



Lincoln County Department of Planning & Development
210 SW 2nd Street, Newport, OR 97365
Phone (541) 265-4192 Fax (541) 265-6945

LAND USE REGULATION COMPENSATION CLAIM A

TO BE COMPLETED BY STAFF

Date Received: Case File Number: 18-LURCC-05-760 Staff Initials:
Fee: Current Zoning: Comp. Plan: Prev. Action:
Receipt #: Violation: Assigned Staff Member:

TO BE COMPLETED BY CLAIMANT / OTHER OWNER(S) / AGENT

Claimant Property Owners

Claimant Property Owners: Grant, Timothy M. and Grant, Sterling L.
Mailing Address: 20284 Harlan Rd.
City: Eddyville, State: OR Zip: 97343
Phone Number: (541) 438-4241

Other Property Owners

Please list all owners other than claimants with an interest in the property

Other Property Owner:
Last First Middle
Mailing Address:
City: State: Zip:
Phone Number: () -

Other Property Owner:
Last First Middle
Mailing Address:
City: State: Zip:
Phone Number: () -

Other Property Owner:
Last First Middle
Mailing Address:
City: State: Zip:
Phone Number: () -

Agent

Name of Agent: Heilig, George
Last First Middle
Mailing Address: PO Box 546
City: Corvallis State: OR Zip: 97339
Phone Number: (541) 754-7477



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LAND USE REGULATION COMPENSATION CLAIM

TO BE COMPLETED BY APPLICANT

Property Description

Please list all contiguous tax lots under the same ownership that subject to the claim

A list of the Tax lots, dates, zoning and deeds is attached as Exhibit A.

Legal Description:

1	2	8	7			6	0	1
T	R	Section	Sub-Section	Tax Lot				

Date Acquired 12/30/75 Current Zoning AC Zoning on Date Acquired A-1

Legal Description:

1	2	8	7			6	0	0
T	R	Section	Sub-Section	Tax Lot				

Date Acquired 12/8/76 Current Zoning AC Zoning on Date Acquired A-1

A map of the property is attached as Exhibit B.

Legal Description:

1	2	8	0	0			5	4	0	0
T	R	Section	Sub-Section	Tax Lot						

Date Acquired 12/8/76 Current Zoning part AC part TC Zoning on Date Acquired A-1

Legal Description:

1	2	8	0	0			5	4	0	1
T	R	Section	Sub-Section	Tax Lot						

12/8/76 AC A-1

see additional tax lot listed below

Have you filed any previous claims for compensation for this property with Lincoln County or the State of Oregon? Yes No

If yes, please describe the claim filed and status and/or disposition of the claim: concurrent claim filed with State of OR - DAS

Additional Tax Lot Subject to Claim.

• 12-9-00 3300 Acq. Date = 12/8/76 CZ = AC ZDA = A-1

Signature of Owner(s) or authorized Agent:

All owners with an interest in the subject property or their duly authorized agent must sign

By signing below, I am certifying that the information contained in and attached to this form is accurate and complete.

Claimant Owner's Signature (Required)

STERLING GRANT

Print Name

STERLING GRANT

Date

6-10-05

Other Owner(s) / Agent Signature

TIM GRANT

Print Name

TIM GRANT

Date

5-25-05