



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

TO BE COMPLETED BY STAFF

Date Received: 9/8/2006 Case File Number: 9-LURCC-06-1005 Staff Initials: RB
 Fee: NA 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: RAY PEARL Everett
Last First Middle
 Mailing Address: 2980 Mossy LAKE
 City: Toledo State: OREGON Zip: 97391
 Phone Number: (541) 336-2960

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: RAY RANDY B
Last First Middle
 Mailing Address: 22535 Siletz Hwy
 City: Siletz State: OREGON Zip: 97380
 Phone Number: (541) 444-1381



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

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	5
---	---

D	0
---	---

1	6	0	0
---	---	---	---

T R Section Sub-Section Tax Lot

Date Acquired 1956 Current Zoning RR-5 Zoning on Date Acquired NONE

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

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.

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.

Veall E Ray
 Claimant Owner's Signature (Required)
VEALL E. RAY
 Print Name
9-7-2006
 Date

Randy B. Ray
 Other Owner(s) / Agent Signature
RANDY B. RAY
 Print Name
9-7-2006
 Date