

# Seaside Planning Department Land Use Application



Office: 503-738-7100

E-mail: [CDAdmin@CityofSeaside.us](mailto:CDAdmin@CityofSeaside.us)

Fax: 503-738-8765

Mailing Address: 989 Broadway Seaside, OR 97138

Physical Address: 1389 Avenue U Seaside, OR 97138

Name of Applicant: <b>Emilia Yanez</b>		Address: <b>17465 NW Carl Ct. Portland, OR 97229</b>		Zip Code: <b>97229</b>	
Street Address or Location of Property: <b>580 S Franklin St. Seaside, OR 97138</b>					
Zone <b>R3</b>	Overlay Zones	Township <b>6</b>	Range <b>10</b>	Section <b>21 AC</b> APN: 11927	Tax Lot <b>4 17000</b>

**Proposed Use of Property and Purpose of Application:**

Property is a family vacation home.  
Property will also be a short term rental  
when not in use by family or friends.

(Attach additional pages if necessary.)

Owner	Applicant/Representative (Other than Owner)
Print Name of Property Owner: <b>Emilia Yanez</b>	Print Name of Applicant/Representative: <b>Verenice Leon</b>
Address: <b>17465 NW Carl Ct Portland, OR</b>	Address: <b>334 NE 33rd Ct. Hillsboro, OR</b>
Phone: <b>541-243-4901</b>	Phone: <b>208-989-6051</b>
E-mail: <b>emilia.m.yanez@gmail.com</b>	E-mail: <b>verenice05@gmail.com</b>
Signature of Property Owner: <i>Emilia Yanez</i>	Signature of Duly Authorized Applicant/Representative: <i>Verenice Leon</i>

**FOR OFFICE USE ONLY—DO NOT WRITE BELOW THIS LINE.**

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> Conditional Use         | <input type="checkbox"/> Non-Conforming           | <input type="checkbox"/> Subdivision                | <input type="checkbox"/> Zoning Code Amendment  |
| <input type="checkbox"/> Landscape/Access Review | <input type="checkbox"/> Planned Development      | <input type="checkbox"/> Temporary Use              | <input type="checkbox"/> Zoning Map Amendment   |
| <input type="checkbox"/> Major Partition         | <input type="checkbox"/> Property Line Adjustment | <input checked="" type="checkbox"/> Vacation Rental | <input type="checkbox"/> PC <input type="checkbox"/> PD <input type="checkbox"/> Appeal |
| <input type="checkbox"/> Minor Partition         | <input type="checkbox"/> Setback Reduction        | <input type="checkbox"/> Variance                   | <input type="checkbox"/>  |

Planning Department Use	
Date Accepted as Complete: <b>1.12.23</b>	By: <b>J</b>
File Number: <b>23 006 VRA</b>	
Hearing Date:	P.C. Action:

Office Use		
Fee: <b>430.00</b>	Receipt: <b>18609</b>	
Date Filed: <b>1/17/23</b>	Time Filed: <b>10:05</b>	By: <b>JRS</b>

**PAID**

22-068 VRD  
61021 AC17000

RECEIVED  
12/20/22  
Jmc

**Vacation Rental Dwelling  
Property Information**



VRD Address: 580 S FRANKLIN ST SEASIDE, OR

1. TOTAL NUMBER OF BEDROOMS: 1
2. TOTAL NUMBER OF OFF-STREET PARKING SPACES: 2
  - a. VRDs are required to have a minimum of two parking spaces (each space must be 9'x18') plus one additional space for each bedroom in the dwelling over two bedrooms.
3. OCCUPANCY REQUESTED (OVER THE AGE OF THREE) : 3
  - a. To calculate your maximum occupancy, multiply the number of bedrooms by 3. If the number of parking spaces is less than the number of bedrooms, calculate your occupancy by multiplying the number of parking spaces by 3.
4. DO THE REQUIRED OFF-STREET PARKING SPACES TAKE UP MORE THAN 50% OF THE VRD'S REQUIRED YARD AREAS?  
Yes ☐ No ☒
5. DO YOU HAVE ANY OWNERSHIP IN ANY ADDITIONAL PROPERTIES IN THE CITY OF SEASIDE?  
Yes ☐ No ☒  
If yes what are the property addresses? \_\_\_\_\_
6. DO YOU HAVE OWNERSHIP IN ANY OTHER SHORT-TERM RENTALS? Yes ☐ No ☒  
If yes, what City/County/State are they located in?  
\_\_\_\_\_
7. WHO WILL BE THE LOCAL CONTACT FOR YOUR VRD?  
(Your local contact must reside within Clatsop County.)  
Name VACASA Address \_\_\_\_\_ 24-hr Phone \_\_\_\_\_
8. ATTACH SCALE DRAWINGS OF YOUR SITE PLAN, FLOOR PLAN, AND PARKING MAP.

