



# PLANNING DIVISION

216 SE 4<sup>th</sup> ST, Pendleton, OR 97801, (541) 278-6252

Email: [planning@umatillacounty.gov](mailto:planning@umatillacounty.gov)

COMMUNITY &  
BUSINESS  
DEVELOPMENT

LAND USE  
PLANNING,  
ZONING AND  
PERMITTING

CODE  
ENFORCEMENT

SOLID WASTE  
COMMITTEE

SMOKE  
MANAGEMENT

GIS AND MAPPING

RURAL  
ADDRESSING

LIAISON,  
NATURAL  
RESOURCES &  
ENVIRONMENT

PUBLIC TRANSIT

## APPLICATION FOR PLANNING COMMISSION APPOINTMENT

The Umatilla County Planning Commission consists of nine members, each serving a four-year term, representing a balanced geographic distribution and variety of interests. Members are appointed by the County Board of Commissioners. The Planning Commission meets an average of once a month - the third Thursday of the month at 6:30 p.m.

The Planning Commission reviews conditional use permits, land use decisions, subdivisions, amendments to the Comprehensive Plan and Zoning Ordinances, and other similar applications and appeals. Members serve without pay.

*Briefly answer the following items.*

1. I would like to be considered for appointment to the Umatilla County Planning Commission for the following reasons:
  
  
  
  
  
  
  
  
  
  
2. I have the following skills, training and interests that would be beneficial when serving on the County Planning Commission:

3. I have served on the following advisory committees, civic organizations, and charitable groups:

4. In what specific land use planning issues are you interested? Why?

5. Additional Comments/Information:

*Contact Information* - Please provide the following details and submit this application to the Umatilla County Planning Division Manager by emailing [megan.davchavski@umatillacounty.gov](mailto:megan.davchavski@umatillacounty.gov). Thank you!

Name of Applicant \_\_\_\_\_  
Street Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Home/Cell Phone \_\_\_\_\_  
Email \_\_\_\_\_  
Occupation \_\_\_\_\_  
Business Name \_\_\_\_\_  
Business Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Business Phone \_\_\_\_\_

X

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
Date