



# NOTICE OF LAND USE DECISION

Coos County Planning  
225 N. Adams St.  
Coquille, OR 97423  
<http://www.co.coos.or.us/>  
Phone: 541-396-7770  
Fax: 541-396-1022

This decision notice is required to be sent to the property owner(s), applicant(s), adjacent property owners (distance of notice is determined by zone area – Urban 100 feet, Rural 250 feet, and Resource 750 feet), special taxing districts, agencies with interest, or person that has requested notice. The development is contained within the identified property owners land. Notice is required to be provided pursuant to ORS 215.416. Please read all information carefully as this decision. (See attached vicinity map for the location of the subject property).

NOTICE TO MORTGAGEE, LIENHOLDER, VENDOR OR SELLER: ORS CHAPTER 215 (ORS 215.513) REQUIRES THAT IF YOU RECEIVE THIS NOTICE, IT MUST PROMPTLY BE FORWARDED TO THE PURCHASER.

Date of Notice: **Friday, June 12, 2020**

File No(s): ACU-20-004

Proposal: Request for approval to change the residential use to a vacation rental.

Applicant(s)/Owner(s): Jonathan & Catherine Lamoureux

Staff Planner: Amy Dibble, Planner II

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Decision: **Approved with Conditions.** All decisions are based on the record. This decision is final and effective at close of the appeal period unless a complete application with the fee is submitted by the Planning Department at 12 p.m. on **Monday, June 29, 2020**. Appeals are based on the applicable land use criteria. Vacation Rental reviews are subject to Coos County Zoning and Land Development Ordinance (CCZLDO) Sections 4.3.210.87 *Categories and Review Standards – Vacation Rentals*. **Civil matters including property disputes outside of the criteria listed in this notice will not be considered. For more information please contact the staff planner listed in this notice.**

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### Property Information

Account Numbers	2919800
Map Numbers	29S1501CB-03800
Property Owners	LAMOUREUX, JONATHAN V & CATHERINE A 4800 COLEMAN CREEK RD MEDFORD, OR 97501-9657
Situs Addresses	54219 ROHRER DR BANDON, OR 97411
Acreages	0.16 Acres
Zoning(s)	CONTROLLED DEVELOPMENT-10 (CD-10)
Special Development Considerations and Overlays	ARCHAEOLOGICAL SITES (ARC) BANDON AIRPORT CONICAL ZONE (ABC) BANDON URBAN GROWTH BOUNDARY (BGB) BEACHES/DUNES - LIMITED (BDL) NATURAL HAZARD - TSUNAMI (NHTHO) NATURAL HAZARD - WILDFIRE (NHWF)

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This notice shall be posted from June 12, 2020 to June 29, 2020

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The purpose of this notice is to inform you about the proposal and decision, where you may receive more information, and the requirements if you wish to appeal the decision by the Director to the Coos County Hearings Body. Any person who is adversely affected or aggrieved or who is entitled to written notice may appeal the decision by filing a written appeal in the manner and within the time period as provided below pursuant to Coos County Zoning and Land Development Ordinance (CCZLDO) Article 5.8. If you are mailing any documents to the Coos County Planning Department the address is 250 N. Baxter, Coquille OR 97423. Mailing of this notice to you precludes an appeal directly to the Land Use Board of Appeals.

Mailed notices to owners of real property required by ORS 215 shall be deemed given to those owners named in an affidavit of mailing executed by the person designated by the governing body of a county to mail the notices. The failure of the governing body of a county to cause a notice to be mailed to an owner of a lot or parcel of property created or that has changed ownership since the last complete tax assessment roll was prepared shall not invalidate an ordinance.

Staff tries to post all applications on the website at the following link:<http://www.co.coos.or.us/Departments/Planning/PlanningDepartment-Applications2020.aspx>.

The application and all documents and evidence contained in the record, including the staff report and the applicable criteria, are available for inspection, at no cost, in the Planning Department located at 225 North Adams Street, Coquille, Oregon. Copies may be purchased at a cost of 50 cents per page. The decision is based on the application submittal and information on record. The name of the Coos County Planning Department representative to contact is Amy Dibble, Planner II and the telephone number where more information can be obtained is (541) 396-7770.

Failure of an issue to be raised in a hearing, in person or in writing, or failure to provide statements of evidence sufficient to afford the Approval Authority an opportunity to respond to the issue precludes raising the issue in an appeal to the Land Use Board of Appeals.

