

MILWAUKIE PLANNING
10501 SE Main St.
Milwaukie OR 97222
503.786.7630
planning@milwaukieoregon.gov

Expedited Annexation Application

File # A-2024-001

RESPONSIBLE PARTIES:

APPLICANT (owner or other eligible applicant): <u>TRAVIS RAMSON / CATHERINE R. RAMSON</u>	
Mailing address: <u>9304 SE 55th AVE</u>	Zip: <u>97222</u>
Phone(s): <u>(480) 277-1828 / (928) 230-8913</u>	Email: <u>CHATTYRAM@YAHOO.COM</u>
APPLICANT'S REPRESENTATIVE (if different than above):	
Mailing address:	Zip:
Phone(s):	Email:

SITE INFORMATION:

Address(es): <u>9304 SE 55th Ave</u>	Map & Tax Lot(s): <u>152E 30AC02200</u>
Existing County zoning: <u>R-7</u>	Proposed City zoning: <u>R-MD</u> Property size: <u>12,696 sq ft.</u>
Existing County land use designation: <u>Residential</u>	Proposed City land use designation: <u>Residential</u>

PROPOSAL (describe briefly):

LIST OF ALL CURRENT UTILITY PROVIDERS:

Check all that apply (do not list water or sewer service providers)

Cable, internet, and/or phone:	<input checked="" type="checkbox"/> Comcast	<input type="checkbox"/> CenturyLink
Energy:	<input checked="" type="checkbox"/> PGE	<input checked="" type="checkbox"/> NW Natural Gas
Garbage hauler:	<input type="checkbox"/> Waste Management	<input checked="" type="checkbox"/> Hoodview Disposal and Recycling
	<input type="checkbox"/> Wichita Sanitary	<input type="checkbox"/> Oak Grove Disposal <input type="checkbox"/> Clackamas Garbage
<input type="checkbox"/> 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.

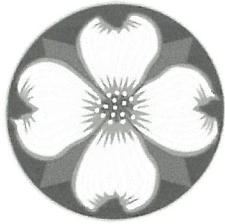
Submitted by:

Date:

CONTINUED ON REVERSE

THIS SECTION FOR OFFICE USE ONLY:

File #:	Fee: \$	Receipt #:	Recd. by:	Date stamp:
Associated application file #'s:				
Neighborhood District Association(s):				
Notes (include discount if any):				

**MILWAUKIE PLANNING**

10501 SE Main St.

Milwaukie OR 97222

503-786-7630

planning@milwaukieoregon.gov

Application for Land Use Action

Primary File #: _____

Review type*: ☐ I ☐ II ☐ III ☐ IV ☐ V**CHECK ALL APPLICATION TYPES THAT APPLY:**

- | | | |
|---|--|---|
| <input type="checkbox"/> Amendment to Maps and/or
<input type="checkbox"/> Comprehensive Plan Map Amendment
<input type="checkbox"/> Zoning Text Amendment
<input type="checkbox"/> Zoning Map Amendment
<input type="checkbox"/> Code Interpretation
<input type="checkbox"/> Community Service Use
<input type="checkbox"/> Conditional Use
<input type="checkbox"/> Development Review
<input type="checkbox"/> Director Determination
<input type="checkbox"/> Downtown Design Review
<input type="checkbox"/> Extension to Expiring Approval
<input type="checkbox"/> Historic Resource:
<input type="checkbox"/> Alteration
<input type="checkbox"/> Demolition
<input type="checkbox"/> Status Designation
<input type="checkbox"/> Status Deletion | <input type="checkbox"/> Land Division:
<input type="checkbox"/> Final Plat
<input type="checkbox"/> Lot Consolidation
<input type="checkbox"/> Partition
<input type="checkbox"/> Property Line Adjustment
<input type="checkbox"/> Replat
<input type="checkbox"/> Subdivision
<input type="checkbox"/> Mixed Use Overlay Review
<input type="checkbox"/> Modification to Existing Approval
<input type="checkbox"/> Natural Resource Review**
<input type="checkbox"/> Nonconforming Use Alteration
<input type="checkbox"/> Parking:
<input type="checkbox"/> Quantity Determination
<input type="checkbox"/> Quantity Modification
<input type="checkbox"/> Shared Parking
<input type="checkbox"/> Structured Parking | <input type="checkbox"/> Planned Development
<input type="checkbox"/> Residential Dwelling
<input type="checkbox"/> Manufactured Dwelling Park
<input type="checkbox"/> Manufactured Dwelling
<input type="checkbox"/> Temporary Dwelling Unit
<input type="checkbox"/> Transportation Facilities Review**
<input type="checkbox"/> Variance:
<input type="checkbox"/> Use Exception
<input type="checkbox"/> Variance
<input type="checkbox"/> Willamette Greenway Review
<input type="checkbox"/> Other: _____
Use separate application forms for:
Annexation and/or Boundary Change
• Compensation for Reduction in Property
• Value (Measure 37)
Daily Display Sign
• Appeal |
|---|--|---|

