



# Oregon

Theodore R. Kubongoski, Governor

Department of Land Conservation and Development

635 Capitol Street, Suite 150

Salem, OR 97301-2540

(503) 373-0050

Fax (503) 378-5518

www.lcd.state.or.us



## NOTICE OF ADOPTED AMENDMENT

10/15/2009

**TO:** Subscribers to Notice of Adopted Plan  
or Land Use Regulation Amendments

**FROM:** Plan Amendment Program Specialist

**SUBJECT:** City of Rogue River Plan Amendment  
DLCD File Number 001-08

The Department of Land Conservation and Development (DLCD) received the attached notice of adoption. A Copy of the adopted plan amendment is available for review at the DLCD office in Salem and the local government office.

Appeal Procedures\*

**DLCD ACKNOWLEDGMENT or DEADLINE TO APPEAL:** Tuesday, October 27, 2009

This amendment was submitted to DLCD for review prior to adoption. Pursuant to ORS 197.830(2)(b) only persons who participated in the local government proceedings leading to adoption of the amendment are eligible to appeal this decision to the Land Use Board of Appeals (LUBA).

If you wish to appeal, you must file a notice of intent to appeal with the Land Use Board of Appeals (LUBA) no later than 21 days from the date the decision was mailed to you by the local government. If you have questions, check with the local government to determine the appeal deadline. Copies of the notice of intent to appeal must be served upon the local government and others who received written notice of the final decision from the local government. The notice of intent to appeal must be served and filed in the form and manner prescribed by LUBA, (OAR Chapter 661, Division 10). Please call LUBA at 503-373-1265, if you have questions about appeal procedures.

**\*NOTE:** THE APPEAL DEADLINE IS BASED UPON THE DATE THE DECISION WAS MAILED BY LOCAL GOVERNMENT. A DECISION MAY HAVE BEEN MAILED TO YOU ON A DIFFERENT DATE THAT IT WAS MAILED TO DLCD. AS A RESULT, YOUR APPEAL DEADLINE MAY BE EARLIER THAN THE ABOVE DATE SPECIFIED.

**Cc:** Laurel Prairie-Kuntz, City of Rogue River /Lois De Benedetti, City of Rogue River  
Gloria Gardiner, DLCD Urban Planning Specialist  
John Renz, DLCD Regional Representative

<paa> YA

FORM 2

# DLCD

## Notice of Adoption

In person  electronic  mailed

**DEPT OF**

**OCT 08 2009**

**LAND CONSERVATION AND DEVELOPMENT**

For DLCD Use Only

THIS FORM **MUST BE MAILED** TO DLCD  
**WITHIN 5 WORKING DAYS AFTER THE FINAL DECISION**  
 PER ORS 197.610, OAR CHAPTER 660 - DIVISION 18

Jurisdiction: **City of Rogue River** Local file number: **2008-001**  
 Date of Adoption: **September 29, 2009** Date Mailed: **9/06/09**  
 Was a Notice of Proposed Amendment (Form 1) mailed to DLCD? Yes Date: 8/15/2009  
 Comprehensive Plan Text Amendment  Comprehensive Plan Map Amendment  
 Land Use Regulation Amendment  Zoning Map Amendment  
 New Land Use Regulation Other:

Summarize the adopted amendment. Do not use technical terms. Do not write "See Attached".  
**Ordinance No. 09-366-0 to update provisions and regulations for medical hardship dwellings**

Does the Adoption differ from proposal? No

Plan Map Changed from: **N/A** to:  
 Zone Map Changed from: **N/A** to:  
 Location: Acres Involved:  
 Specify Density: Previous: New:

Applicable statewide planning goals:

1  2  3  4  5  6  7  8  9  10  11  12  13  14  15  16  17  18  19

Was an Exception Adopted?  YES  NO

Did DLCD receive a Notice of Proposed Amendment...

45-days prior to first evidentiary hearing?  Yes  No  
 If no, do the statewide planning goals apply?  Yes  No  
 If no, did Emergency Circumstances require immediate adoption?  Yes  No

**DLCD file No.** 002-09 (17684) [15749]

Please list all affected State or Federal Agencies, Local Governments or Special Districts:

Local Contact: **Lois De Benedetti** Phone: ( 541 ) 582- 4401 Extension: 106  
 Address: **P. O. Box 1137** Fax Number: **541-582-0937**  
 City: **Rogue River, OR** Zip: **97537** E-mail Address: **ldebenedetti@ci.rogue-river.or.us**

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## ADOPTION SUBMITTAL REQUIREMENTS

This form **must be mailed** to DLCD **within 5 working days after the final decision**

Per ORS 197.610, OAR Chapter 660 - Division 18.

