



**Marion County**  
OREGON

# CONDITIONAL USE APPLICATION

**RECEIVED**

MAR 31 2025

**Marion County  
Planning**

**Do not double-side or spiral bind any documents being submitted**

**Fee: Please check the appropriate box:**

- |  |  |
|--|--|
| <input type="checkbox"/> Conditional Use - \$1450                            | <input type="checkbox"/> Amend Conditions/Permit - \$600                   |
| <input type="checkbox"/> Conditional Use Hardship - \$450                    | <input type="checkbox"/> Aggregate Site (non Goal 5) - \$3000+\$80/acre    |
| <input type="checkbox"/> Conditional Use Hardship Change of Occupant - \$120 | <input type="checkbox"/> Agri-Tourism Single Event - \$375                 |
| <input type="checkbox"/> Non-Farm Dwelling \$1930                            | <input type="checkbox"/> Agri-Tourism Max 6 Events - \$640                 |
| <input type="checkbox"/> UT Zone Replacement Dwelling - \$450                | <input type="checkbox"/> Agri-Tourism Max. 18 Events/Longer Duration-\$640 |
| <input checked="" type="checkbox"/> Conditional Use Home Occupation - \$770  |  |

PROPERTY OWNER(S): <b>Brett Allen Fobert</b>	ADDRESS, CITY, STATE, AND ZIP: <b>17644 Painter Loop Rd NE Hubbard, OR 97032</b>
PROPERTY OWNER(S) (if more than one):	ADDRESS, CITY, STATE, AND ZIP
APPLICANT REPRESENTATIVE:	ADDRESS, CITY, STATE, ZIP
DAYTIME PHONE (if staff has questions about this application): <b>503-989-7285</b>	E-MAIL (if any): <b>brettfobert@yahoo.com</b>
ADDRESS OF SUBJECT PROPERTY: <b>17644 Painter Loop Rd NE Hubbard, OR 97032</b>	SIZE OF SUBJECT PROPERTY: <b>20+</b>
THE PROPERTY OWNERS OF THE SUBJECT PROPERTY REQUEST TO (summarize here; explain in detail on the "Applicant's Statement"): <b>Parking trucks that are insured/ registered on our personal residence area. Applying for Home Occupation.</b>	

FOR OFFICE USE ONLY:		
Township <b>T4S</b>	Range <b>R3W</b>	Section <b>34</b>
Tax lot number(s) <b>800</b>	Application elements submitted:	
Zone: <b>EFU</b>	<input checked="" type="checkbox"/> Title transfer instrument	
Zone map number: <b>5</b>	<input checked="" type="checkbox"/> Site plan	
<input checked="" type="checkbox"/> TPA/header	<input checked="" type="checkbox"/> Applicant statement	
Case Number: <b>CU25-014</b>	<input checked="" type="checkbox"/> Filing Fee	
<input type="checkbox"/> Urban <input checked="" type="checkbox"/> Rural	<input type="checkbox"/> GeoHazard Peer Review (if applicable) <b>NA</b>	
Signs given:	<input type="checkbox"/> Physician's Certificate (if applicable) <b>NA</b>	
Date determined complete:	<input checked="" type="checkbox"/> Home Occupation Supplemental (if applicable)	
	<input type="checkbox"/> Agri-Tourism Supplemental (if applicable)	
	Application accepted by: <b>SS</b>	
	Date:	

**IF THIS IS FOR A CONDITIONAL USE HARDSHIP:**

WILL THE TEMPORARY DWELLING BE ( ) MANUFACTURED HOME OR ( ) RV? Check one.

IF USING AN RV, DO YOU INTEND TO:

( ) CONNECT TO THE EXISTING SEPTIC SYSTEM OR ( ) USE THE RV HOLDING TANK? Check one.

NAME OF PERSON(S) WITH MEDICAL HARDSHIP:

HE/SHE/THEY WILL RESIDE IN: ( ) PRIMARY DWELLING OR ( ) TEMPORARY DWELLING

NAME OF CAREGIVER:

HE/SHE WILL RESIDE IN: ( ) PRIMARY DWELLING OR ( ) TEMPORARY DWELLING

RELATIONSHIP OF CAREGIVER TO PERSON(S) WITH MEDICAL HARDSHIP:

WHAT TYPE OF ASSISTANCE WILL CAREGIVER PROVIDE:

\_\_\_\_\_  
\_\_\_\_\_

IF THERE ARE OTHER ADULTS THAT RESIDE OR WILL RESIDE IN THE DWELLING WITH THE PERSON(S) NEEDING CARE, PLEASE EXPLAIN WHY HE/SHE CANNOT BE THE CAREGIVER:

\_\_\_\_\_  
\_\_\_\_\_

**THE APPLICANT(S) SHALL CERTIFY THAT:**

- A. If the application is granted the applicant(s) will exercise the rights granted in accordance with the terms and subject to all the conditions and limitations of the approval.
- B. I/We hereby declare under penalties of false swearing (ORS 162.075 and 162.085) that all the above information and statements and the statements in the plot plan, attachments and exhibits transmitted herewith are true; and the applicants so acknowledge that any permit issued on the basis of this application may be revoked if it is found that any such statements are false.
- C. I/We hereby grant permission for and consent to Marion County, its officers, agents, and employees coming upon the above-described property to gather information and inspect the property whenever it is reasonably necessary for the purpose of processing this application.
- D. The applicants have read the entire contents of the application, including the policies and criteria, and understand the requirements for approving or denying the application.

**PRINTED NAME AND SIGNATURE** of each owner of the subject property.

Brett Fobert Brett Fobert

Print Name

Signature

Print Name

Signature

Print Name

Signature

Print Name

Signature

**DATED** this 31 day of April, 2025

We have a farm in Hubbard. I have 20+ acres just outside of Hubbard OR. The property is a farm and my personal residence. The 2.3 acres at the south end of our property is my personal residence. The Tow Business and trucks in question are only parked at my residence. We do not store cars/ farm equipment/ materials. We do not bring cars/ farm equipment/ materials back. We only have 4 Vehicles in the B & T Business Name and they are parked at my personal Residence. Everything at the farm shop is farm use. We have multiple fields across the valley and it only makes sense that the farm building would be near my home base. We are aware to have them parked on the property that they have to have active insurance, running/ operational and active registration. They are owned and operated by me personally and my son. Nothing at the farm shop is B & T Towing related. We do keep it separate. That has always been the deal. That's why the tow trucks are all parked at the personal residences as seen in the photos you took. No signage. No Customers. We do not perform any towing business on property. The 4-5 Trucks we do have are just parked here. They are all insured/ licensed/ running/ operational to be parked on personal residence.

17.136.060 Conditional use review criteria. Revised 8/24

The uses identified in MCC 17.136.050 shall satisfy criteria in the applicable subsections below:

**I own the property. No Rent or Lease.**

A. The following criteria apply to all conditional uses in the EFU zone:

1. The use will not force a significant change in, or significantly increase the cost of, accepted farm or forest practices on surrounding lands devoted to farm or forest use. Land devoted to farm or forest use does not include farm or forest use on lots or parcels upon which a non-farm or non-forest dwelling has been approved and established, in exception areas approved under ORS 197.732, or in an acknowledged urban growth boundary.

**No Change or affect on surrounding areas. Solely for parking trucks. No Business on Site.**

2. Adequate fire protection and other rural services are, or will be, available when the use is established.

**No Fire Services needed.**

3. The use will not have a significant adverse impact on watersheds, groundwater, fish and wildlife habitat, soil and slope stability, air and water quality.

**All trucks are inspected and meet all state and federal standards. No effect on items listed above.**

4. Any noise associated with the use will not have a significant adverse impact on nearby land uses.

**All vehicles follow state standards and are not louder than any farm truck/ tractor on property.**

5. The use will not have a significant adverse impact on potential water impoundments identified in the Comprehensive Plan, and not create significant conflicts with operations included in the Comprehensive Plan inventory of significant mineral and aggregate sites.

**It does not.**

**C. Home Occupations.**

1. Notwithstanding MCC 17.110.270 and 17.120.075, home occupations, including the parking of vehicles in conjunction with the home occupation and bed and breakfast inns, are subject to the following criteria:

a. A home occupation or bed and breakfast inn shall be operated by a resident of the dwelling on the property on which the business is located. Including residents, no more than five full-time or part-time persons shall work in the home occupation ("person" includes volunteer, nonresident employee, partner or any other person).

**Agree. I am Owner.**

b. It shall be operated substantially in:

i. The dwelling; or

ii. Other buildings normally associated with uses permitted in the zone in which the property is located.

**We are just parking trucks. No building use.**

c. It shall not unreasonably interfere with other uses permitted in the zone in which the property is located.

**Does Not Affect.**

d. A home occupation shall not be authorized in structures accessory to resource use on high-value farmland.