RESPONSIBLE PARTIES:**APPLICANT** (owner or other eligible applicant—see reverse): TRAVIS RAMSON / CATHERINE R. RAMSONMailing address: 9304 SE 55th AVE State/Zip: OR 97222Phone(s): (480) 277-1829 / (928) 230-8913 Email: CHATTYRAM@YAHOO.COM

Please note: The information submitted in this application may be subject to public records law.

APPLICANT'S REPRESENTATIVE (if different than above):

Mailing address: _____ State/Zip: _____

Phone(s): _____ Email: _____

SITE INFORMATION:Address: 9304 SE 55th AVE Map & Tax Lot(s): _____

Comprehensive Plan Designation: _____ Zoning: _____ Size of property: _____

PROPOSAL (describe briefly):

SIGNATURE: I attest that I am the property owner or I am eligible to initiate this application per Milwaukie Municipal Code Subsection 19.1001.6.A. If required, I have attached written authorization to submit this application. To the best of my knowledge, the information provided within this application package is complete and accurate.

Submitted by: _____

Date: _____

IMPORTANT INFORMATION ON REVERSE SIDE

WHO IS ELIGIBLE TO SUBMIT A LAND USE APPLICATION (excerpted from MMC Subsection 19.1001.6.A):

Type I, II, III, and IV applications may be initiated by the property owner or contract purchaser of the subject property, any person authorized in writing to represent the property owner or contract purchaser, and any agency that has statutory rights of eminent domain for projects they have the authority to construct.

Type V applications may be initiated by any individual.

PREAPPLICATION CONFERENCE:

A preapplication conference may be required or desirable prior to submitting this application. Please discuss with Planning staff.

DEPOSITS:

Deposits require completion of a Deposit Authorization Form, found at

www.milwaukieoregon.gov/building/deposit-authorization-form

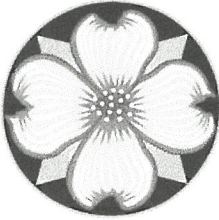
REVIEW TYPES:

This application will be processed per the assigned review type, as described in the following sections of the Milwaukie Municipal Code:

- Type I: Section 19.1004
- Type II: Section 19.1005
- Type III: Section 19.1006
- Type IV: Section 19.1007
- Type V: Section 19.1008

THIS SECTION FOR OFFICE USE ONLY:

FILE TYPE	FILE NUMBER	AMOUNT (after discount, if any)	PERCENT DISCOUNT	DISCOUNT TYPE	DATE STAMP
Primary file		\$			
Concurrent application files		\$			
		\$			
		\$			
		\$			
Deposit (NR/TFR only)				<input type="checkbox"/> Deposit Authorization Form received	
TOTAL AMOUNT RECEIVED: \$			RECEIPT #:		RCD BY:
Associated application file #s (appeals, modifications, previous approvals, etc.):					
Neighborhood District Association(s):					
Notes:					

**MILWAUKIE PLANNING DEPARTMENT**

6101 SE Johnson Creek Blvd
Milwaukie, OR 97206
503.786.7600
planning@milwaukieoregon.gov

Confidential Census Form

Date:	Street Address:	
Housing Type: (Use one form per housing unit)	<input checked="" type="checkbox"/> Single-Family Structure <input type="checkbox"/> Multi-Family Structure <input type="checkbox"/> Mobile Home <input type="checkbox"/> Group Housing <input type="checkbox"/> Other Housing	Occupancy: <input checked="" type="checkbox"/> Owner-Occupied <input type="checkbox"/> Renter-Occupied <input type="checkbox"/> Seasonal <input type="checkbox"/> Vacant
Number of Residents: 2		

If you indicated Group Housing or Other Housing above, please complete the appropriate table below.

