Case #: ZCA2025-00001

City *of* Tigard

COMMUNITY DEVELOPMENT DEPARTMENT

Master Land Use Application

LAND USE APPLICATION TYPE

- ☐ Adjustment
- ☒ Annexation
- ☐ Comprehensive Plan Map Amendment
- ☐ Conditional Use
- ☐ Downtown Development Review:
  - ☐ Type I ☐ Type II
  - ☐ Adjustment
- ☐ Home Occupation – Type II
- ☐ Land Partition
- ☐ Lot Line Adjustment/Lot Consolidation
- ☐ Marijuana Facility Permit
- ☐ Miscellaneous: _____
  - ☐ Type II ☐ Type III
- ☐ Modification: ☐ Type I ☐ Type II
- ☐ Planned Development:
  - ☐ Consolidated Plan
  - ☐ Concept Plan
  - ☐ Detailed Plan
- ☐ Sensitive Lands Review:
  - ☐ Type I ☐ Type II ☐ Type III
- ☐ Site Development Review: ☐ Type I ☐ Type II
- ☐ Subdivision
- ☐ Sublot Plat
- ☐ Temporary Use Permit
- ☐ Urban Forestry Plan:
  - ☐ Modification ☐ Discretionary Review
- ☐ Zoning Map Amendment

PROJECT INFORMATION

Project name: J and J SANDERS – Annex

Brief description of project: Annexation into City of Tigard for the purpose of connection to sanitary sewer.

SITE INFORMATION

Location (address if available): 14105 SW 164th Ave. Portland, OR 97224

Tax map and tax lot number(s): 2S108BB02400

Site size: 0.47 acres Zone: _____

APPLICANT INFORMATION

Name: JAMES H. SANDERS

Mailing address: 14105 SW 164TH AVE City/State: PORTLAND, OR Zip: 97224-1067

Phone: (503)913-1741 Email: Jim.Sanders@ieee.org

Applicant's representative: Self

Phone: _____ Email: _____

PROPERTY OWNER INFORMATION ☒ Same as applicant

(Attach list for additional owners)

Name: James H. and Janet Ann Sanders on behalf of the Sanders Living Trust

Mailing address: 14105 SW 164TH AVE City/State: PORTLAND, OR Zip: 97224-1067

Phone: (503) 913-1741 & (503-869-3800) Email: Jim.Sanders@ieee.org JANET.A.SANDERS@Gmail.com

SUBMITTAL REQUIREMENTS

In addition to this application form, you must submit all required items listed in **Subsection 18.710.030.C** of Tigard's Community Development Code. If you are unsure what is required with your application, please contact the planner on duty at 503-718-2421 or tigardplanneronduty@tigard-or.gov.

I certify that I am the property owner or I am eligible to initiate this application, as provided in the Tigard Community Development Code. To the best of my knowledge, all the information provided within this application package is complete and accurate.

J H. Sanders	James H. Sanders	03/05/2025
Applicant's signature*	Print name	Date
Janet Ann Sanders	JANET ANN SANDERS	03/05/2025
Property owner's signature*	Print name	Date
On behalf of The Sanders Living Trust		
Property owner's signature*	Print name	Date

*The owner must sign this application or submit a separate written authorization when the owner and applicant are different people.

STAFF USE ONLY

Case No.: ZCA2025-00001 Application fee: $4917.47 Received by: NT Date: 3/10/25

Related Case(s): _____ Determined complete by: _____ Date: _____

U.S. Bank
4801 Frederica St
Owensboro, KY 42301

12/29/2022

SANDERS L TST
14105 SW 164TH AVE
TIGARD, OR 97224-1067

Re: Payoff documents enclosed
Account number: 2200474677
Property address: 14105 SW 164TH AVE
TIGARD, OR 97224

Dear SANDERS L TST:

Congratulations. Your documents are enclosed in connection with the payoff of your loan with U.S. Bank.

If you have assumed this mortgage/deed of trust, the original documents will be in the name of the original borrower.

We appreciate your business and look forward to continuing to serve your financial needs. If you have questions or would like to discuss this matter further, please contact the Customer Service Center at 800.365.7772 from 8 a.m. to 5 p.m. CT Monday through Friday or visit usbank.com.