**Does not use High Value Farmland.**

e. A sign shall meet the standards in Chapter 17.191 MCC.

**NO Sign needed**

f. The property, dwelling or other buildings shall not be used for assembly or dispatch of employees to other locations.

**This is done by Owner or Call center in other states.**

g. Retail and wholesale sales that do not involve customers coming to the property, such as internet, telephone or mail order off-site sales, and incidental sales related to the home occupation services being provided are allowed. No other sales are permitted as, or in conjunction with, a home occupation.

**Does Not Apply.**

A conditional home occupation shall meet the following use and development standards:

A. The home occupation shall be carried on by the resident or residents of a dwelling on the subject property as a secondary use and may employ no more than two persons ("person" includes volunteer, nonresident employee, partner or any other person).

**Family Owned and operated.**

B. The home occupation shall be continuously conducted in such a manner as not to create any public or private nuisance, including, but not limited to, offensive noise, odors, vibration, fumes, smoke, fire hazard, or electronic, electrical, or electromagnetic interference. In a residential zone noise associated with the home occupation shall not violate Department of Environmental Quality standards or Chapter 8.45 MCC, Noise.

**We Agree.**

C. The conditional home occupation shall not significantly interfere with other uses permitted in the zone in which the property is located.

**It does not interfere.**

D. A sign shall meet the standards in Chapter 17.191 MCC.

**NO Sign Needed.**

E. The home occupation shall be conducted entirely within the dwelling or accessory building.

**YES.**

F. The total floor area of buildings on the subject property devoted to a home occupation shall not exceed 500 square feet in a residential zone, except in the AR zone where 1,500 square feet is the maximum.

**Correct.**

G. No structural alterations shall be made that would be inconsistent with future use of the buildings exclusively for residential purposes.

**Agree.**

H. No alteration to or use of the premises shall be made that would reduce the number of required on-site parking spaces.

**NO Parking Needed.**

I. All visits by suppliers or customers shall occur between the hours of 8:00 a.m. and 8:00 p.m. These limitations do not apply to a bed and breakfast use as defined in MCC 17.110.108.

**NO Visitors.**

J. There shall be no outside storage or display of materials, equipment, or merchandise used in, or produced in connection with, the conditional home occupation.

**Trucks are parked in already existing parking on the personal residence side.**

K. Deliveries to or from the dwelling shall not involve a vehicle rated at more than one ton. There shall be no more than one commercial vehicle located on the property in conjunction with the home occupation.

**No Deliveries.**

L. Where a home occupation involves deliveries, one off-street loading space shall be provided. If visits by customers occur, two additional off-street parking spaces shall be provided if the street along the lot frontage does not provide paved area for at least two parallel parking spaces. During normal loading/unloading or customer parking periods the off-street loading and parking spaces shall be reserved exclusively for that use.

**Does Not Apply**

M. The property, dwelling or other buildings shall not be used for assembly or dispatch of employees to other locations.

**Agree.**

N. Retail and wholesale sales that do not involve customers coming to the property, such as Internet, telephone or mail order off-site sales, and incidental sales related to the home occupation services being provided are allowed. No other sales are permitted as, or in conjunction with, a home occupation.