Reviewed by: *Amy Dibble* Date: Thursday, June 11, 2020 .  
Amy Dibble, Planner II

**This decision is authorized by the Coos County Planning Director, Jill Rolfe based on the staff's analysis of the Findings of Fact, Conclusions, Conditions of approval, Application and all evidence associated as listed in the exhibits.**

EXHIBITS

Exhibit A: Conditions of Approval

Exhibit B: Vicinity Map

**The Exhibits below are mailed to the Applicant. Emailed copies of the exhibits are provide to the Board of Commissioners, Planning Commission and Department of Land Conservation and Development. Copies are available upon request or at the following by contacting the Planning Department or by visiting the website:<http://www.co.coos.or.us/Departments/Planning/PlanningDepartment-Applications2020.aspx>; however if not found on the webpage please contact staff for further instructions on viewing the official record in this matter as the website is not the official record. If you have any questions please contact staff at (541) 396-7770.**

Exhibit C: Staff Report -**Findings of Fact and Conclusions**

Exhibit D: Comments Received (no comments were received)

Exhibit E: Application

### **EXHIBIT "A"**

The applicant shall comply with the following conditions of approval with the understanding that all costs associated with complying with the conditions are the responsibility of the applicants and that the applicants are not acting as an agent of the county. If the applicant fails to comply or maintain compliance with the conditions of approval the permit may be revoked as allowed by the Coos County Zoning and Land Development Ordinance. Please read the following conditions of approval and if you have any questions contact planning staff.

### **CONDITIONS OF APPROVAL**

The applicant has met the criteria for a Vacation Rental, with the following conditions:

1. The applicant shall submit evidence that they have developed noise restriction on the use of the vacation rental to ensure that use remains compatible with the residential neighborhood.
2. A deed restriction shall be recorded with the Coos County Clerk's Office acknowledging that this is an accessory use to the approved residential use.
3. Pursuant to CCZLDO § 5.9.100, a Zoning Compliance Letter shall be required prior to the use of the dwelling as a vacation rental on the property.
4. All applicable federal, state, and local permits shall be obtained prior to the commencement of any development activity.
5. Pursuant to CCZLDO § 4.3.110.10(a) the applicant shall obtain a license from the Coos County Health Department in accordance with ORS 446.310-350.

