

Received
Planning Division
04/04/2024



CITY OF BEAVERTON
Community Development
Department
Planning Division
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OFFICE USE ONLY

FILE #: _____
FILE NAME: _____
TYPE: _____ RECEIVED BY: _____
FEE PAID: _____ CHECK/CASH: _____
SUBMITTED: _____ LWI DESIG: _____
COMP. PLAN: _____ NAC: _____

DESIGN REVIEW TWO AND THREE APPLICATION

PLEASE SELECT THE SPECIFIC TYPE OF DESIGN REVIEW FROM THE FOLLOWING LIST:

DESIGN REVIEW TWO

DESIGN REVIEW THREE

APPLICANT: Use mailing address for meeting notification.

Check box if Primary Contact

COMPANY: Placid Holdings, Inc.

ADDRESS: 2317 NW Birkendene Street

(CITY, STATE, ZIP) Portland, OR 97229

PHONE: (503)781-8226 FAX: _____ E-MAIL: habib.emerald@comcast.net

SIGNATURE: [Signature] CONTACT: HABIB MATIN

APPLICANT'S REPRESENTATIVE:

Check box if Primary Contact

COMPANY: Pacific Community Design, Inc.

ADDRESS: 12564 SW Main Street

(CITY, STATE, ZIP) Tigard, OR 97223

PHONE: 503-941-9484 FAX: _____ E-MAIL: Maureen@Pacific-Community.com

SIGNATURE: _____ CONTACT: Maureen Jackson, AICP

PROPERTY OWNER(S): Attach separate sheet if needed.

Check box if Primary Contact

COMPANY: Placid Holdings, Inc.

ADDRESS: 2317 NW Birkendene Street

(CITY, STATE, ZIP) Portland, OR 97229

PHONE: (503)781-8226 FAX: _____ E-MAIL: habib.emerald@comcast.net

SIGNATURE: [Signature] CONTACT: Habib Matin, Managing Member

Note: A land use application must be signed by the property owner(s) or by someone authorized by the property owner(s) to act as an agent on their behalf. If someone is signing as the agent of the property owner(s), that person must submit a written statement signed by the property owner(s), authorizing the person to sign the application.

PROPERTY INFORMATION (REQUIRED)

SITE ADDRESS: 15584 SW Scholls Ferry Rd

AREA TO BE DEVELOPED (s.f.): _____

ASSESSOR'S MAP & TAX LOT # 2S105BA00200 LOT SIZE 2.67 ZONING DISTRICT TC-HDR

EXISTING USE OF SITE: _____

PROPOSED DEVELOPMENT ACTION: Modification to DR2022-0046