1. Send this Form and **TWO Complete Copies** (documents and maps) of the Adopted Amendment to:  
**ATTENTION: PLAN AMENDMENT SPECIALIST**  
**DEPARTMENT OF LAND CONSERVATION AND DEVELOPMENT**  
**635 CAPITOL STREET NE, SUITE 150**  
**SALEM, OREGON 97301-2540**
2. **Electronic Submittals:** At least **one** hard copy must be sent by mail or in person, or by emailing **[larry.french@state.or.us](mailto:larry.french@state.or.us)**.
3. **Please Note:** Adopted materials must be sent to DLCD not later than **FIVE (5) working days** following the date of the final decision on the amendment.
4. Submittal of this Notice of Adoption must include the text of the amendment plus adopted findings and supplementary information.
5. The deadline to appeal will not be extended if you submit this notice of adoption within five working days of the final decision. Appeals to LUBA may be filed within **twenty-one (21) days** of the date, the Notice of Adoption is sent to DLCD.
6. In addition to sending the Notice of Adoption to DLCD, you must notify persons who participated in the local hearing and requested notice of the final decision.
7. **Need More Copies?** You can now access these forms online at **<http://www.lcd.state.or.us/>**. Please print on **8-1/2x11 green paper only**. You may also call the DLCD Office at (503) 373-0050; or Fax your request to: (503) 378-5518; or Email your request to **[larry.french@state.or.us](mailto:larry.french@state.or.us)** - **Attention: Plan Amendment Specialist.**

Updated March 17, 2009

**ORDINANCE NO. 09-366-O**

**AN ORDINANCE AMENDING ORDINANCE NO. 373, ARTICLE 18: ADMINISTRATIVE PERMIT AUTHORIZED, REGULATING THE USE OF LAND AND STRUCTURES IN THE CITY OF ROGUE RIVER, OREGON, AND ESTABLISHING ZONES FOR THAT PURPOSE.**

**THE COMMON COUNCIL OF THE CITY OF ROGUE RIVER, OREGON, ORDAINS AS FOLLOWS:**

**SECTION 1. ARTICLE 18. ADMINISTRATIVE PERMIT shall amend the title to read as follows:**

**ARTICLE 18. MISCELLANEOUS PERMIT**

**SECTION 2. SECTION 18.010 ADMINISTRATIVE PERMIT AUTHORIZED shall be amended to read as follows:**

**SECTION 18.010. MEDICAL HARDSHIP DWELLING:** A medical hardship dwelling is a permit for a temporary residence to be occupied by an infirm person or persons incapable of maintaining a residence on separate property, or by one (1) or more individuals engaged in caring for an infirm person(s) residing on the property, provided that all the provisions of this Section are satisfied. A medical hardship dwelling shall be processed as a Type II permit.

**(1) Criteria for a Medical Hardship Dwelling:**

a. The nature of the infirmity or hardship must be certified by the patient's primary care medical doctor (MD) or Osteopath (DO). The statement will be on the care provider's stationery or stamped by the office, and will indicate that the patient is not physically or mentally capable of maintaining him/herself in a residence on a separate property, and is dependent upon someone being close by for assistance. This certification must be dated within one (1) year of the date of application or permit renewal.

b. The infirmity will be due to physical or mental impairment. Financial hardship conditions, child care, and other convenience arrangements that do not relate to physical and mental impairment, are not considered an infirm condition.

c. At least one (1) other person will reside on the premises who can provide the needed assistance.

d. The medical hardship dwelling shall not be detrimental to the character of the adjoined land uses and will not infringe upon the continued uses of the adjacent land.

e. The medical hardship dwelling will be connected to the public sanitary sewer system and water system through the meter of the primary dwelling.

f. The location of the temporary structure will conform to all applicable setback requirements of this Ordinance.

g. A medical hardship dwelling may be located in a Commercial or Industrial district, as an accessory use, to an existing dwelling unit on the property.

h. The applicant will certify that the placement of the temporary structure will not violate the provisions of any deed declaration or subdivision covenant for the property.

i. No additional driveways, access roads or permanent accessory buildings to serve the temporary structure will be permitted.

j. The applicant will agree to remove the temporary dwelling within ninety (90) calendar days after the unit has ceased to be used for the person(s) for which the permit was issued. In any event, the unit will be disconnected from water and sewer service by the day of the expiration of the permit, unless the permit has been renewed in conformance with sub-section (4), below, or the structure has been put to another lawfully permitted use.

k. The medical hardship dwelling can only be an approved manufactured home per ORS Chapter 446.003(24)(a) or, an approved park trailer as per OAR 918-525-0005(28).

l. A Medical Hardship Dwelling is not subject to the criteria and standards in Rogue River Zoning Ordinance Section 4.145 Manufactured Dwellings.

m. If the applicant is not the property owner, the following notarized documents, signed by the property owner, must be provided with the application:

(i) Authorization for the applicant to place a Temporary Medical Hardship Dwelling on the subject property; and,

(ii) Certification that the placement of the temporary structure will not violate the provisions of any deed declaration or subdivision covenant for the property; and,

(iii) Agreement that, if the applicant fails to remove the medical hardship dwelling within sixty (60) calendar days after the unit has ceased to be used for the person for which the permit was issued, the property owner will ensure that the medical hardship dwelling is removed within the next thirty (30) days.