By signing this application, the applicant acknowledges that if the request requires review by the Planning Commission (Seaside Zoning Ordinance 6.137E), additional Planning Commission review fees may apply and the applicant or a duly authorized representative must attend the Public Hearing. The applicant has answered these questions truthfully and to the best of their knowledge and the applicant understands that omitting information on this application could be grounds for denial of their request for VRD Conditional Use Permit.

Applicant Signature: Emilia Yañez Date: 12/19/22  
Printed Name: Emilia Yañez



360422003335 Ticor



Recording Instrument #202204931  
Recorded By: Clatsop County Clerk  
# of Pages: 15 Fee: 157.00  
Transaction date: 07/05/2022 12:59:54  
Deputy: Nelson

91st DAY IS  
OCT 4. 2022

When recorded, return to:  
Advantis Credit Union  
10501 SE Main St  
Milwaukie, OR 97222  
800-547-5532

Title Order No.: 360422003335  
Escrow No.: 360422003335  
LOAN #: 2210604

[Space Below This Line For Acknowledgment]

## DEED OF TRUST

### DEFINITIONS

Words used in multiple sections of this document are defined below and other words are defined in Sections 3, 11, 13, 18, 20 and 21. Certain rules regarding the usage of words used in this document are also provided in Section 16.

(A) "Security Instrument" means this document, which is dated June 30, 2022, together with all Riders to this document.

(B) "Borrower" is Emilia Yanez as to an undivided 33.33% interest, Jeff DeLine as to an undivided 33.33% interest, not as tenants in common but with rights of survivorship, Verence Leon as to an undivided 16.67% interest and Andrew Eggert as to an undivided 16.67% interest, not as tenants in common but with rights of survivorship.

Borrower is the trustor under this Security Instrument.

(C) "Lender" is Advantis Credit Union.

Lender is a State Chartered Credit Union,  
Oregon,  
OR 97222.

organized and existing under the laws of  
Lender's address is 10501 SE Main St, Milwaukie,

Lender is the beneficiary under this Security Instrument.

(D) "Trustee" is WFG National Title.

(E) "Note" means the promissory note signed by Borrower and dated June 30, 2022.

The Note

states that Borrower owes Lender TWO HUNDRED NINETY NINE THOUSAND SEVEN HUNDRED AND NO/100<sup>00</sup> \*\*\*\*\* Dollars (U.S. \$299,700.00)

plus interest. Borrower has promised to pay this debt in regular Periodic Payments and to pay the debt in full not later than August 1, 2052.

(F) "Property" means the property that is described below under the heading "Transfer of Rights in the Property."

(G) "Loan" means the debt evidenced by the Note, plus interest, any prepayment charges and late charges due under the Note, and all sums due under this Security Instrument, plus interest.

OREGON--Single Family--Fannie Mae/Freddie Mac UNIFORM INSTRUMENT  
ICE Mortgage Technology, Inc.