Group Housing
Facility Type:
<input type="checkbox"/> Adult Correctional Facility
<input type="checkbox"/> Juvenile Facility e.g., group home, correctional or non-correctional
<input type="checkbox"/> College/University Student Housing Includes off-campus housing owned by a college/university
<input type="checkbox"/> Military Quarters
<input type="checkbox"/> Other Institutional Facility e.g., psychiatric hospitals, inpatient hospice facilities
<input type="checkbox"/> Nursing/Skilled-Nursing Facility e.g., assisted living and memory care
<input type="checkbox"/> Non-Institutional Facility e.g., emergency and transitional shelters, residential treatment centers for adults, religious group quarters
Facility Name:

Other Housing
Housing Unit Type:
<input type="checkbox"/> Camper/RV
<input type="checkbox"/> Car/Van
<input type="checkbox"/> Tent
<input type="checkbox"/> Motels/Hotels
<input type="checkbox"/> Houseboat
<input type="checkbox"/> Other Boat
<input type="checkbox"/> Other, please specify: _____

The information you share on this form is being collected for use by the Portland State University Population Research Center. For questions about the way these census data are used, please contact the Population Research Center at 503-725-3922.

**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")



MILWAUKIE PLANNING
10501 SE Main St.
Milwaukie OR 97222
503.786.7603
planning@milwaukieoregon.gov

Preapplication Conference Waiver

I/We, TRAVIS + CATHERINE R. RAYSON (print), as applicant(s)/property owner(s) of 9304 SE 55th AVE (address of property), request to waive the requirement for a preapplication conference for the submission of a **Type II / III / IV / V** (circle one) annexation land use application per MMC Subsection 19.1002.2 Applicability.

Please provide an explanation for the waiver request:

MMC Section 19.1002 Preapplication Conference is provided on the reverse

Signed: _____

Applicant/Property Owner

Approved: _____

Planning Director

CERTIFICATION OF LEGAL DESCRIPTION AND MAP

I hereby certify that the description of the territory included within the attached petition (located on Assessor's Map _____) has been checked by me. It is a true and exact description of the territory under consideration and corresponds to the attached map indicating the territory under consideration.

Name Andy Mehos
Title GIS Cartographer II
Department Assessment And Taxation
County of Clackamas
Date 4/4/24



**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 Andy Mehos
Title GIS Cartographer II
Department Assessment And Taxation
County of Clackamas
Date 4/4/24



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.



After recording return to:
Travis Ramson and Cathrine R.
Ramson
9304 SE 55th Avenue
Milwaukie, OR 97222

Until a change is requested all tax
statements shall be sent to the
following address:
Travis Ramson and Cathrine R.
Ramson
9304 SE 55th Avenue
Milwaukie, OR 97222

File No.: 7012-2983388 (MC)
Date: December 13, 2017

THIS SPACE RESERVED FOR RECORDER'S USE

Clackamas County Official Records
Sherry Hall, County Clerk

2018-003547

01/17/2018 01:56:01 PM

D-D Cnt=1 Stn=53 CINDY
\$10.00 \$16.00 \$10.00 \$22.00

\$58.00

STATUTORY WARRANTY DEED

Dawn & James Ventures LLC, Grantor, conveys and warrants to **Travis Ramson and Cathrine R. Ramson, husband and wife**, Grantee, the following described real property free of liens and encumbrances, except as specifically set forth herein:

LEGAL DESCRIPTION: Real property in the County of Clackamas, State of Oregon, described as follows:

THE SOUTH 65 FEET OF LOT 4, GIBSON'S SUBDIVISION OF THE TRACTS NUMBERED 10, 11, 12 AND 13, AND THE WEST 480 FEET OF TRACTS 1 AND 2 OF THE LOGUS TRACTS, IN THE COUNTY OF CLACKAMAS AND STATE OF OREGON.

Subject to:

1. Covenants, conditions, restrictions and/or easements, if any, affecting title, which may appear in the public record, including those shown on any recorded plat or survey.