**(2) Expiration of Permit; Renewal:**

a. A medical hardship dwelling permit is valid for up to two (2) years from the date of initial issuance. All permits will have an expiration date of January 31. The City will process all medical hardship permit renewal requests once per year; and,

b. The City will give permittees not less than thirty (30) calendar days written notice of the pending expiration of their permits, advising that a renewal will be required. Failure to receive notification of pending expiration does not constitute an extension of time for the permit. All renewal requests will comply with the conditions for issuance specified in subsection (1) above at the time of renewal; and,

c. The permit will not be renewed until a review has been conducted by the City to determine the continued validity of the hardship, including submittal of a new certification by the patient's primary care medical doctor (MD) or osteopath (DO).

**(3) Addition of an additional Infirm Resident:**

a. One (1) additional resident, who is to receive care may be added

under an existing medical hardship permit, provided the additional resident is also infirm and incapable of maintaining a residence on separate property; and,

b. Provided the existing permit is in compliance with the standards set forth in Section 18.010, the holder of the existing permit will pay the required fee and submit medical documentation demonstrating the infirmity or hardship of the new resident. A new permit will not be required.

(4) **Revocation:** A medical hardship permit may be revoked by the City, for non-compliance with the conditions of a permit. If the permit is revoked, the City will require the occupants to move out of the manufactured dwelling within thirty (30) calendar days and remove the structure within ninety (90) calendar days of the permit revocation.

**SECTION 18.020 is being reserved for the addition of ACCESSORY DWELLINGS UNITS.** *(At this time there will not be any changes to this Section.)*

**SECTION 3: SECTION 18.030. PROCEDURE** shall be amended to read as follows:

**SECTION 18.030. PROCEDURE:**

(1) A request for a miscellaneous permit may be initiated by filing an application and paying the required fee.

(2) The City Planner shall review the application. If, in the opinion of the City Planner, the request meets the purpose and criteria for a miscellaneous permit, he/she may approve the request.

**SECTION 4. SECTION 18.040 ADMINISTRATIVE DECISION** shall be amended to read as follows:

**SECTION 18.040. ADMINISTRATIVE DECISION.** A miscellaneous permit can be an administrative decision if the application is such that there are not any extenuating circumstances and the Planning Commission agrees for it to be handled at the administrative level. All of the requirements listed above shall be required for the miscellaneous permit. *[Section 18.040 added by Ordinance No. 99-285-O, passed 3-25-99.]*

**ORDINANCE NO. 09-366-O**

**First Reading: August 27, 2009**

The enactment of the above Ordinance was moved by **Mead**, seconded by **Collins**, roll call being had thereon, resulted as follows:

**England; aye, Mead; aye, Ehrhardt; aye, Collins; aye, Schaeffer; aye.**

**Second Reading: September 29, 2009**

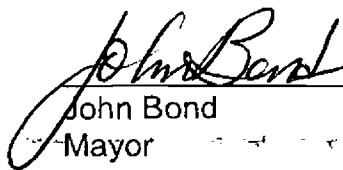
The enactment of the above Ordinance was moved by **Mead**, seconded by **Ehrhardt**, roll call being had thereon, resulted as follows:

**Mead; aye, Ehrhardt; aye, Collins; aye, Schaeffer; aye.**


Whereupon the Mayor declared the motions to be carried and the Ordinance adopted.

**PASSED** this 29<sup>th</sup> day of **September 2009** by the Common Council of the City of Rogue River, Oregon.

**SIGNED** this 30<sup>th</sup> day of **September 2009**, by the Mayor of the City of Rogue River, Oregon.

  
\_\_\_\_\_  
John Bond  
Mayor

**ATTEST:**

  
\_\_\_\_\_  
Carol J. Weir  
Deputy Recorder



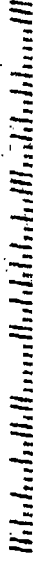
**CITY OF  
ROGUE RIVER**

P.O. Box 1137 - Rogue River, Oregon 97537-1137



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OCT 06 2009  
MAILED FROM ZIP CODE 97537

Attn: Plan Amendment Specialist  
Dept Land Conservation & Development  
635 Capitol St NE #150  
Salem OR 97301-2540



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