Sincerely,

Releases Department
800.365.7772

Enclosure:
-Documents

Washington County, Oregon
12/09/2022 11:32:18 AM
D-MST Cnt=2 Stn=61 N MEJIA
$10.00 $5.00 $5.00 $11.00 $60.00 - Total =$91.00

2022-070896

02917149202200708960020022

I, Joe Nelson, Director of Assessment and Taxation and Ex-Officio County Clerk for Washington County, Oregon, do hereby certify that the within instrument of writing was received and recorded in the book of records of said county.

Joe Nelson, Director of Assessment and Taxation, Ex-Officio County Clerk

WHEN RECORDED, MAIL TO:
U.S. Bank
C/O Nationwide Title Clearing,
LLC 2100 Alt. 19 North
Palm Harbor, FL 34683
Loan Number 2200474677

SUBSTITUTION OF TRUSTEE and FULL RECONVEYANCE

WHEREAS, **JAMES H SANDERS AND JANET ANN SANDERS, TRUSTEE, OR THEIR SUCCESSORS IN TRUST, UNDER THE SANDERS LIVING TRUST, DATED AUGUST 7, 2002** whose address is 14105 SW 164TH AVE TIGARD, OR 97224-1067 was the original Trustor, **FIDELITY NATIONAL TITLE INSURANCE** was the original Trustee, and **U.S. BANK N.A.** was the original Beneficiary under a certain Deed of Trust dated 09/18/2014 in **WASHINGTON** County, **OREGON**, under **Doc # 2014-060489**, recorded on 09/24/2014.

WHEREAS, the undersigned, acknowledging full payment of said Deed of Trust and debt, desires to substitute a new Trustee under said Deed of Trust in place and stead of said original Trustee thereunder. NOW, THEREFORE, the undersigned hereby substitutes **U.S. BANK TRUST COMPANY, NATIONAL ASSOCIATION**, as Trustee under said Deed of Trust and directs said **U.S. BANK TRUST COMPANY, NATIONAL ASSOCIATION** to reconvey, without warranty, to the parties entitled thereto the estate now held by him under said Deed of Trust.

Dated this 28th day of November in the year 2022
U.S. BANK N.A.

By: _____
Stevie Kretz OFFICER

STATE OF KENTUCKY COUNTY OF DAVIESS
This foregoing instrument was acknowledged before me on this 28th day of November in the year 2022 by Stevie Kretz as OFFICER of U.S. BANK N.A.. He/she/they is (are) personally known to me.

_____
Katelyn Anderson
Notary Public - STATE OF KENTUCKY
Commission expires: 11/28/2024

OFFICIAL SEAL
KATELYN ANDERSON
NOTARY PUBLIC - KENTUCKY
STATE-AT-LARGE
My Comm. Expires 11/28/2024
ID # KYNP17927

Document Prepared By: April Ferguson, U.S. Bank Mortgage Servicing, 4801 Frederica St., Owensboro, KY 42301 800-365-7772
USRPD 434955656 T282211-10:15:56 [C-2] RCNOR1

D0098583792

Loan Number 2200474677

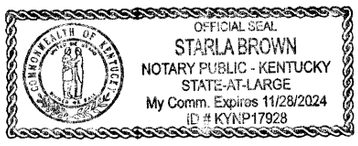
U.S. BANK TRUST COMPANY, NATIONAL ASSOCIATION Whose address is 4801 Frederica St Owensboro, KY 42301-____ , hereby accepts the foregoing appointment as Trustee under said Deed of Trust and as successor Trustee, pursuant to a written request of the present Beneficiary and in accordance with the provisions of said Deed of Trust, DOES HEREBY CONVEY to the person or persons legally entitled thereto, without warranty, the estate, title and interest now held by the undersigned in and to the premises more fully described in said Deed of Trust.

Dated this 28th day of November in the year 2022
U.S. BANK TRUST COMPANY, NATIONAL ASSOCIATION

By: _____, as Trustee
April Ferguson OFFICER
Whose address is 4801 Frederica St, Owensboro, KY 42301-____

STATE OF KENTUCKY COUNTY OF DAVIESS
This foregoing instrument was acknowledged before me on this 28th day of November in the year 2022 by April Ferguson as OFFICER of U.S. BANK TRUST COMPANY, NATIONAL ASSOCIATION. He/she/they is (are) personally known to me.

