	
		RANGE	1/4 SEC	0.	LOT #	*	PRECINCT#
PROPERTY ADDRESS SIGNATURE			1/4 SEC		LOT#		
SIGNATURE		RANGE	1/4 SEC	PO PO	LOT #	*	PRECINCT#
		RANGE	1/4 SEC	PO	LOT #	* OV	PRECINCT #
SIGNATURE	PRIM	NTED NAM	1/4 SEC	PO	I AM A:	* OV	DATE VOTER
SIGNATURE PROPERTY ADDRESS	PRIN	NTED NAM PROPER	% SEC	PO CRIPTIC	I AM A: RV ON LOT #	* OV	PRECINCT # DATE VOTER PRECINCT #
SIGNATURE	PRIN	NTED NAM	% SEC	PO	LOT #	* OV	DATE VOTER
SIGNATURE PROPERTY ADDRESS	PRIN	PROPER RANGE	% SEC	PO PO	LOT # RV ON LOT #	* OV	PRECINCT # DATE VOTER PRECINCT #

*PO = Property Owner

RV = Registered Voter

OV = Owner and Registered Voter

CERTIFICATION OF PROPERTY OWNERSHIP OF 100% OF LAND AREA

I hereby certify that the attached petition contains the names of the owners¹ (as shown on the last available complete assessment roll) of 100% of the land area of the territory proposed for annexation as described in the attached petition.

Name Kevin Clarke

Title GIS Cartographer III

Department Assessment Taxation

County of Clarkamas

Date 12/23/19



¹ Owner means the legal owner of record or, where there is a recorded land contract which is in force, the purchaser thereunder. If a parcel of land has multiple owners, each consenting owner shall be counted as a percentage of their ownership interest in the land. That same percentage shall be applied to the parcel's land mass and assessed value for purposes of the consent petition. If a corporation owns land in territory proposed to be annexed, the corporation shall be considered the individual owner of that land.

CERTIFICATION OF LEGAL DESCRIPTION AND MAP

I hereby certify t	hat the description of the territor	ry included within the attach	ed petition (located on
Assessor's Map	12E30DA) has been checked	by me. It is a true and
exact description	of the territory under considerate	ion and corresponds to the a	attached map indicating
the territory under	consideration.		

Name Kevin Clarke

Title GIS Cartographer III

Department Assessment Taxation

County of Clarkamas

Date 12/19/2019



CERTIFICATION OF REGISTERED VOTERS

I hereby certify that the attached petition contains the names of at least 50% of the electors registered in the territory proposed for annexation as described in the attached petition.

Name Tiffany Clark

Title <u>deputy clerk</u>

Department <u>Clackamas County Elections</u>

County of <u>Clackamas</u>

Date 12-20-2019



NOTICE LIST

(This form is NOT the petition)

LIST THE NAMES AND ADDRESSES OF ALL PROPERTY OWNERS AND REGISTERED VOTERS IN THE TERRITORY PROPOSED FOR ANNEXATION.

	Mailing Street Address	Property Address
Name of Owner/Voter	Mailing City/State/Zip	Property Description (township, range, 1/2 section, and tax lot)
	8869 11222 Main 57 Mil white or 77961 PO Box 220 288	5809 SE Hezel Pl
	Name of Owner/Voter	Name of Owner/Voter Mailing City/State/Zip SECR NATURAL OR THE PO Box 220 288

		Mailing Street Address	Property Address
	Name of Owner/Voter	Mailing City/State/Zip	Property Description (township, range, 1/4 section, and tax lot)
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CONFIDENTIAL

Census Form

Date	Use one form per housing unit

Dutt		OSC ONC IOIII	per nousing unit	
	CITY OF MIL	WAUKIE, O	REGON	
Α	ADDRESS	(8		
HOUSING TYPE		Т	ENURE:	
Single	e Unit Structure		Owner Occupied	
Multi	ple Unit Structure		Renter Occupied	
Traile	er or Mobile Home		Vacant	
			Seasonal	
RESIDENTS:				
	<u>Last Name</u>		First Name	
Respondent				
5)				
6)				
7)				
9)				

POPULATION RESEARCH CENTER
PORTILAND STATE
UNIVERSALY
(503) 725-3922

EXPEDITED ANNEXATION CODE EXCERPTS (with staff guidance)

MILWAUKIE MUNICIPAL CODE SECTIONS

19.1104.1 Expedited Process

- A. A petition for any type of minor boundary change may be processed through an expedited process as provided by Metro Code Chapter 3.09.
 - 5. Approval criteria for annexations are found in subsection 19.1102.3.

