

Please complete the following application checklist. Note that additional information may be required after further review in order to adequately address the applicable approval criteria. If you have any questions about completing this application, please contact Planning staff at the Permit and Information Center, phone (541) 682-5377, 99 West 10th Avenue, Eugene.

**Existing Street Name:**

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**Proposed Street Name:**

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**Describe the boundaries of name change (example: From 'x' intersection to 'x' intersection):**

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### **Neighborhood/Applicant Meeting Requirements**

Provide the following documentation that a neighborhood/applicant meeting was held per EC 9.7007 (see EC 9.7010):

- The list of persons to whom notice was mailed pursuant to EC 9.7007(5) and a signed statement that notice was posted and mailed to those on the list;
- A copy of the notice;
- A copy of the meeting notes and sign-in sheet described at EC 9.7007(9); and
- A copy of the site plan presented at the meeting.

### **Filing Fee**

- A filing fee must accompany all applications. The fee varies depending upon the type of application and is adjusted periodically by the City Manager. Check with Planning staff at the Permit and Information Center to determine the required fee or check the City website at [www.eugene-or.gov](http://www.eugene-or.gov)

### **Submittal Requirements:**

Provide 3 paper copies and one CD copy of all application materials (i.e. written statement, site plans, etc.) in pdf format at the time of initial submittal. Please note that it is the applicant's responsibility to make sure that the CD and paper copies are identical. Following completeness review, an updated CD and additional paper copies may be required. All site plans must be folded to a size equal or less than 11" x 17".

### **Written Statement**

- Submit a detailed written statement describing how this request is consistent with all applicable criteria beginning at Eugene Code Section 9.8485. *Please note: it is the applicant's responsibility to provide adequate information demonstrating how the project satisfies the applicable approval criteria. Failure to provide such information may result in a denial of your application.*

**Map Requirements**

- Show the entire area of the proposed street name change.
- Show the date, north arrow, and scale on the map.
- Provide a vicinity map on the map (vicinity map does not need to be drawn to scale).
- Show abutting right-of-ways, intersections, and adjacent parcels.
- Show street names for all adjacent streets (public and private).

**Supporting Analysis and Documents**

- Submit a list of all properties affected by the proposed street name change. Include addresses, Map and Tax Lot numbers, and business names when applicable.
- Submit a legal description of street included in this street name change application. This legal description must be typed on an 8." x 11" white sheet of paper (no letterhead) so that it is suitable for recording.

By signing, the undersigned certifies that he/she has read and understood the submittal requirements outlined, and that he/she understands that omission of any listed item may cause delay in processing the application. I (We), the undersigned, acknowledge that the information supplied in this application is complete and accurate to the best of my (our) knowledge.

**OWNER** (Also the Applicant?  Yes /  No):

Name (print): \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Signature: \_\_\_\_\_

**APPLICANT**  / **APPLICANT'S REPRESENTATIVE**  (Check one):

Name (print): \_\_\_\_\_

Company/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ E-mail (if applicable): \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Signature: \_\_\_\_\_

**APPLICANT'S REPRESENTATIVE**  / **DESIGNATED CONTACT PERSON**  (Check all that apply):

Name (print): \_\_\_\_\_

Company/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ E-mail (if applicable): \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Signature: \_\_\_\_\_