_____
Starla Brown
Notary Public - State of KENTUCKY
Commission expires: 11/28/2024



Document Prepared By: April Ferguson, U.S. Bank Mortgage Servicing, 4801 Frederica St., Owensboro, KY 42301 800-365-7772
USRPD 434955656 T282211-10:15:56 [C-2] RCNOR1

D0098583792

DOUBLE MAJORITY WORKSHEET FOR ANNEXATION TO THE CITY OF TIGARD

Please list all properties/registered voters included in the proposal. (If needed, use separate sheets for additional listings.)

PROPERTIES

	PROPERTY DESIGNATION (Tax Lot Numbers)	NAME OF PROPERTY OWNER	TOTAL ACRES	ASSESSED VALUE OF THE PROPERTY	SIGNED PETITION YES	SIGNED PETITION NO
	2S108BB02400	JAMES H. & JANET ANN SANDERS	0.47	$373,740	✓	
		on behalf of the Sanders Living Trust				
TOTALS:						

REGISTERED VOTERS

	ADDRESS OF REGISTERED VOTER	NAME OF REGISTERED VOTER	SIGNED PETITION YES	SIGNED PETITION NO
	14105 SW 164th Ave. Portland, OR	JAMES HARVEY SANDERS	✓	
	14105 SW 164TH Ave Portland, OR	JANET ANN SANDERS	✓	
TOTALS:				

SUMMARY

TOTAL NUMBER OF REGISTERED VOTERS IN THE PROPOSAL: _____
NUMBER OF REGISTERED VOTERS WHO SIGNED PETITION: _____
PERCENTAGE OF REGISTERED VOTERS WHO SIGNED PETITION: _____

TOTAL ACREAGE IN THE PROPOSAL: _____
ACREAGE SIGNED FOR: _____
PERCENTAGE OF ACREAGE SIGNED FOR: _____

TOTAL NUMBER OF SINGLE-FAMILY UNITS: _____
TOTAL NUMBER OF MULTI-FAMILY UNITS: _____
TOTAL NUMBER OF COMMERCIAL STRUCTURES: _____
TOTAL NUMBER OF INDUSTRIAL STRUCTURES _____

TO THE COUNCIL OF THE CITY OF TIGARD, OREGON:

We, the undersigned owner(s) of the property described below and/or elector(s) residing at the referenced location(s), hereby petition for, and give consent to, Annexation of said property to the City of Tigard. We understand that the City will review this request in accordance with ORS Chapter 222 and applicable regional and local policies prior to approving or denying the request for Annexation.

LEGEND:
PO - Property Owner
RV - Registered Voter
OV - Property Owner & Registered Voter

SIGNATURE	PRINTED NAME	I AM A			ADDRESS	PROPERTY DESCRIPTION				DATE
		PO	RV	OV		Township/ Section	Map Number	Tax Lot Number	Precinct Number	
[signature]	JAMES H. SANDERS			✓	14105 SW 164TH AVE, PORTLAND	2S1	08BB	2400	448	3/5/25
[signature]	JANET A. SANDERS			✓	14105 SW 164TH Ave, Portland	2S1	08BB	2400	448	3/5/25
	on behalf of the Sanders Living Trust									

THIS SECTION IS TO BE COMPLETED BY WASHINGTON COUNTY ASSESSOR'S OFFICE

CERTIFICATION OF PROPERTY OWNERSHIP

(Double Majority Method)

I hereby certify that the attached petition for annexation of the territory described therein to the City of Tigard contains the names of the owners* of a majority of the land area of the territory to be annexed, as shown on the last available complete assessment role.

NAME: TED FOSTER

TITLE: GIS TECH

DEPARTMENT: CARTOGRAPHY

COUNTY OF: WASHINGTON

DATE: 3/6/25

ANNEXATION CERTIFIED

BY TF

MAR 06 2025

WASHINGTON COUNTY A & T
CARTOGRAPHY

* indicates that "Owner" means the owner of the title to real property or the contract purchaser of real property.