**Does Not Apply.**



**Marion County**  
OREGON

## **HOME OCCUPATION** **SUPPLEMENTAL INFORMATION**

**Applications will no longer be accepted by email or mail.  
All applications must be submitted in person.**

**Do not double-side or spiral bind any documents being submitted**

APPLICANT NAME: <b>Brett Allen Fobert</b>	ADDRESS, CITY, STATE, AND ZIP: 17644 Painter Loop Rd NE Hubbard OR 97032	
DAYTIME PHONE (if staff has questions about this application): 503-989-7285	E-MAIL (if any): brettfobertt@yahoo.com	
ADDRESS OF SUBJECT PROPERTY: 17644 Painter Loop Rd NE Hubbard OR 97032	SIZE OF SUBJECT PROPERTY: 20+ Acres	
DESCRIBE IN DETAIL THE PROPOSED BUSINESS AND HOW IT WILL BE OPERATED FROM YOUR HOME. INCLUDE PRODUCTS OR SERVICES PROVIDED (attach additional sheet if necessary):  Business is B & T Towing and we are just parking 4-5 trucks that are insured and registered on a gravel lot on my personal residence. This lot is located on the south end of the property away from the farm use area. No B & T business is conducted in the Ag only building or property.		
THE NAME OF THE PROPOSED BUSINESS: B & T Towing and Transportation LLC		
WILL THE BUSINESS BE OPEN TO THE PUBLIC? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
WHERE WILL THE BUSINESS BE CONDUCTED: Gravel Lot on south end of property in Brett Foberts personal residence area. In the boxes below, list the <u>total square footage</u> of the proposed business (in all buildings on the property, if applicable). Also list, in the line below each applicable building, the square footage for associated activities of the business such as office, warehouse, service area:		
<input type="checkbox"/> Home	<u>Total sq. ft. of home:</u>	<u>Total sq. ft. of business in the home:</u>
<input type="checkbox"/> Garage	<u>Total sq. ft. of garage:</u>	<u>Total sq. ft. of business in the garage:</u>
<input type="checkbox"/> Accessory building	<u>Total sq. ft. of accessory bldg.:</u>	<u>Total sq. ft. of business in accessory bldg:</u>
PLEASE EXPLAIN, IN DETAIL, WHAT EQUIPMENT WILL BE USED IN YOUR BUSINESS. INCLUDE THE QUANTITY AND SIZE OF EQUIPMENT AND HOW IT WILL BE OPERATED: Light Duty Tow Trucks. All Single Axle and all registered and Insured and up to DOT and State standards.		
PLEASE EXPLAIN, IN DETAIL, WHAT TYPE OF HAZARDOUS MATERIALS, IF ANY, WILL BE USED OR ACTIVITIES CONDUCTED (i.e. welding, paint, stripper, solvents, petroleum products, fiberglass, resins, flammable materials, etc.): Gravel Lot is for parking trucks only.		

WILL YOU BE PREPARING FOOD ITEMS OR PRODUCTS FOR SALE TO THE PUBLIC OR RETAIL STORES?  
(if yes, please describe):

Does Not Apply

IF THIS IS A BED AND BREAKFAST, WILL YOU BE RENTING MORE THAN TWO ROOMS TO THE PUBLIC OR HAVING EVENTS (i.e. gatherings, receptions, weddings, etc.):

Does Not Apply

WILL THIS BUSINESS INCREASE THE VOLUME ON THE SEPTIC SYSTEMS (liquid or solid waste)?

NO

WHAT OUTSIDE ACTIVITY OR STORAGE DOES THIS BUSINESS REQUIRE (please explain in detail):

Gravel Lot is for parking trucks only. No customers on site.

HOW MANY EMPLOYEES DOES THIS BUSINESS REQUIRE, INCLUDING YOURSELF?

2

WHERE DO THEY RESIDE? 17644 Painter Loop Rd NE Hubbard OR 97032

ARE VEHICLES USED BY THE BUSINESS? ☐ NO ☒ YES - HOW MANY? 4-5

ARE DELIVERIES OR PICK-UPS REQUIRED? ☒ NO ☐ YES

IS ADDITIONAL PARKING REQUIRED? ☒ NO ☐ YES

ESTIMATE THE TOTAL NUMBER OF DAILY CUSTOMERS:

0

WILL THERE BE ANY NEW CONSTRUCTION, ALTERATION, REMODELING, ADDITIONS OR REPAIRS TO ANY BUILDINGS FOR THE BUSINESS? NO. We can put up a privacy fence if Required.

WILL A SIGN BE PLACED ON YOUR PROPERTY TO ADVERTISE YOUR BUSINESS?

NO. No Sign is needed.

I/We hereby declare under penalties of false swearing (ORS 162.075 and 162.085) that all the above information, statements, and attachments herewith are true; and the applicants so acknowledge that any agreement or permit issued on the basis of this information may be revoked if it is found that any such statements are false.

**PRINTED NAME AND SIGNATURE** of each owner of the subject property.

Print Name

Signature

Print Name

Signature

Brett Allen Fobert

*Brett Fobert*

Print Name

Signature

Print Name

Signature

DATED this 31 day of March, 2025

Please Note: It is unlawful to disturb an archaeological site. In the event of unintentional discovery of an archeological site please stop work, protect the discovery site and contact the Oregon State Historic Preservation Office PH: 503-986-0690; Confederated Tribes of Grand Ronde PH: 503-879-5211; Confederated Tribes of Siletz Indians PH: 541-444-2532; Confederated Tribes of Warm Springs Reservation of Oregon PH: 541-553-3257. If human remains are encountered, do not disturb them in any way, instead please contact the Oregon State Police PH: 800-442-0776.