



## LAND USE REGULATION COMPENSATION CLAIM

### TO BE COMPLETED BY STAFF

Date Received: \_\_\_\_\_ Case File Number: 102 LURCC OK-1328 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: Wetten Kenneth A.  
 Last First Middle  
 Mailing Address: 410 NE 10<sup>th</sup> Court  
 City: Newport State: OR Zip: 97365  
 Phone Number: ( 541 ) 272 - 2288

**Other Property Owners**

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

Other Property Owner: Dorsey Timothy A.  
 Last First Middle  
 Mailing Address: 410 NE 10<sup>th</sup> Court  
 City: Newport State: OR Zip: 97365  
 Phone Number: ( ) -

Other Property Owner: Thill Donald M.  
 Last First Middle  
 Mailing Address: P.O. Box 321  
 City: Toledo State: OR Zip: 97391  
 Phone Number: ( 541 ) 270 - 2159

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

**Agent**

Name of Agent: Hamilton Gary C.  
 Last First Middle  
 Mailing Address: P.O. Box 1730; 407 N. Coast Hwy  
 City: Newport State: OR Zip: 97365  
 Phone Number: ( 541 ) 265 - 8670



## 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: 

1	1
---	---

1	0
---	---

0	7
---	---

0	0
---	---

0	0	5	0	0
---	---	---	---	---

T                      R                      Section                      Sub-Section                      Tax Lot

Date Acquired 7/19/1988      Current Zoning AC      Zoning on Date Acquired AC-40

Legal Description: 

1	1
---	---

1	0
---	---

0	7
---	---

0	0
---	---

0	0	8	0	0
---	---	---	---	---

T                      R                      Section                      Sub-Section                      Tax Lot

Date Acquired 7/19/1988      Current Zoning TC      Zoning on Date Acquired TC

Legal Description: 

--	--

--	--

--	--

--	--

--	--	--	--	--

T                      R                      Section                      Sub-Section                      Tax Lot

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

Legal Description: 

--	--

--	--

--	--

--	--

--	--	--	--	--

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.

Simultaneously filing State of Oregon Measure 37 Claim

---



---



---



---

#### 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)

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Other Owner(s) / Agent Signature

Gary C. Hamilton

\_\_\_\_\_  
 Print Name

12-1-2006

\_\_\_\_\_  
 Date