THIS SECTION IS TO BE COMPLETED BY WASHINGTON COUNTY ELECTIONS OFFICE

CERTIFICATION OF REGISTERED VOTERS

I hereby certify that the attached petition for annexation of territory described herein to the City of Tigard contains the names of at least a majority of the electors registered in the territory to be annexed.

NAME: _____

TITLE: _____

DEPARTMENT: _____

COUNTY OF: _____

DATE: _____

CITY OF TIGARD

CERTIFICATION OF LEGAL DESCRIPTION AND MAP

I hereby certify that the description of the property included within the attached petition (located on Assessor's Map 2S108BB) has been checked by me and it is a true and exact description of the property under consideration, and the description corresponds to the attached map indicating the property under consideration.

NAME TED FOSTER

TITLE GIS TECH

DEPARTMENT CARTOGRAPHY

COUNTY OF WASHINGTON

DATE 3/6/25

ANNEXATION CERTIFIED

BY TF

MAR 06 2025

WASHINGTON COUNTY A & T
CARTOGRAPHY

WASHINGTON COUNTY
OREGON

) BY WASHINGTON COUNTY ASSESSOR'S OFFICE

Department of Assessment & Taxation • Elections Division
2925 NE Aloclek Dr., Suite 170, MS-3, Hillsboro, OR 97124-7523
503-846-5800 • fax: 503-846-5810 • www.washcovotes.org
elections@washingtoncountyor.gov

)F PROPERTY OWNERSHIP

(le Majority Method)

I hereby certify that the attached petition for annexation of the territory described therein to the City of Tigard contains the names of the owners* of a majority of the land area of the territory to be annexed, as shown on the last available complete assessment role.

NAME:_____

TITLE:_____

DEPARTMENT:_____

COUNTY OF:_____

DATE:_____

* indicates that "Owner" means the owner of the title to real property or the contract purchaser of real property.

THIS SECTION IS TO BE COMPLETED BY WASHINGTON COUNTY ELECTIONS OFFICE

CERTIFICATION OF REGISTERED VOTERS

I hereby certify that the attached petition for annexation of territory described herein to the City of Tigard contains the names of at least a majority of the electors registered in the territory to be annexed.

