





## 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

Legal Description: 

0	7
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1	1
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0	1
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0	0
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		1	0	0
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T                      R                      Section                      Sub-Section                      Tax Lot

Date Acquired 11/30/67 Current Zoning T.C. Zoning on Date Acquired None

Legal Description: 

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T                      R                      Section                      Sub-Section                      Tax Lot

Date Acquired \_\_\_\_\_ Current Zoning \_\_\_\_\_ Zoning on Date Acquired \_\_\_\_\_

Legal Description: 

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T                      R                      Section                      Sub-Section                      Tax Lot

Date Acquired \_\_\_\_\_ Current Zoning \_\_\_\_\_ Zoning on Date Acquired \_\_\_\_\_

Legal Description: 

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T                      R                      Section                      Sub-Section                      Tax Lot

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

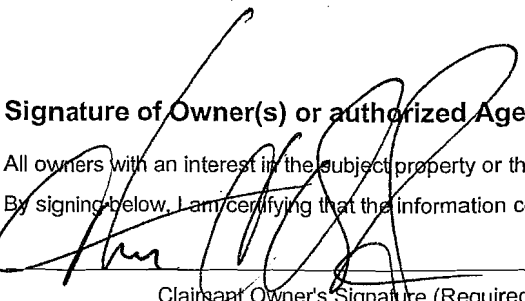
If yes, please describe the claim filed and status and/or disposition of the claim. \_\_\_\_\_

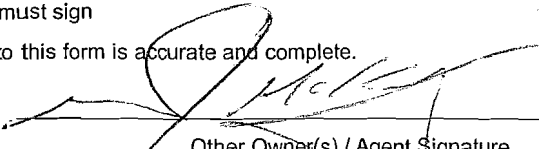
However, a claim is being filed with the State of Oregon at the time this claim is filed for the same property.

**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)  
 Thomas C. Orth, Trustee

  
 \_\_\_\_\_  
 Other Owner(s) / Agent Signature  
 W. John McKay

Print Name \_\_\_\_\_  
 Date 5/20/05

Print Name \_\_\_\_\_  
 Date 5/23/05