**EXHIBIT "B"**  
**VICINITY MAP**



**COOS COUNTY PLANNING DEPARTMENT**

Mailing Address: 250 N. Baxter, Coos County Courthouse, Coquille, Oregon 97423

Physical Address: 225 N. Adams, Coquille Oregon

Phone: (541) 396-7770

Fax: (541) 396-1022/TDD (800) 735-2900



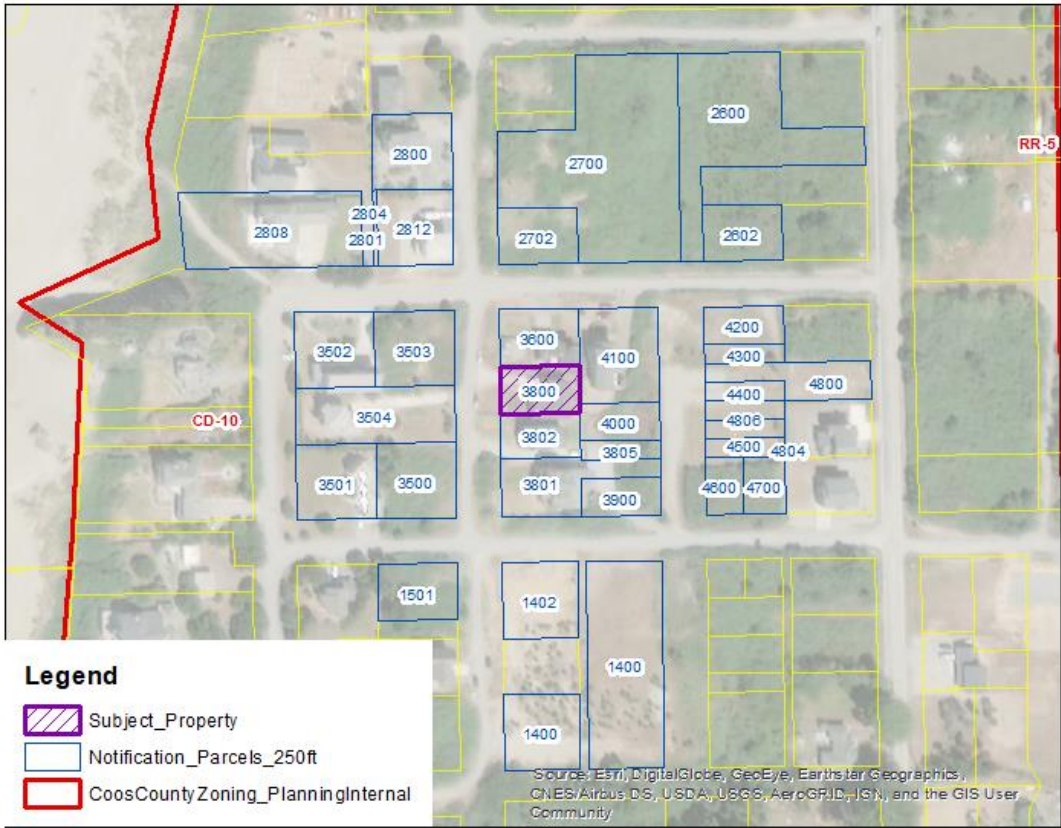
File: ACU-20-004

Applicant/  
Owner: Jonathan & Catherine Lamoureux

Date: March 21, 2020

Location: Township 29S Range 15W  
Section 01CB TL 3800

Proposal: Administrative Conditional Use



**EXHIBIT “C”  
STAFF REPORT**

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**A. ARTICLE 4.2 – ZONING PURPOSE AND INTENT**  
**SECTION 4.2.200 MIXED COMMERCIAL-RESIDENTIAL**

*Controlled Development (CD)*

*The intent of the Controlled Development is to reserve areas that are experiencing or are projected to experience limited conversion of residential areas to commercial uses. Urban Growth Areas include Urban Growth Boundaries (UGB) and Urban Unincorporated Communities (UUC) that were developed to urban levels of development and could be included in an Urban Growth Boundary expansion in the future. This designation is applied to specific portions of the following Urban Growth Areas: Bandon, Charleston, Barview and Bunker Hill.*

*There are two different controlled development zoning districts: Controlled Development-5 (CD-5) and Controlled Development-10 (CD-10).*

*The purpose of the “CD-5” and “CD-10” district is to recognize the scenic and unique quality of selected areas within Urban Growth Boundaries, to enhance and protect the unique “village atmosphere,” to permit a mix of residential, commercial, and recreational uses and to exclude those uses which would be inconsistent with the purpose of this district, recognizing tourism as a major component of the County’s economy.*

**B. SPECIAL DEVELOPMENT CONSIDERATIONS AND OVERLAYS:**

*SECTION 4.11.125 Special Development Considerations: The considerations are map overlays that show areas of concern such as hazards or protected sites. Each development consideration may further restrict a use. Development considerations play a very important role in determining where development should be allowed in the Balance of County zoning. The adopted plan maps and overlay maps have to be examined in order to determine how the inventory applies to the specific site*

*SECTION 4.11.200 Purpose: Overlay zones may be super-imposed over the primary zoning district and will either add further requirements or replace certain requirements of the underlying zoning district. The requirements of an overlay zone are fully described in the text of the overlay zone designations. An overlay zone is applicable to all Balance of County Zoning Districts and any zoning districts located within the Coos Bay Estuary Management Plans when the Estuary Policies directly reference this section.*

The proposal does not include development; therefore, the not requiring the special development considerations and overlays to be addressed.

**C. SITE DESCRIPTION AND SURROUNDING USES:**

The property is located in the Controlled Development -10 (CD-10) zoning district and is 0.16 acres in size and borders Rohrer Drive to the west. The property consists of a single family dwelling, a septic system with the City of Bandon providing water service. The property is accessed off of Rohrer Drive.

The adjacent properties to the north, south, and east share the same zoning designation and contain residential development. The properties located to the west of Rohrer Drive are also within the CD-10 zoning district and are either undeveloped or contain residential development. All properties are smaller in size and contain little vegetation.

**D. COMMENTS:**

- a. **PUBLIC AGENCY:** This application request did not require any request for comments prior to the release of the decision.

- b. **PUBLIC COMMENTS:** This application request did not require any request for comments prior to the release of the decision.
- c. **LOCAL TRIBE COMMENTS:** This application request did not require any request for comments prior to the release of the decision.

**E. LAWFULLY CREATED UNIT OF LAND:** This property is lot of the Sunset City Subdivision which is a pre-existing subdivision; therefore, this is a lawfully created unit of land.