Form 3038 1/01

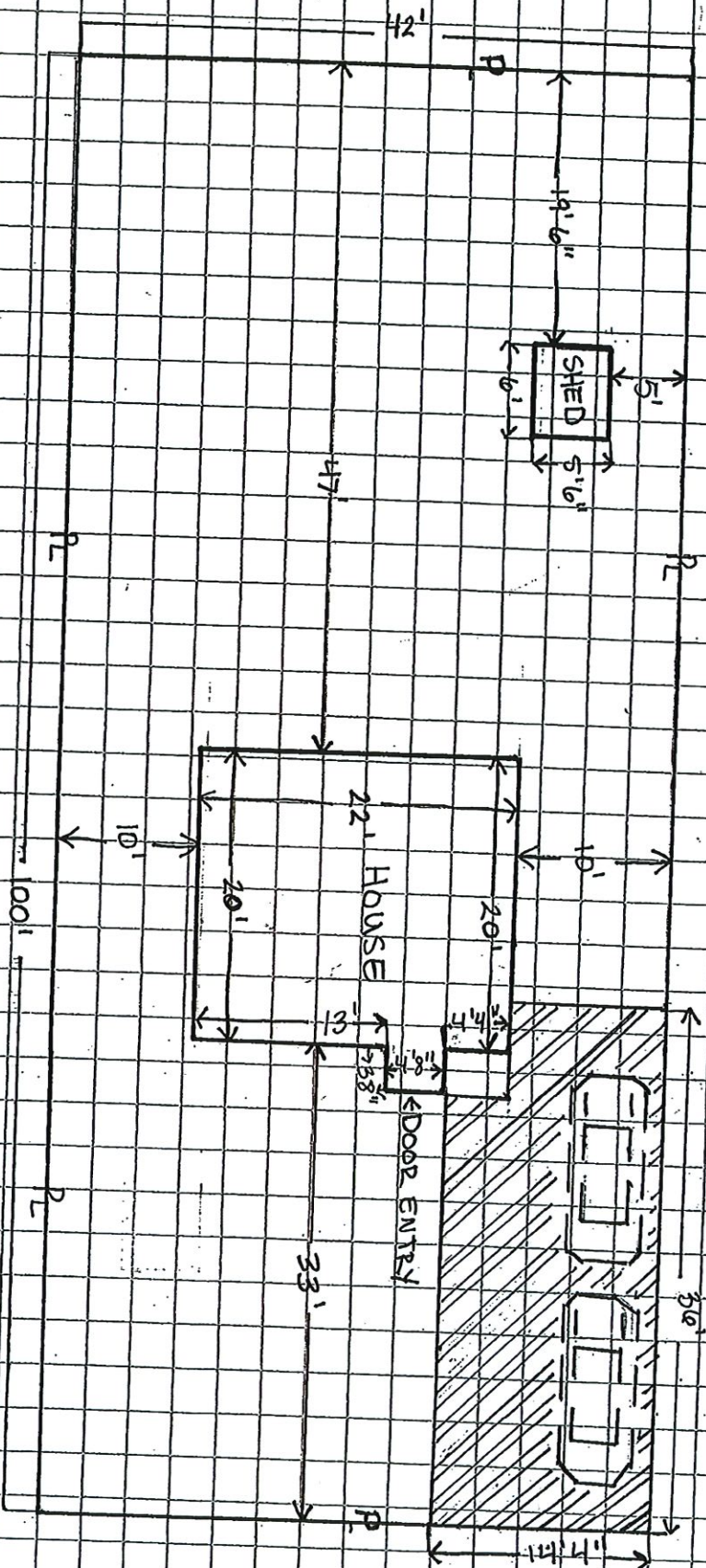
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Initials:

ORUDED 0715  
ORUDED (CLS)  
07/01/2022 01:13 PM PST



S FRANKLIN ST



SCALE = 1 square / 3 Ft



**AREA**

LOT SIZE

RESIDENTIAL

SHED

4,200 sq ft

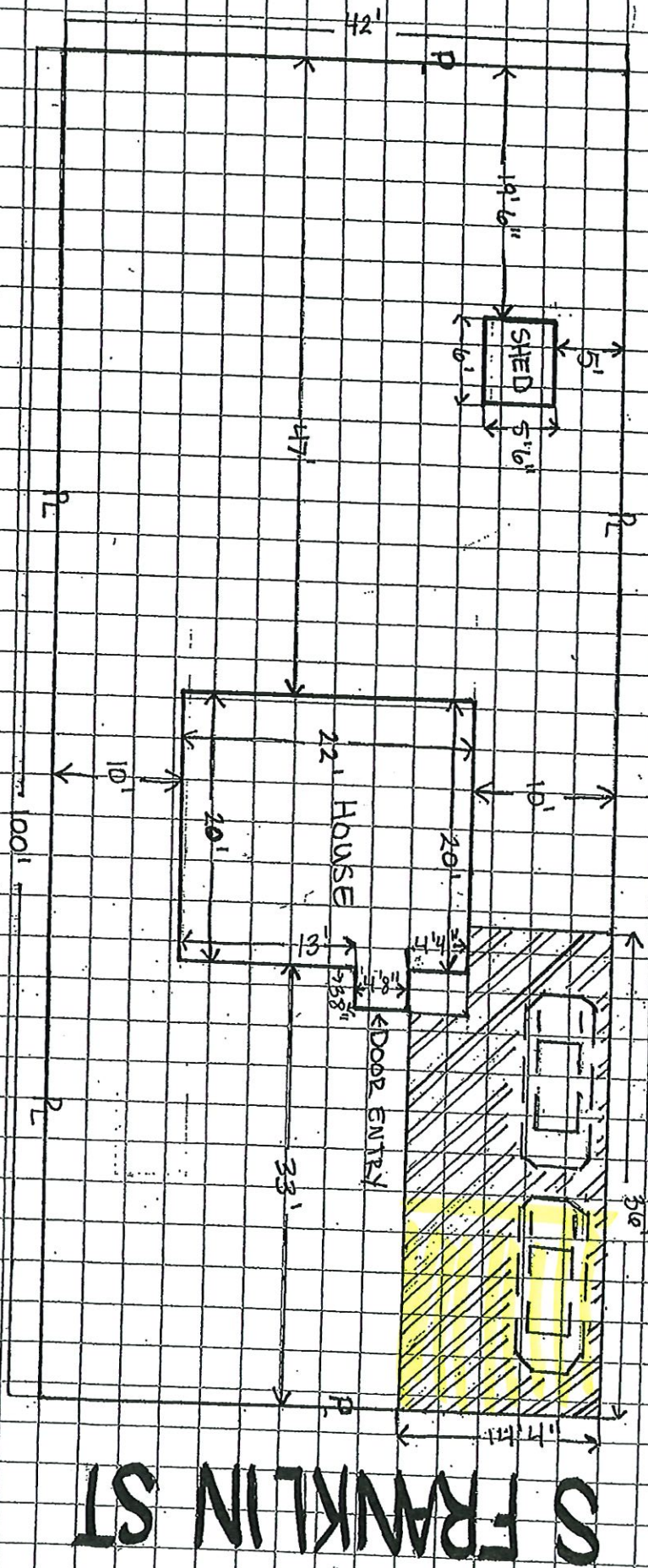
440 sq ft

33 sq ft

LOT COVERAGE

473 sq ft or 11.26%





SCALE = 1 square / 3 Ft

AREA  
 LOT SIZE 4,200 sq ft  
 RESIDENTIAL 440 sq ft  
 SHED 33 sq ft

LOT COVERAGE 473 sq ft or 11.26%

AREA  
 $15 \times 42 = 630$

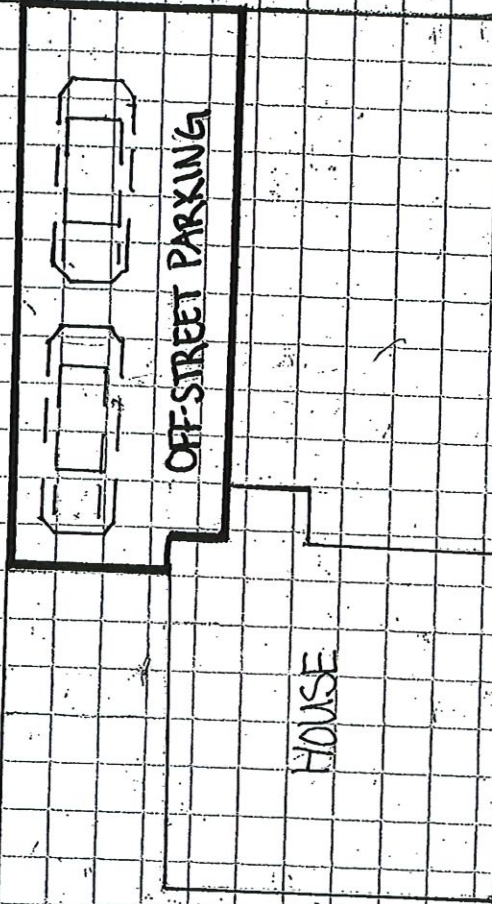
PARKING  
 210 sq ft  
 33%



ON STREET PARKING CANNOT  
BE USED BY RENTERS.  
PLEASE USE THE OFF-STREET  
SPACES PROVIDED.



