



Umatilla County Public Health Environmental Health Division



Land Use Compatibility Statement

This form must be completed by the Umatilla County Planning Department to ensure the proposed activity is consistent with zoning and land use regulations. Please submit completed form to Umatilla County Environmental Health.

Section 1: To be completed by the applicant:

Applicant Name: _____ Telephone: _____
Mailing Address: _____ Email: _____
City: _____ State: _____ Zip Code: _____

Property Information:
Property Owner: _____ Physical Address: _____
Township: _____ Range: _____ Section: _____ Tax Lot No: _____ Account #: _____
Map: _____ Directions to property: _____

Describe the proposed use: _____

Section 2: To be completed by the Umatilla County Planning Official

Approval being requested (check all that apply): New construction Repair Alteration
 Replacement dwelling Bedroom addition Land use changes involving potential sewage flow increases
 Single Family Dwelling Accessory Structure Other _____

Property Zoning: _____ **Location is:** Inside UGB Outside UGB

Subject to: County Jurisdiction Shared City/County Jurisdiction City Jurisdiction
 Permit Not Required **PROPERTY IN FLOODPLAIN**
 Permit Required Zoning Permit Design Review Conditional Use Land Use Decision
 Permit(s) Issued: _____

Print Name: _____ Title: _____

Planning Official Signature: _____

Signature date: _____ Telephone: _____

THIS DOCUMENT IS VALID FOR ONE (1) YEAR FROM THE DATE SIGNED

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