**II. STAFF FINDINGS AND CONCLUSIONS:**

**a. SUMMARY OF PROPOSAL AND APPLICABLE REVIEW CRITERIA:**

The proposal is for Planning Director Approval to change the existing residential use to a vacation rental.

**b. Key definitions:**

*Compatibility: Compatibility means that the proposed use is capable of existing together with the surrounding uses without discord or disharmony. The test is where the proposed use is compatible with the existing surrounding uses, and not potential or future uses in the surround area. The surrounding area consists of the notification area for the project as set out in § 5.0.900.*

**c. Criteria and standards for Vacation Rentals**

**I. Vacation Rentals**

- **Section 4.3.200 Zoning Tables for Urban and Rural Residential, mixed Commercial-Residential, Commercial, Industrial, Minor Estuary and South Slough**

*The table indicates the type of review process that is required. Remember that CU is an conditional use review and the letter prior explain what level of conditional use is required (A = administrative and H=Hearing)*

*As used in the zoning tables the following abbreviations are defined as:*

- *“P” Permitted and requires no review from the Planning Department. No review is required but other agencies may have requirements.*
- *“CD” Compliance Determination review (permitted with standards) with clear and objective standards (Staff review usually referred to as Type I process or ministerial action). These uses are subject to development standards in sections 4.3.22, 4.3.230 and notices requesting comments may be provided to other agencies as result. The process takes a minimum of 30 days to complete. Industrial zones may require additional review. All structures and uses shall meet the applicable Development and Siting Criteria or Special Development Considerations and Overlays for the zoning district in which the structure will be sited.*
- *“ACU” Administrative Conditional Use (Planning Director’s Decision usually referred to as a Type II Process)*
- *“HBCU” Hearing Body Conditional Use (Planning Commission, Board of Commissioner or Hearings Officer Decision usually referred to as a Type III Process)*
- *“PLA” Property Line Adjustments subject to standards found in Chapter 6.*
- *“P”, “SUB”, “PUD” = Partition, Subdivision, Planned Unit Development that require Land Division Applications subject to standards found in Chapter 6.*
- *The “Subject To” column identifies any specific provisions of Section 4.3.210 to which the use is subject.*
- *“N” means the use is not allowed.*

*The zoning table sets out Uses, Developments and Activities that may be listed in a zone and the type of review that is required within that zone. If there is a conflict between uses the more restrictive shall*

apply. Section 4.3.210 provides an explanation of the use category and the specific criteria that shall apply and if the use is identified as requiring a conditional use. Section 4.3.225 General Siting Standards apply to all regulated Uses, Developments, or Activities, but these are clear and objective standards that do not, in themselves, require a land use notice. Section 4.3.230 Specific Standards list specific siting standards by zones and 4.2.220 Additional Conditional Use Review and Standards for table 4.3.200 contains any additional criteria that applied to a Use, Development or Activity that has been identified by the following table as requiring.

#	Use	Zones												Subject To	
		Section 4.3.210 CATEGORIES & Review Standards - 4.3.220 Additional Conditional Use Review - Section 4.3.225 General Siting Standards - Section 4.3.230 Specific Standards													
		UR-1	UR-2	UR-M	RR-2	RR-5	CD	RC	C-1	IND	AO	REC	SS		MES
63.	Retail Business	N	N	N	N	N	ACU	HBCU	CD	N	N	HBCU	N	N	(75)
64.	Vacation Rentals (in an existing dwelling)	ACU	ACU	ACU	ACU	ACU	ACU	ACU	ACU	ACU	ACU	ACU	N	N	(87)

• **Section 4.3.210 – CATEGORIES and review standards**

The following categories provide a definition and specific standards that will regulate the Development, Use or Activity identified in the table above.

(87.) Vacation rental/short term rental - Subject to the following criteria:

- (a) Shall be found to be compatible with the surrounding area.
- (b) Shall be licensed by the Coos Health & Wellness (CHW) in accordance with ORS 446.310-350;
- (c) Shall meet parking access, driveway and parking standards as identified in Chapter VII;
- (d) Shall not be conveyed or otherwise transferred to a subsequent landowner without a the new property owner submitting a Compliance Determination Application showing compliance with this section; and
- (e) A deed restriction shall be recorded with the Coos County Clerk’s Office acknowledging that this is an accessory use to the approved residential use. If located within Urban Growth Boundary further restrictions may be required based on comments from the City.

**FINDING:** The primary criterion for this application is compatibility. As explained above; compatibility means that the proposed use is capable of existing together with the surrounding uses without discord or disharmony. The test is where the proposed use is compatible with the existing surrounding uses, and not potential or future uses in the surrounding area.