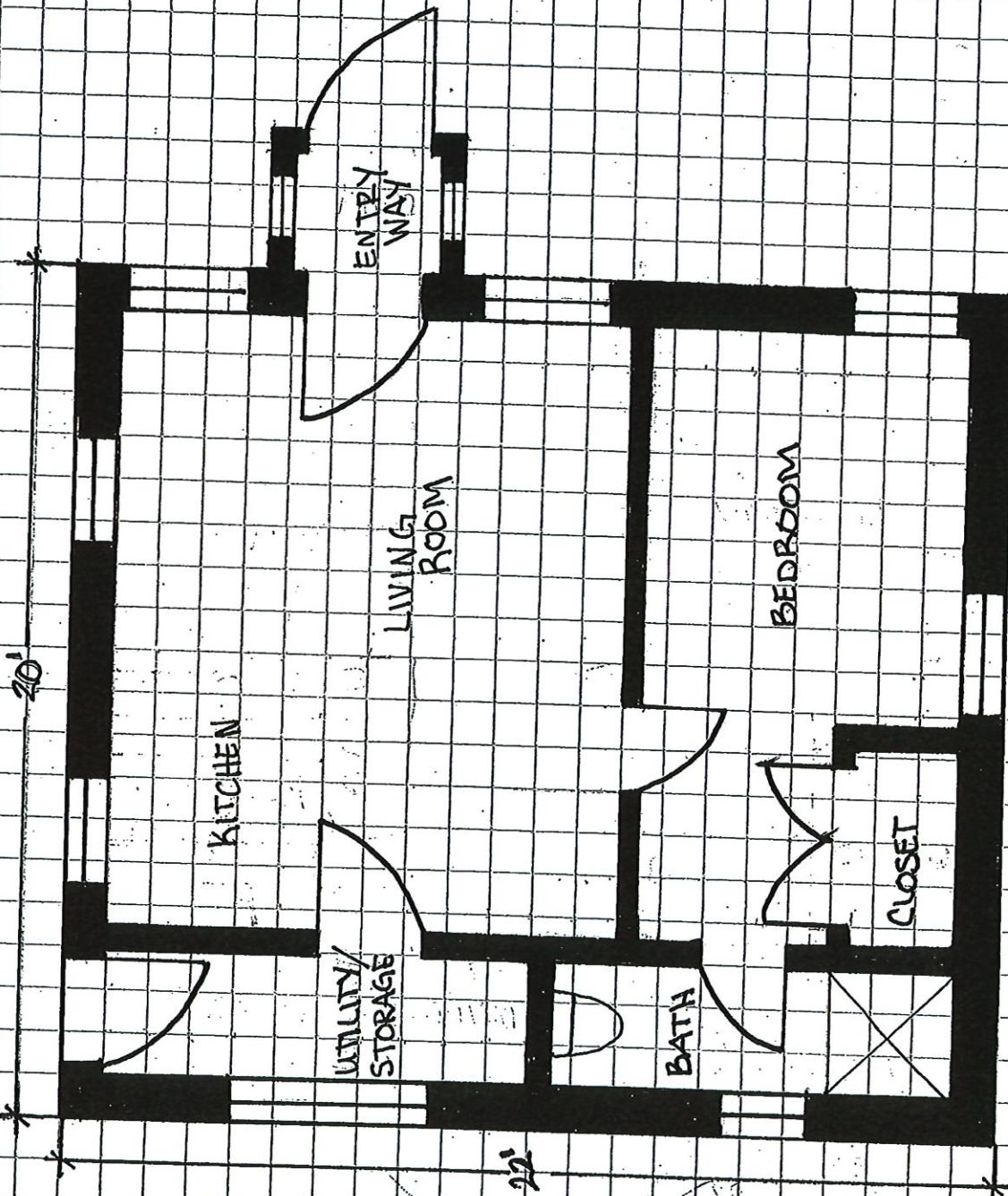
S FRANKLIN ST.



SCALE = 1 Square / 3 Ft



580 S FRANKLIN ST.



FLOOR PLAN SCALE = 1 square / 1 ft