



Agricultural or Forestry Building Exemption Certification
Equine Facility Exemption Certification
 Marion County Public Works – Building Inspection Division
 5155 Silverton Rd. NE, Salem Oregon 97305
 Phone: (503) 588-5147 Fax: (503) 588-7948 Email: building@co.marion.or.us

Owner/applicant name: _____ Phone: _____ Fax: _____
 Mailing address: _____ City/State: _____ Zip: _____
 Job site address: _____ City: _____ Zip: _____
 Directions to the site: _____

Proposed Building Information

1. Site plan is attached (required): Yes No
2. Type of Exemption: Agricultural Building Forestry Building Equine Facility (provide information below):
 - Total number of stalls or equivalent number of horses: _____
 - Total number of stalls or equivalent number of horses limited to personal use only: _____
 - Total number of stalls or equivalent number of horses anticipated to be used for commercial or trade purposes inc. boarding, training, rental, haul-in, clinics, shows, etc. (consider future plans): _____
3. Is the use of the structure or the items within it used for any business or commercial activities? Yes No
 If yes, please explain: _____

4. Describe use of the building and items contained within: _____

5. Is the property in farm or forest deferral? Yes No
6. Is the proposed structure located within a floodplain? Yes No
7. Will the proposed structure have any of the following systems? (If yes, separate permits are required for each system):

Plumbing	<input type="checkbox"/> Yes <input type="checkbox"/> No	If plumbing will be installed, what type of fixture(s)?
Electrical	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Septic	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Heating/Cooling/Ventilation/Mechanical	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

8. Will this structure be used by the public at any time? Yes No
9. What is the proposed maximum number of people (including employees, owners, etc.) that will be present in the building at any one time? _____
10. Where will restroom facilities be provided? _____

11. Is the proposed structure a manufactured home? Yes No

12. Building Data: Length: _____ Width: _____ Area: _____ Height: _____

13. Parcel Information: Parcel Size: _____ Parcel No.: _____ Zone: _____



INSTRUCTIONS FOR PREPARATION OF A SITE PLAN

Site plan must be **current**, drawn to scale, and **show all property lines**.

If unable to draw to scale, property lines must still be shown noting actual dimensions or total acreage.

Failure to include all of the items listed below may delay the review necessary to obtain a permit

ITEMS THAT MUST BE SHOWN ON YOUR SITE PLAN:

- 1. **NORTH ARROW.**
- 2. **SCALE OF DRAWING**, the site plan must be drawn to scale, indicate scale used.
- 3. **STREET NAME** accessing the parcel.
- 4. **ALL PROPERTY LINES AND DIMENSIONS** – existing and proposed.
- 5. **DRIVEWAYS, ROADS, INTERNAL ROADS, PARKING AND CIRCULATION AREAS** – existing and proposed and label as “Paved” or “Gravel.” Show driveway to public right-of-way.
- 6. **EXISTING AND PROPOSED STRUCTURES** - label as “Proposed” and “Existing”. Include dimensions and distance to all property lines and other structures.
- 7. **UTILITY LINES AND EASEMENTS.**
- 8. **GEOGRAPHIC FEATURES** – ground slope and direction of slope, escarpments, streams, ponds, or other drainage ways.
- 9. **WELLS** – existing and proposed on this parcel and adjacent parcels within 100 feet.
- 10. **FENCES, RETAINING WALLS** – location of existing and/or proposed.
- 11. **PARTITIONING** (if applicable) – proposed new property line shown by dashed lines, with parcels labeled as “Parcel 1”, “Parcel 2”, etc.
- 12. **SEPTIC SYSTEM and REPLACEMENT AREA** – existing and proposed. Show existing septic tank, drain field lines and distance from structure(s).
- 13. **STORM WATER SYSTEMS OR DETENTION BASINS** – show existing and proposed.
- 14. **CUTS/FILLS** – show existing and proposed.
- 15. **ELEVATIONS** – at lot corners or construction area and at corners of building site.
- 16. **FLOODPLAIN** – if applicable, show the boundary of the 100 year floodplain.

If sanitary sewer service is not available, a septic system must be installed. Include the following additional items on the site plan:

- 17. **TEST HOLES** – show distances between holes and property lines. One test hole should be located in the center of the initial system installation site, the other in the center of the replacement area. Accuracy of location is very important.
- 18. **PROPOSED SEPTIC SYSTEM AND REPLACEMENT SYSTEM** – show septic tank and distance from structure; show disposal trenches and length, width, and distance between trenches

Commercial development must also include the following:

- 19. FIRE DEPARTMENT ACCESS
- 20. FIRE HYDRANTS –locations
- 21. HANDICAP ACCESS
- 22. LANDSCAPING – existing and proposed landscaping areas.
- 23. PARKING – lot configuration, number of parking spaces, and off-street loading area.

Additional information, such as patio slabs, walkways, roof overhangs, etc., may be required for the issuance of your permit.