19.1102.3 Annexation Approval Criteria. The city council shall approve or deny an annexation proposal based on findings and conclusions addressing the following criteria.

- A. The subject site must be located within the city urban growth boundary;
- B. The subject site must be contiguous to the existing city limits;
- C. The requirements of the Oregon Revised Statutes for initiation of the annexation process must be met; Staff guidance: ORS 222.111(2) states that a proposal for annexation may be initiated by a petition to the legislative body of the City by the owners of the territory proposed for annexation. Expedited annexation petitions must be by consent of 100% of property owners and by at least 50% of registered voters, if any, within the territory proposed for annexation.
- D. The proposal must be consistent with Milwaukie comprehensive plan policies;
 Staff guidance: All applicable portions of the Comprehensive Plan are listed below.
- E. The proposal must comply with the criteria of Metro Code Sections 3.09.050(d) and, if applicable, (e). Staff guidance: Metro revised Chapter 3.09 in January 2008. At that time, Subsection 3.09.050(d) was revised, and Subsection 3.09.050(e) was deleted. All current and applicable portions of the Metro Code are listed below.
- F. The proposal must comply with the criteria of Section 19.902 for Zoning Map Amendments and Comprehensive Plan Map Amendments, if applicable.
 - Staff guidance: Changes to the Zoning Map and Comprehensive Plan Map made through the Expedited Annexation process are exempt from this section.

METRO CODE SECTIONS

3.09.050 Hearing & Decision Requirements for Decisions Other Than Expedited Decisions.

(d) To approve a boundary change, the reviewing entity shall apply the criteria and consider the factors set forth in subsections (d) and (e) of Section 3.09.045.

Staff guidance: For expedited annexations, City staff, not the applicant, shall describe how the annexation proposal does or does not meet the applicable criteria of Subsections 3.09.045(d) and (e).

MILWAUKIE COMPREHENSIVE PLAN

Chapter 6: City Growth and Governmental Relationships; City Growth Element

Goal Statement: To identify the City's future planning and service area, establish the respective responsibilities for reviewing and coordinating land use regulations and actions within the area, and determine the most cost-effective means to provide the full range of urban services within the area.

Staff guidance: The City is required to notify and coordinate with other urban service providers. As a result, the applicant is required to submit a list of <u>current</u> franchise-based and district-based urban service providers and a list of <u>proposed</u> district-based urban service providers. These lists shall include each service provider's name and address.



NESE Sewer SDC & Sewer Reimbursement District Fee

Date: November 15, 2019

Subject properties: 5809 SE Hazel Place, Milwaukie, OR 97222

CLACKAMAS COUNTY WW Treatment: \$ 7,850.00

NESE Payment (REIMBURSEMENT FEE)*: \$ 7045.61

MILWAUKIE SEWER (reimbursement: \$ 441.00

MILWAUKIE SEWER (improvement): \$ 756.00

PORTLAND SEWER SDC**: \$ n/a

TOTAL PAYMENT: \$ 16,092.61

* Reimbursement Fee is valid until March 15, 2020. (increases to \$7,226.57)

If you have any questions about this payment, please contact Alex Roller in the Engineering department at 503-786-7695.

^{**} System Development Charge (SDC) is subject to change by JURISDICTION.

Department of Environmental Quality LAND USE COMPATIBILITY STATEMENT (LUCS)

WHAT IS A LUCS? The Land Use Compatibility Statement is the process used by the DEQ to determine whether DEQ permits and other approvals affecting land use are consistent with local government comprehensive plans.

WHY IS A LUCS REQUIRED? Oregon law requires state agency activities that impact land use be consistent with local comprehensive plans. DEQ Oregon Administrative Rules (OAR) Chapter 340, Division 18 identifies agency activities or programs that significantly affect land use and must have a process for determining local plan consistency.

WHEN IS A LUCS REQUIRED? A LUCS is required for nearly all DEQ permits and certain approvals of plans or related activities that affect land use. These permits and activities are listed on p. 2 of this form. A single LUCS can be used if more than one DEQ permit/approval is being applied for concurrently.

DEQ State of Oregon Department of Environmental

Quality

A permit modification requires a LUCS when any of the following applies:

- 1. Physical expansion on the property or proposed use of additional land;
- 2. A significant increase in discharges to water;
- 3. A relocation of an outfall outside of the source property; or
- Any physical change or change of operation of an air pollutant source that results in a net significant emission rate increase as defined in OAR 340-200-0020.

