

**CITY OF MADRAS
COMMUNITY DEVELOPMENT DEPARTMENT**

**COMMERCIAL SITE PLAN
REVIEW APPLICATION**

To be accompanied by a Site Plan Map and Letter of Authorization, if applicable.

OFFICE USE ONLY	
FILE # <u>SP-10-4</u>	FEE \$ <u>24,737.00</u>
ZONING DISTRICT <u>OS/PE-MO</u>	
RECEIPT # _____	
DATE RECEIVED <u>9-27-10</u>	

The site plan review process is a method for assuring compliance with the policies of the City of Madras Comprehensive Plan and Land Development Ordinance, for ensuring wise utilization of land resources, and proper integration of land uses utilizing appropriate landscaping or screening measures. A commercial enterprise must also consider traffic circulation patterns, off-street parking, refuse containers, safe exits and entrances to the business, building height, dust control, future widening of major thoroughfares, and signs.

Please answer the questions as completely as possible.

Legal Description of the Subject Property:

ICD - #100 + 102
IDC # 200

Township 11 S Range 13 E Section 1 Tax Lot 102/200/100

Property street address 470 NE 'A' ST. MADRAS, OR. 97741

Value of Project \$18,618,000

I/WE, THE UNDERSIGNED APPLICANT(S) OR AUTHORIZED AGENT, AFFIRM BY MY/OUR SIGNATURE(S) THAT THE INFORMATION CONTAINED IN THE FOREGOING APPLICATION AND ASSOCIATED SUBMISSIONS IS TRUE AND CORRECT.

APPLICANT

Printed Name CHRIS GEORGE (HDR ARCHITECTURE)

Signature: [Signature] Date: _____

Address: 1001 SW 5TH AVE. STE. 1900 City/State/Zip: PORTLAND, OR. 97204

Phone: 503-333-7661 Fax: _____

PROPERTY OWNER (if different from Applicant):

Printed Name: MOUNTAIN VIEW HOSPITAL

Signature: _____ Date: _____

Address: 470 NE 'A' ST. City/State/Zip: MADRAS, OR. 97741

Phone: 541-460-4111 Fax: _____

1. Please describe your proposal with as much detail as possible:
ADDITION TO EXISTING HOSPITAL.

2. Are you planning on installing signs? NO If yes, a separate application is required.

3. What type of business, commodity, manufacturing or service are you proposing?
HOSPITAL.

Number of employee's: Current _____ Projected number of customers per day _____

Days of Operation 7 Hours of Operation 24

Number of shipments/deliveries per day _____ per week _____

By what method will these be arriving/sent? _____

4. Does this property have an existing business or businesses? YES.

If yes, please list the business names and their addresses, and note these businesses on your site plan map.

HOSPITAL, 470 NB 'A' ST. MADRAS, OR.

5. Is there a residence or residences on this property? NO.

If yes, list the number of residences and please show these structures on your site plan map. _____

Will the residential use of these structures continue? _____

If so, who will occupy these residences? _____

What is their relationship with the business? _____

6. Availability of services: City water YES City sewer YES.

7. If you are an existing business, where are materials or merchandise currently being stored?
MATERIAL MANAGEMENT DEPARTMENT.

8. Where do you propose to store materials or merchandise for sale or processing?
N.A.

9. What percentage of the property is currently landscaped? _____

10. How do you intend to irrigate the landscaping? PERMANENT IRRIGATION SYSTEM.

11. Please explain how you propose to provide for the drainage of this property, or explain why no additional drainage consideration is necessary. ON-SITE RETENTION PONDS.

12. Please provide the type of development and zoning on the adjacent properties.

North: R1 / R2 / MEDICAL OVERLAN
South: R1 / MEDICAL OVERLAN.
East: R1 / MEDICAL OVERLAN.
West: R1 / OS /

13. Will all parking for your business be provided on the property? Yes No

**If off-street parking is to be provided on another property,
please attach a copy of the parking easement or agreement from the property owner.**

PLEASE UNDERSTAND THAT THIS APPLICATION WILL NOT BE OFFICIALLY ACCEPTED UNTIL
DEPARTMENT STAFF HAS DETERMINED THAT THE APPLICATION IS COMPLETELY FILLED OUT AND
THE MAP REQUIREMENTS HAVE BEEN COMPLETED.