The properties that are within the notification area are shown below:

Map_No	Parcel_No	Dwelling	Use
29S15W01CB	2600	No	Bare Land
29S15W01CB	2602	No	Bare Land
29S15W01CB	2700	No	Bare Land
29S15W01CB	2702	No	Bare Land
29S15W01CB	2800	Yes	Vacation Rental
29S15W01CB	2801	No	Bare Land
29S15W01CB	2804	No	Bare Land
29S15W01CB	2808	Yes	Not Primary Residence
29S15W01CB	2812	Yes	Not Primary Residence
29S15W01CB	3500	No	Bare Land
29S15W01CB	3501	Yes	Vacation Rental
29S15W01CB	3502	Yes	Not Primary Residence
29S15W01CB	3503	No	Bare Land



29S15W01CB	3504	Yes	Not Primary Residence
29S15W01CB	3600	Yes	Vacation Rental
29S15W01CB	3800	Yes	Subject Property
29S15W01CB	3801	Yes	Vacation Rental
29S15W01CB	3802	Yes	Vacation Rental
29S15W01CB	3805	No	Bare Land
29S15W01CB	3900	No	Bare Land
29S15W01CB	4000	No	Bare Land
29S15W01CB	4100	Yes	Not Primary Residence
29S15W01CB	4200	No	Bare Land
29S15W01CB	4300	No	Bare Land
29S15W01CB	4400	No	Bare Land
29S15W01CB	4500	No	Bare Land
29S15W01CB	4600	No	Bare Land
29S15W01CB	4700	No	Bare Land
29S15W01CB	4800	No	Bare Land
29S15W01CB	4804	No	Bare Land
29S15W01CB	4806	No	Bare Land
29S15W01CC	1400	No	Bare Land
29S15W01CC	1402	Yes	Residence
29S15W01CC	1501	No	Bare Land

**The compatibility area for the Controlled Development 250 feet. Within that distance there are several properties with residential development with the majority of the properties are undeveloped. There are thirty-four (34) tracts of land within the buffer. Within the buffer on the properties that are developed (excluding the subject property) there are five (5) Vacation Rentals, five (5) Single Family Dwellings that are not the property owners primary dwelling, and one (1) primary dwelling. The properties immediately adjacent to the subject property contain Vacation Rentals and a dwelling that is not the property owner's primary dwelling. The subject property is accessed off Rohrer Drive, which is a public dedicated road, there are several properties that access off of Rohrer Drive. The property is in close proximity to the beach and located in Bandon. Bandon is known for its tourism with several Vacation Rentals that exist both within and outside of the 250-foot compatibility area.**

**The applicant submitted a Parking Verification Permit (DR-20-019), this was approved and signed by Scott Murray, Access Foreman for the Coos County Road Department on March 2, 2020. The property owners' shall continue to comply with the parking standards and should develop a noise policy as part of the renters' agreement to ensure it remains compatible. Also, the property owner shall obtain and maintain a license from the Coos County Health Department in accordance with ORS 446.310-350.**

**The applicant shall record a deed restriction with the Coos County Clerk's Office acknowledging that this is an accessory use to the approved residential use, this will be made a condition of approval.**

### **III. DECISION:**

The proposed Vacation Rental within the Controlled Development - 10 Zoning District meets the requirements of the Coos County Zoning and Land Development Ordinance, with conditions listed in Exhibit "A" of this report.



**IV. EXPIRATION:**

The conditional use will not expire; however, if the property changes ownership the new owner will be required to submit an application to operate a Vacation Rental within the existing Single Family Dwelling.

**V. NOTICE REQUIREMENTS:**

A notice of decision will be provided to property owners within 250 feet of the subject properties and the following agencies, special districts, or parties

A Notice of Decision and Staff Report will be provided to the following:

Applicants/Owners, Department of Land Conservation and Development, Planning Commission and Board of Commissioners.

Adjacent property owners will receive a Notice of Decision and maps but all other attachments can be found by contacting the Planning Department or visiting the website. If not found on the website the public may contact the department to view the official record.