The true consideration for this conveyance is **\$349,900.00**. (Here comply with requirements of ORS 93.030)



BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010. THIS INSTRUMENT DOES NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 OR 215.010, TO VERIFY THE APPROVED USES OF THE LOT OR PARCEL, TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES, AS DEFINED IN ORS 30.930, AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010.

Dated this 17 day of January, 2018.

Dawn & James Ventures LLC

By: _____

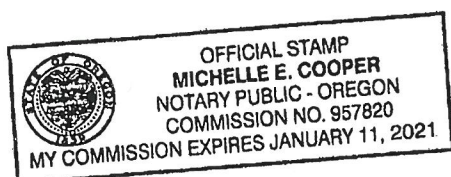
Name: James D. Plumlee
Title: Manager/Member

STATE OF Oregon)

County of Clackamas)

) ss.

This instrument was acknowledged before me on this 17 day of January, 2018
by James D. Plumlee as Manager/Member of Dawn & James Ventures LLC, on behalf of the LLC.



Michelle E. Cooper
Notary Public for Oregon
My commission expires: 1/11/21

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 Elections Analyst / Deputy Clerk
Department Clerk - Elections
County of Clackamas
Date 4-4-2024



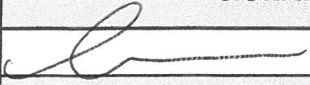
CERTIFIED COPY OF THE ORIGINAL
CATHERINE MCMULLEN, COUNTY CLERK

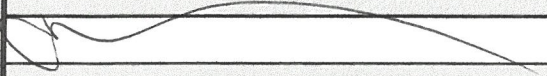
BY: Tiffany Clark

PETITION SIGNERS

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

*PO = Property Owner RV = Registered Voter OV = Owner and Registered Voter

SIGNATURE	PRINTED NAME	I AM A:*			DATE
		PO	RV	OV	
	TRAVIS RAMSON	X			4/4/24
PROPERTY ADDRESS	PROPERTY DESCRIPTION				VOTER PRECINCT #
	TOWNSHIP	RANGE	¼ SEC.	LOT #(S)	
9304 SE 55th AVE					420

SIGNATURE	PRINTED NAME	I AM A:*			DATE
		PO	RV	OV	
	Cathrine R Ramson	X			4/4/24
PROPERTY ADDRESS	PROPERTY DESCRIPTION				VOTER PRECINCT #
	TOWNSHIP	RANGE	¼ SEC.	LOT #(S)	
9304 SE 55th Ave					420

SIGNATURE	PRINTED NAME	I AM A:*			DATE
		PO	RV	OV	
PROPERTY ADDRESS	PROPERTY DESCRIPTION				VOTER PRECINCT #
	TOWNSHIP	RANGE	¼ SEC.	LOT #(S)	

SIGNATURE	PRINTED NAME	I AM A:*			DATE
		PO	RV	OV	
PROPERTY ADDRESS	PROPERTY DESCRIPTION				VOTER PRECINCT #
	TOWNSHIP	RANGE	¼ SEC.	LOT #(S)	

SIGNATURE	PRINTED NAME	I AM A:*			DATE
		PO	RV	OV	
PROPERTY ADDRESS	PROPERTY DESCRIPTION				VOTER PRECINCT #
	TOWNSHIP	RANGE	¼ SEC.	LOT #(S)	

SIGNATURE	PRINTED NAME	I AM A:*			DATE
		PO	RV	OV	
PROPERTY ADDRESS	PROPERTY DESCRIPTION				VOTER PRECINCT #
	TOWNSHIP	RANGE	¼ SEC.	LOT #(S)	

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.

	Name of Owner/Voter	Mailing Street Address	Property Address
		Mailing City/State/Zip	Property Description (township, range, ¼ section, and tax lot)
1	TRAVIS RAMSON	9304 SE 55th AVE	9
		MILWAUKIE OR, 97222	
2	Cathrine R Ramson	9304 SE 55th Ave	
		Milwaukie OR 97222	
3			
4			
5			
6			
7			
8			
9			
10			

	Name of Owner/Voter	Mailing Street Address	Property Address
		Mailing City/State/Zip	Property Description (township, range, ¼ section, and tax lot)
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			