

# MEASURE 37 CLAIM FORM

-- This is not a land use application --

*Office Use Only*  
File No. \_\_\_\_\_

**Processing Fee:** Actual Cost.  
\$600 deposit required; if cost exceeds deposit, additional will be billed to claimant

**Claimant(s)** (must be present owner of the property or any interest therein)

Name: \_\_\_\_\_ Bus. Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

\_\_\_\_\_

Name: \_\_\_\_\_ Bus. Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

\_\_\_\_\_

Name: \_\_\_\_\_ Bus. Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

\_\_\_\_\_

Agent or other individuals to be notified of the public hearing:

<u>Name</u>	<u>Address</u>	<u>Phone No.</u>
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\_\_\_\_\_

\_\_\_\_\_

**Property Location**

(List all properties to which this claim applies)

Assessor's Map & Tax Lot Number(s):

Township	Range	Section	Tax Lot(s)	Date Acquired

**or** Site Address(es): \_\_\_\_\_

**or** Subdivision Name: \_\_\_\_\_ Lot Number(s): \_\_\_\_\_

**Claim Information** (Please use additional paper if necessary to fully address all questions)

Date the property was acquired by the Claimant (if not entered above): \_\_\_\_\_

Date a family member of the Claimant acquired the property (if applicable): \_\_\_\_\_

Claimant is seeking:  compensation; or  waiver or modification of the regulation.

Land use regulation alleged to restrict the use of this property (cite Benton County Code section or other specific regulation, and describe):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Date this regulation was enacted:

\_\_\_\_\_

Describe how this restriction reduces the value of the property: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Amount claimed as compensation under Measure 37 (must be filled in even if claimant prefers the regulation be waived or modified): \_\_\_\_\_

Describe the extent to which the regulation would need to be waived, suspended, or modified to avoid the need for compensation (i.e., what do you want to be able to do with the property?). Please also attach a plot plan or other information that conveys the desired use: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Has Benton County formally denied the use you specified above? \_\_\_\_\_ YES \_\_\_\_\_ NO

Please explain the circumstances (describe land use permits sought and outcome of applications):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**List Prior Claims Filed with Benton County or the State of Oregon**

Date Claim Filed	Regulation Claim Filed Against	Outcome of Claim



**Attachment Checklist**

**The following items must be submitted with this claim form:**

- Proof of ownership interest, such as a copy of the deed of ownership, land sale contract or lease agreement. If the person signing this claim form is doing so in a representative capacity (as the officer of a corporation or the trustee of a trust, for example), documentation of that person’s representative capacity shall also be submitted.
- Title report, issued no more than 30 days prior to the submission of the claim, that reflects the claimant’s ownership interest in the property, along with any other person’s ownership interest.

One of the following:

- If the claimant is seeking compensation: A written appraisal prepared by a professional appraiser licensed and registered in the state of Oregon. The appraisal must explain why the land use regulation(s) has the effect of reducing the value of the property on which the restriction is imposed.
- or,
- If the claimant is seeking modification or waiver of a land use regulation: At least one market study analysis done no more than 30 days prior to the date the claim is filed. The analysis shall be completed by a licensed real estate broker or agent whose primary place of business is in Benton County.

**Owner Signature(s)**

**Each Owner Must Read and Initial these Statements, and Sign Below:**

- \_\_\_\_\_ I understand Benton County will notify nearby property owners of my claim and that the Board of Commissioners may conduct a public hearing prior to making any determination regarding compensation or waiver of land use regulations.
- \_\_\_\_\_ I understand that a decision by Benton County to waive its local land development regulations does not relieve me/us of the responsibility of seeking a waiver from the State of Oregon if the local regulations waived by the County are also contained in State law or administrative rules.
- \_\_\_\_\_ I understand that once this claim, including all required information, is submitted, the Board of County Commissioners will have 180 days to render a final determination.
- \_\_\_\_\_ I understand that the County’s determination relative to this claim is not a land use decision, and is not subject to the procedures and appeals of a land use decision.
- \_\_\_\_\_ I understand that the \$600 deposit toward the claim processing fee is due at the time of submitting a claim. Benton County will calculate the actual cost of evaluating the claim and conducting the public hearing. Expenses may include but are not necessarily limited to staff time (billed at a rate of \$40 per hour), mailing costs, independent third-party appraisal fees, and administrative costs. If the actual cost exceeds \$600, I agree to pay the additional amount within 30 days of receiving an invoice from Benton County, and understand that my/our failure to do so could result in a lien being placed on the subject property.
- \_\_\_\_\_ I understand that this claim may result in altered property tax liability, including potential required payment of back-taxes.

I hereby certify that I am a legal owner, as that term is defined in Ballot Measure 37, of the above noted property; and that the information contained herein is accurate to the best of my knowledge.

Owner Signature	Date	Owner Signature	Date
Owner Signature	Date	Owner Signature	Date

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*For Office Use Only*

Date Received: \_\_\_\_\_ Receipt Number: \_\_\_\_\_ By: \_\_\_\_\_

Planner Assigned: \_\_\_\_\_ 180<sup>th</sup> Day: \_\_\_\_\_

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