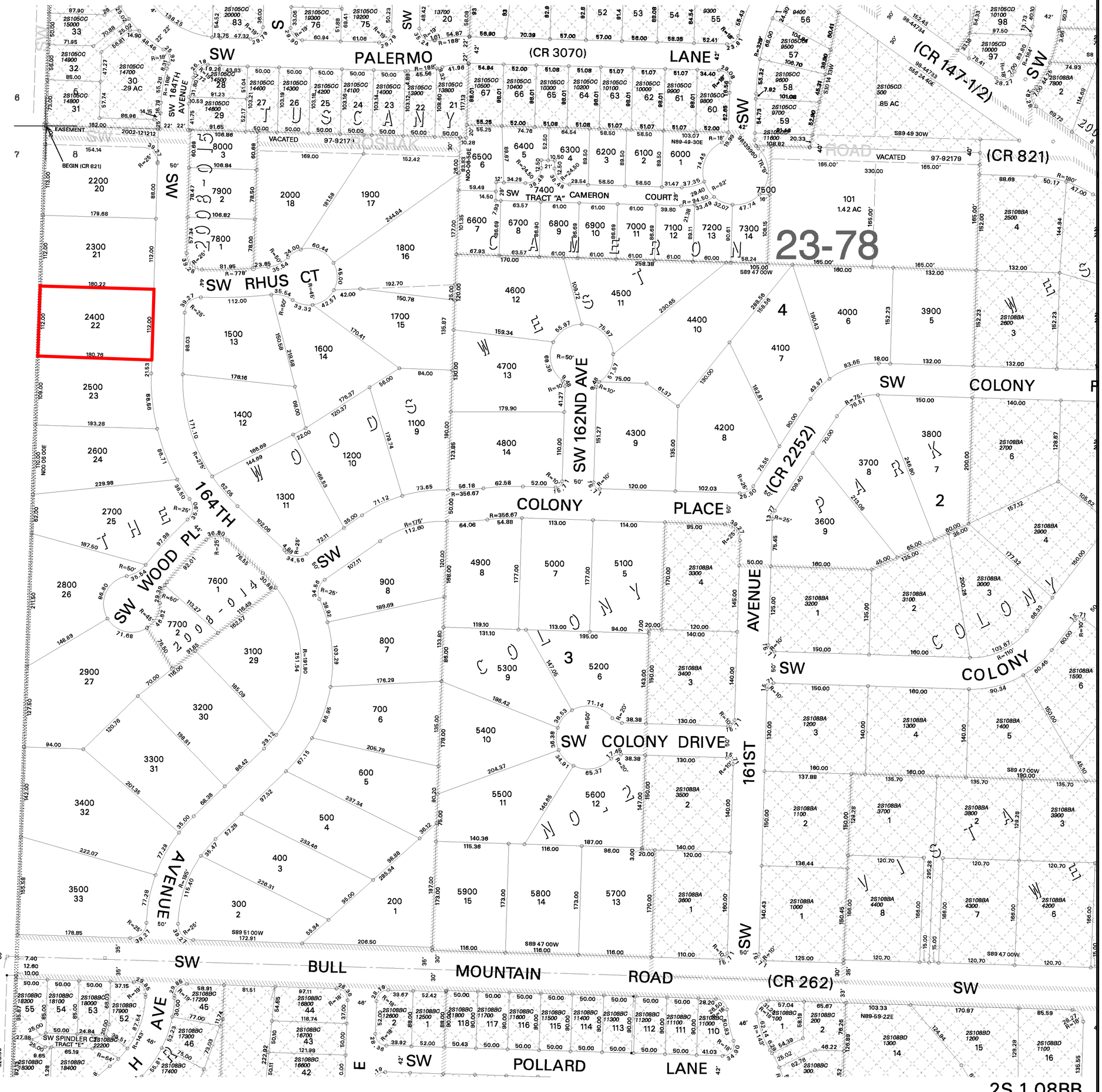
NAME: Washington County

TITLE: Admin Assistant

DEPARTMENT: Elections

COUNTY OF: WA

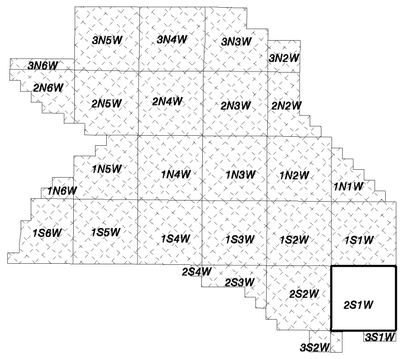
DATE: 3/6/25



dig2s1w08

2S 1 08BB

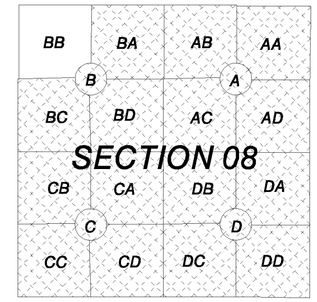
2S 1 08BB



WASHINGTON COUNTY OREGON
NW1/4 NW1/4 SECTION 08 T2S R1W W.M.
SCALE 1" = 100'

36	31	32	33	34	35	36	31
1	6	5	4	3	2	1	6
12	7	8	9	10	11	12	7
13	18	17	16	15	14	13	18
24	19	20	21	22	23	24	19
25	30	29	28	27	26	25	30
36	31	32	33	34	35	36	31
1	6	5	4	3	2	1	6

FOR ADDITIONAL MAPS VISIT OUR WEBSITE AT www.co.washington.or.us



Cancelled Taxlots For: 2S108BB
1000,102,100,3000,2100,

ANNEXATION CERTIFIED BY
WASHINGTON COUNTY
CARTOGRAPHY
3/6/2025

Assessment
CARTOGRAPHY
Taxation

PLOT DATE: September 22, 2008
FOR ASSESSMENT PURPOSES ONLY - DO NOT RELY ON FOR OTHER USE

Map areas delineated by either gray shading or a cross-hatched pattern are for reference only and may not indicate the most current property boundaries. Please consult the appropriate map for the most current information.

LEGAL DESCRIPTION FOR ANNEXATION

Lot 22, "The Woods", Washington County, Oregon

ANNEXATION CERTIFIED

BY _____

MAR 06 2025

WASHINGTON COUNTY A & T
CARTOGRAPHY