Return Application To:

City of Madras
Community Development Department
71 SE 'D' Street
Madras, Oregon 97741
Phone: 541-475-3388
Fax: 541-475-3959

MAP INSTRUCTIONS AND CHECKLIST

The following checklist identifies the specific information which should be included.

Note: additional information may be required depending on the actual project.

- Provide a Title Report verifying ownership.
- Provide a vicinity map "to scale" on 8 ½ x 11 or 8 ½ x 14 inch white paper.
- Township, Range, Section and Tax Lot number of the subject property (ies) shall be included.
- North arrow, date, and map scale in one inch intervals (1" = 20') shall be noted.
- Illustrate all existing buildings and their sizes.
- The site plan shall be drawn to scale and shall indicate the following:
 - a) Location, size, and height of all existing or proposed structures.
 - b) Location, size, and dimension of existing and proposed setbacks, and all spaces between buildings.
 - c) Adjoining street and right-of-ways.
 - d) Points of access and circulation patterns, loading and maneuvering spaces.
 - e) Off-street parking; showing location of parking areas, number of parking spaces including handicap parking, and type of surface.
 - f) Sidewalks, patios, courtyards, and decks.
 - g) Storm drainage system, including but not limited to, draining and grading plan, existing topography, and elevations.
 - h) Fences, screens, and retaining walls, including heights and materials.
 - i) Existing utilities (i.e. electric, gas, power lines).
 - j) Exterior lighting (show location and general nature).
 - k) Sanitary sewer system or location of septic tank and drainfield (if still using and not connected to city sewer), and the distance the lot is from the nearest sewer connection.
 - l) Water supply (showing size of main, water flow and size of water line).
 - m) Location of existing and, if any, proposed fire hydrants with size and flow data.
 - n) Identify any existing or proposed easements.
 - o) Proposed public improvements.
 - p) Sign (if existing, location and size). Any new or sign alteration will require a sign application to be submitted to the Community Development Department for approval.
 - q) Give intended type of occupancy for the structure (i.e. assembly, educational, manufacturing, processing, storage and type of contents).
 - r) List all existing or proposed conditions that could be hazardous to life and property from fire or explosion (i.e. storage of: liquefied petroleum gas, flammable or combustible liquids, explosives and blasting agents).
- Provide Building Elevations; five full sized copies of each and one reduced (8.5x11 or 11x17) copy of each.
- Provide a Landscaping Irrigation Plan where a minimum of fifteen percent (15%) of the total lot area shall be landscaped and of the 15:
 - a) At least seven percent (7%) of the parking lot area shall be landscaped. Trees shall be planted at a ratio of one tree per ten (10) parking spaces to achieve a canopy effect over fifty percent (50%) of the lot area.
 - b) Landscape buffers are required between parking areas and streets and shall have a minimum width of three (3') feet.
 - c) Landscape buffers between parking abutting a property line shall have a minimum width of three (3') feet.
 - d) Front or exterior yard landscaping may not be submitted for the interior landscaping required for interior parking stalls.
 - e) There shall be a minimum distance of five feet (5') between parking areas and adjacent residential lots.
 - f) Landscape buffers shall consist of evergreens, ground cover and shrubs mixed with a variety of flowering and deciduous plant species of trees and shrubs.
 - g) Landscaping in a parking or loading area shall have a width of not less than five feet (5'). Landscaping in a parking lot or loading area shall be located in defined landscaped areas which are uniformly distributed throughout the parking or loading area.
 - h) Landscaping shall be continuously maintained and replaced as necessary.
- Provide three copies of the floor plan for each building, plus one reduced (8.5 x 11 or 11x17). Include the class of construction.