YOU MAY USE THE REVERSE SIDE OF THIS FORM TO DRAW YOUR SITE PLAN

Property Owner (s) Name: _____ Phone: _____

Site Address: _____ City: _____ Zip: _____

Subdivision: _____ Lot: _____ Block: _____

Manufactured Home Park: _____ Space: _____

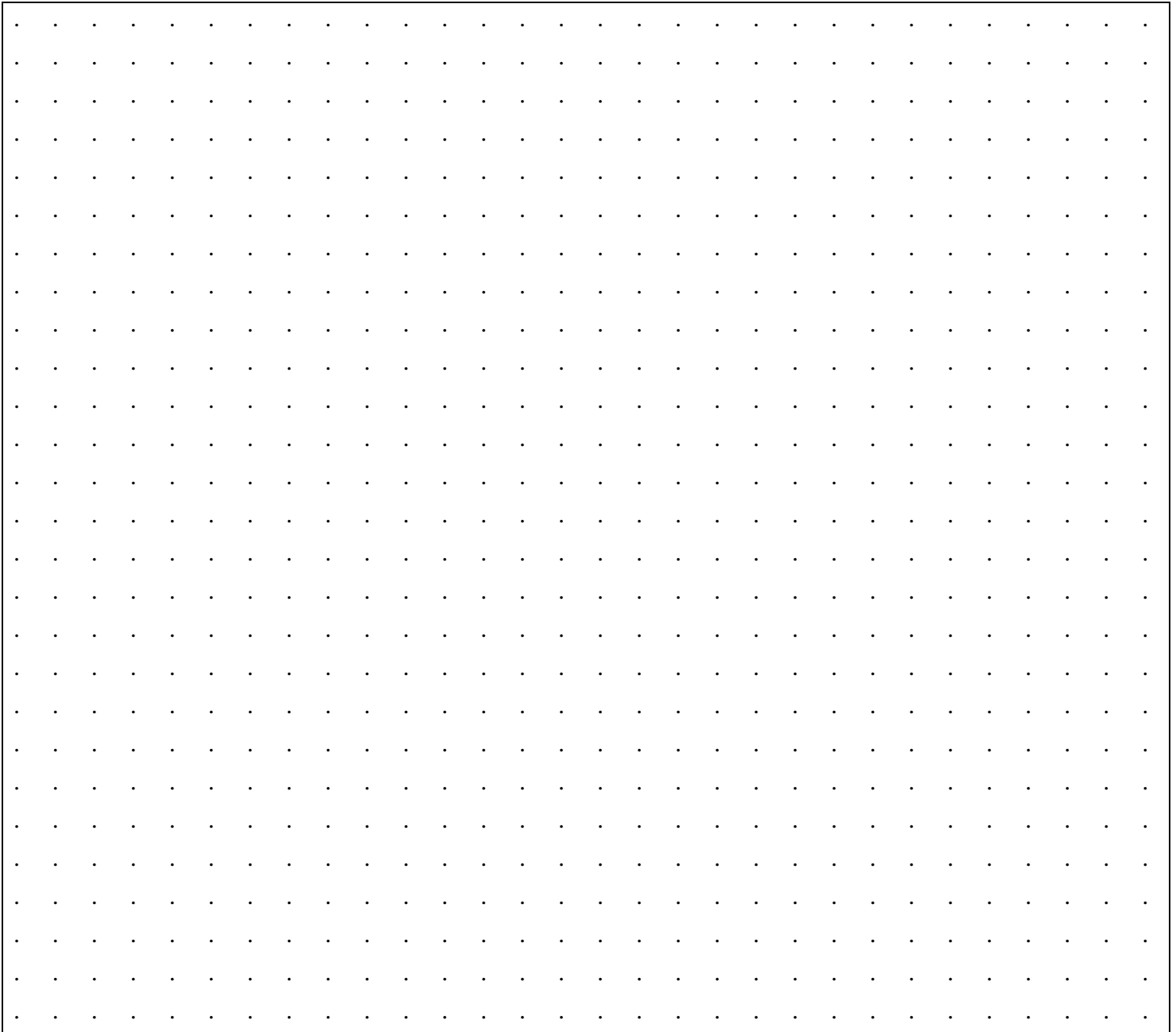
Assessor Map # (T-R-Sec-TL(s)): _____ Total # Acres _____

Zoning Designation: _____ Planning Map _____

Permit Specialist Review: _____ Date: _____

SITE PLAN MUST SHOW ALL PROPERTY LINES AND DIMENSIONS

Drawn to Scale: 1 square = _____ Feet Not Drawn to Scale: Total Acres _____



I certify that the above information is accurate to the best of my knowledge. I AM THE [] Owner [] Authorized Agent

