

**(11) CITY/COUNTY PLANNING DEPARTMENT LAND USE AFFIDAVIT  
(TO BE COMPLETED BY LOCAL PLANNING OFFICIAL)**

I have reviewed the project described in this application and have determined that:

- This project is not regulated by the comprehensive plan and land use regulations
- This project is consistent with the comprehensive plan and land use regulations
- This project is consistent with the comprehensive plan and land use regulations with the following:
  - Conditional Use Approval
  - Development Permit
  - Other Permit (explain in comment section below)
- This project is not currently consistent with the comprehensive plan and land use regulations. To be consistent requires:
  - Plan Amendment
  - Zone Change
  - Other Approval or Review (explain in comment section below)

An application or variance request has  has not  been filed for the approvals required above.

Local planning official name (print)	Title	City / County
Signature		Date
Comments:		

**(12) COASTAL ZONE CERTIFICATION**

If the proposed activity described in your permit application is within the [Oregon Coastal Zone](#), the following certification is required before your application can be processed. The signed statement will be forwarded to the Oregon Department of Land Conservation and Development (DLCD) for its concurrence or objection. For additional information on the Oregon Coastal Zone Management Program and consistency reviews of federally permitted projects, contact DLCD at 635 Capitol Street NE, Suite 150, Salem, Oregon 97301 or call 503-373-0050 or click [here](#).

**CERTIFICATION STATEMENT**

I certify that, to the best of my knowledge and belief, the proposed activity described in this application complies with the approved Oregon Coastal Zone Management Program and will be completed in a manner consistent with the program.

Print /Type Applicant Name Not Applicable	Title
Applicant Signature	Date