A permit renewal requires a LUCS if one has not previously been submitted, or if any of the above modification factors apply.

HOW TO COMPLETE A LUCS:

Step	Who Does It	What Happens
1	Applicant	Completes Section 1 of the LUCS and submits it to the appropriate city or county planning office.
2	City or County Planning Office	Completes Section 2 of the LUCS by determining if the activity or use meets all local planning requirements, and returns to the applicant the signed and dated LUCS form with findings of fact for any local reviews or necessary planning approvals.
3	Applicant	Includes the completed LUCS with <u>findings of fact</u> with the DEQ permit or approval submittal application to the DEQ.

WHERE TO GET HELP: For questions about the LUCS process, contact the DEQ staff responsible for processing the permit/approval. Headquarters and regional staff may be reached using DEQ's toll-free telephone number 1-800-452-4011. For general questions, please contact DEQ land use staff listed at: www.deq.state.or.us/pubs/permithandbook/lucs.htm.

CULTURAL RESOURCES PROTECTION LAWS: Applicants involved in ground-disturbing activities should be aware of federal and state cultural resources protection laws. <u>ORS 358.920</u> prohibits the excavation, injury, destruction, or alteration of an archeological site or object, or removal of archeological objects from public and private lands without an archeological permit issued by the State Historic Preservation Office. <u>16 USC 470, Section 106, National Historic Preservation Act of 1966</u> requires a federal agency, prior to any undertaking, to take into account the effect of the undertaking that is included on or eligible for inclusion in the <u>National Register</u>. For further information, contact the State Historic Preservation Office at 503-378-4168, extension 232.

A. Applicant Name:_	B. Project Name: Residential sewer connection
Contact Name:	Physical Address: 5809 SE Hazel Pl
Mailing Address: 5869 SE Haze Pl	City, State, Zip: My wanking GR 97220
City, State, Zip: Milwautie OR 97022	Tax Lot No.: 12 = 30 DA 04800
Telephone: 503-318-3705	Township: 12 E Range: 36 DA Section: 04806
Tax Account No.: 600 81002	Latitude:
	Longitude:
For latitude/longitude, use	the DEQ Location Finder at http://deg/2.deg.state.or.us/website/findle
C. Describe the type of business or facility and services or produc	
Single family residence	

SECTION 1 TO BE COMI	PLETED BY APPLICANT (Continued)
Applicant Name:	
Project Name:	
	W.16
). Check the type of DEQ permit(s) or approval(s) being ap	plied for at this time.
Air Notice of Construction Air Discharge Permit (excludes portable facility permits) Title V Air Permit Parking/Traffic Circulation Plan Air Indirect Source Permit Solid Waste Disposal Permit Solid Waste Treatment Permit Solid Waste Compost Registration or Permit Solid Waste Letter Authorization Permit Solid Waste Material Recovery Facility Permit	 □ Pollution Control Bond Request □ Hazardous Waste Treatment, Storage, or Disposal Permit □ Clean Water State Revolving Fund Loan Request ☑ Wastewater/Sewer Construction Plan/Specifications (includes review of plan changes that require use of new land) □ Water Quality NPDES Individual Permit □ Water Quality WPCF Individual Permit (for onsite construction-installation permits use DEQ's Onsite LUCS form) □ Water Quality NPDES Stormwater General Permit (1200-A, 1200-C, 1200-CA, 1200-COLS, and 1200-Z) □ Water Quality General Permit (all general permits, except 600,
Solid Waste Transfer Station Permit Solid Waste Tire Storage Permit	700-PM, 1700-A, and 1700-B when they are mobile.) Water Quality 401 Certification for federal permit
lease Note: A LUCS approval cannot be accepted by DEQ untocal decisions addressed under Item C below are required. Write	til all local requirements have been met. Written findings of fact for all tten findings for an activity or use addressed by the acknowledged y simply reference the specific plan policies, criteria, or standards that were ion is justified based on the plan policies, criteria, or standards.
. The facility proposal is located: inside city limits	inside UGB outside UGB
3. Name of the city or county that has land use jurisdiction (or land use):	(the legal entity responsible for land use decisions for the subject property
 Does the activity or use comply with all applicable local land YES, you must complete below or attach findings to supply the supplied to annex; Milwaukie computed in the property has applied to annex; Milwaukie computed in the property owner has applied to annex and requires on the decision: 	ds: an requires annexation prior to connection.
	ncompliance, and identify requirements the applicant must comply with
iv) Provide the reasons for the decision:	
Print Name: David Control	Title: Senior Planner Telephone No.: 503-786-7627 Date: 13/20
. If necessary, depending upon city/county agreement on juri	isdiction outside city limits but within UGB:
Planning Official Signature:	
Print Name: Telephone No.:	Date:

AFTER RECORDING RETURN TO: Planning Director City of Milwaukie 6101 SE Johnson Creek Blvd. Milwaukie, OR 97206 This Space For County Recording Use Only

FOR OF	FICE US	E ONLY
Annexation	File No	
Date Receiv	ed.	

CITY OF MILWAUKIE CONSENT TO ANNEXATION & AGREEMENT NOT TO CONTEST ANNEXATION

In consideration for the City of Milwaukie for the property described below:

All owners of the property listed below, and their successors and assigns, consent to annex the following described real property into the City of Milwaukie by preparing and signing all relevant annexation documents that the City of Milwaukie desires, including but not limited to a "Petition" for annexation and/or a "Covenant of Waiver of Rights and Remedies," so that the following described real property located in Clackamas County, Oregon, and within the Urban Growth Management Area of the City of Milwaukie, can be annexed into the City of Milwaukie.

All owners of the property listed below further agree that they, their successors and assigns, will not oppose, in any manner, requests or attempts to annex the following described real property into the City of Milwaukie:

PROPERTY DESCRIPTION

5869	SE	Haz	el f	Ρĺ		
iwantie			State: _	OR	Zip Code: _	97225
vnship <u>U</u> E	Range	30 DA	Section	04800 T	ax Lot(s)	2-229
	iwantie	wantie	iwantie	wantie State:		

Last Updated: May 2010

OFFICIAL STAMP

I/WE, THE UNDERSIGNED PROPERTY OWNER(S), AFFIRM BY MY/OUR SIGNATURE(S) THAT THE INFORMATION CONTAINED IN THIS DOCUMENT AND ASSOCIATED SUBMISSIONS IS TRUE AND CORRECT.

Property Owner		Date: /- 3-20
Property Owner		Date:
	Signature	
	Printed Name	
Property Owner		Date:
	Signature	
	Printed Name	
Property Owner	Simple	Date:
	Printed Name	
Property Owner		Date:
	Printed Name	
Property Owner		Date:
	Signature	Date:
	Printed Name	
Property Owner	Signatura	Date:
	Signature	
	Printed Name	
Property Owner		Date:
	Signature	
	Printed Name	

Last Updated: May 2010

Each property owner's signature must be	notarized. Submit additional sheets as necessary.
STATE OF OREGON)) ss.	
Personally appeared the above named	
and acknowledged the foregoing instrument to TH/RD day of S	to be their voluntary act and deed, before me this and deed, 2020.
OFFICIAL STAMP	Notary Public of Oregon
DANIEL RYAN HARRIS NOTARY PUBLIC - OREGON COMMISSION NO. 970085 MY COMMISSION EXPIRES JANUARY 29, 2022	My Commission Expires: Jan 29, 2022
STATE OF OREGON)) ss.	
	o be their voluntary act and deed, before me this
day or	
	Notary Public of Oregon
	My Commission Expires:
STATE OF OREGON)	
) ss.	
Personally appeared the above named	o be their voluntary act and deed, before me this
	, 20
	Notary Public of Oregon



My Commission Expires:



Transaction Receipt 601-20-000001-PLNG

IVR Number: 601050720155

Milwaukie Planning Department

6101 SE Johnson Creek Blvd Milwaukie, OR 97206 503-786-7630

Fax: 503-774-8236 planning@milwaukieoregon.gov

Receipt Number: 18182

Receipt Date: 1/3/20

www.milwaukieoregon.gov

Worksite address: 5809 SE Hazel PL, Milwaukie, OR

Parcel: 12E30DA04800

Fees Paid							
Transaction date	Units	Description	Account code	Fee amount	Paid amount		
1/3/20	150.00 Amount	Annexation Expedited	110-000-4480	\$150.00	\$150.00		
Payment Metho	d: Credit card	Payer: Craig Lehman		Payment Amount:	\$150.00		
i wyillolik itioulo	authorization:			Taymon Panounc	\$100.00		
		nt: 5809 SE Hazel Milwaukie OR 97222					

Cashier: Dan Harris

Receipt Total:

\$150.00