Name (please print): _____ My telephone number is: _____

Applicant Signature: _____ Date: _____

Applicant's Mailing Address: _____ City: _____ Zip: _____

FOR OFFICE USE ONLY

PLANNING: _____ Date: _____

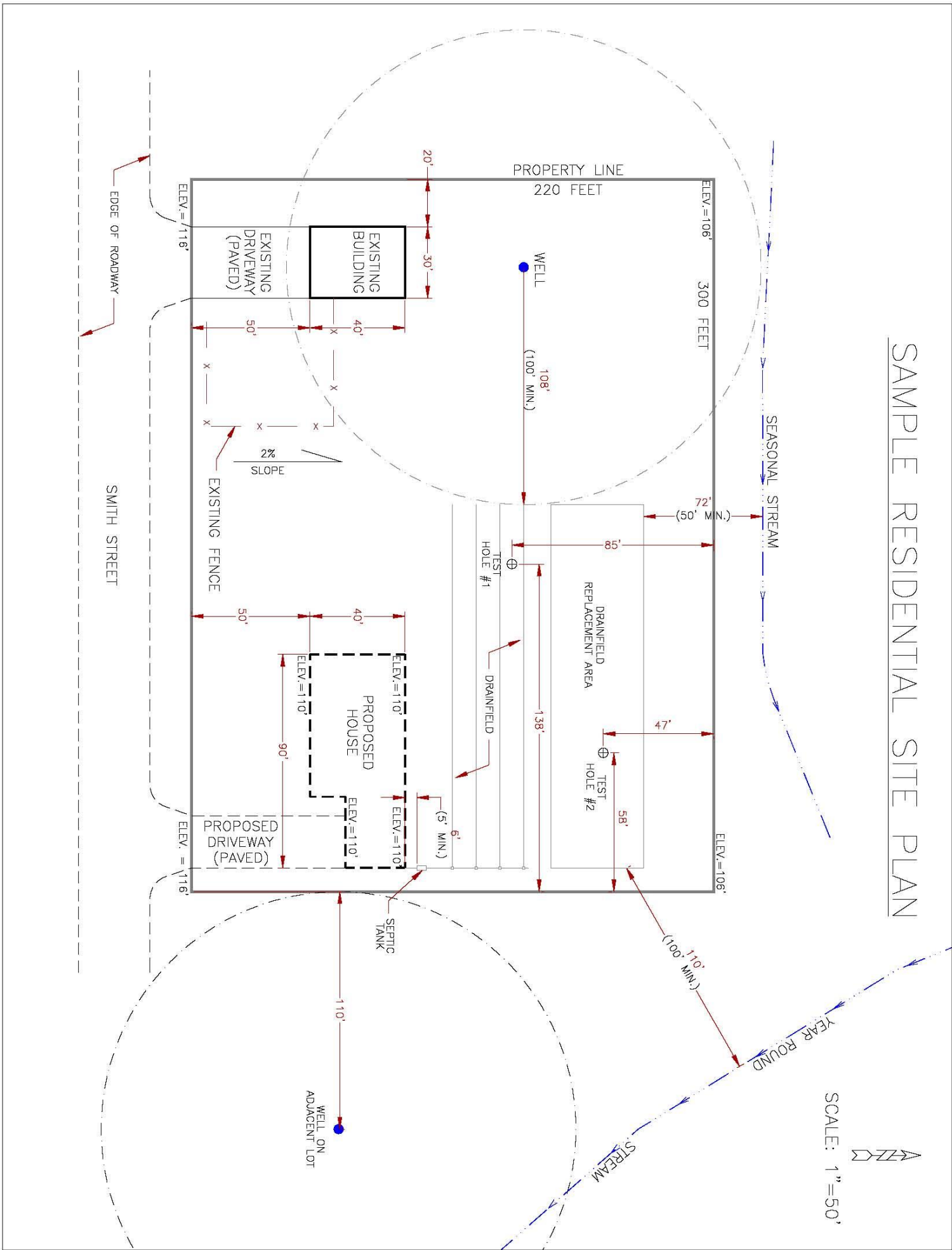
PUBLIC WORKS: _____

BUILDING INSPECTION (Acceptable for Planning requirements only) _____ Date: _____

SAMPLE RESIDENTIAL SITE PLAN



SCALE: 1"=50'





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SEPTIC SYSTEM CERTIFICATION for RECORD REVIEW

PROPERTY OWNER: _____

SITE ADDRESS: _____

DATE: _____

FILE NUMBER: _____

I certify that I have personally investigated the existing septic system on the above property and have identified the exact location of all parts of the septic system, including the septic tank, distribution box or drop boxes, drainfield lines and future septic system replacement area. The attached site plan is an accurate representation of the location of the septic system and proposed structure(s) on the property, and the proposed development meets all minimum setback requirements from the existing septic system, and the future septic system replacement area. In addition if there isn't a septic system serving the property, this document is to certify that a full investigation has been made to determine that the parcel is not being served by a septic system.

I further certify that I have, to the best of my abilities, thoroughly inspected the septic system and found no evidence of any failure. The system appears to be functioning in a satisfactory manner at this time.

SIGNATURE: _____
(Property Owner or the Owner's Authorized Agent)

Name (please print): _____

Company Name: _____

Mailing Address: _____

Phone Number: _____