**EXHIBIT "E"**  
**Application**

LAND USE PERMIT APPLICATION – BALANCE OF COUNTY  
COOS COUNTY PLANNING DEPARTMENT

COMPLETED BY STAFF	
Received By: <u>  JMB  </u>	<input type="checkbox"/> COMP PLAN AMENDMENT
Date Submitted: <u>  2/24/20  </u>	<input type="checkbox"/> ZONE CHANGE
Application No.: <u>  ACU-20-004  </u>	<input type="checkbox"/> TEXT AMENDMENT
Fee: <u>  1174<sup>00</sup>  </u>	<b>CONDITIONAL USE REVIEW</b>
Fee Paid: <u>  1174<sup>00</sup>  </u>	<input type="checkbox"/> HEARINGS BODY
Receipt No.: <u>  214543  </u>	<input checked="" type="checkbox"/> ADMINISTRATIVE
	<input type="checkbox"/> VARIANCE
	<input type="checkbox"/> LAND DIVISION *
	<input type="checkbox"/> HAZARD REVIEW *
	<input type="checkbox"/> FARM OR FOREST REVIEW *
	<input type="checkbox"/> FAMILY/MEDICAL HARDSHIP*
	<input type="checkbox"/> HOME OCCUPATION/COTTAGE INDUSTRY
	<b>*Supplemental Application required</b>
	STAFF NOTES:

Please type or clearly print all of the requested information below. Please be sure to include any supplemental application for if required.

**I. APPLICANT**

Name:   Jonathan Lamoureux  
Catherine Lamoureux  

Mailing Address:

  4800 Coleman Creek Road    
City State Zip  
  Medford Oregon 97501  

Daytime Phone

  831-297-2913  

Email:

  Catherineziehl@yahoo.com  

**II. OWNER(S)**

Name:   Jonathan Lamoureux  
Catherine Lamoureux  

Mailing Address:

  SAME    
City State Zip

Daytime Phone

Email:

**III. PROPERTY** - If multiple properties are part of this review please check here  and attached a separate sheet with property information.

Location or Address:

  54219 Rohrer Rd., Bandon, OR 97411  

No. Acreage

  0.16  

Tax Acct.

  2919800  

Township: Range: Section: ¼ Section: 1/16 Section: Tax lot:

  29S 15W 1CB  

  3800  

Zone:   UGB  

Water Service Type:

  City of Bandon  

Sewage Disposal Type:

  Septic  

School District:

  Bandon  

Fire District:

  Bandon Rural Fire District.  

**IV. REQUEST SUMMARY** (Example: "To establish a template dwelling in the Forest Zoning District.")



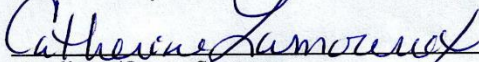
V. ATTACHED WRITTEN STATEMENT. With all land use applications, the "burden of proof" is on the applicant. It is important that you provide information that clearly describes the nature of the request and indicates how the proposal complies with all of the applicable criteria within the Coos County Zoning and Land Development Ordinance (CCZLDO). You must address each of the Ordinance criteria on a point-by-point basis in order for this application to be deemed complete. A planner will explain which sections of the Ordinance pertain to your specific request. The information described below is required at the time you submit your application. The processing of your application does not begin until the application is determined to be complete. An incomplete application will postpone the decision, or may result in denial of the request. Please mark the items below to ensure your submittal is complete.

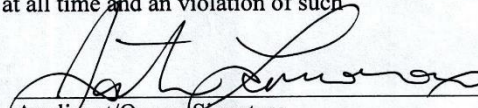
Application Check List: Please make off all steps as you complete them.

- A.  A written statement of intent, attached to this application, with necessary supporting evidence which fully and factually describes the following:
1.  A complete explanation of how the request complies with the applicable provisions and criteria in the Zoning Ordinance. A planner will explain which sections of the Ordinance pertain to your specific request. You must address each of the Ordinance criteria on a point-by-point basis in order for this application to be deemed complete.
  2.  A description of the property in question, including, but not limited to the following: size, vegetation, crops grown, access, existing buildings, topography, etc.
  3.  A complete description of the request, including any new structures proposed.
  4.  If applicable, documentation from sewer and water district showing availability for connection.
- B.  A plot plan (map) of the property. Please indicate the following on your plot plan:
1.  Location of all existing and proposed buildings and structures
  2.  Existing County Road, public right-of-way or other means of legal access
  3.  Location of any existing septic systems and designated repair areas
  4.  Limits of 100-year floodplain elevation (if applicable)
  5.  Vegetation on the property
  6.  Location of any outstanding physical features
  7.  Location and description (paved, gravel, etc.) of vehicular access to the dwelling location
- C.  A copy of the current deed, including the legal description, of the subject property. Copies may be obtained at the Coos County Clerk's Office.

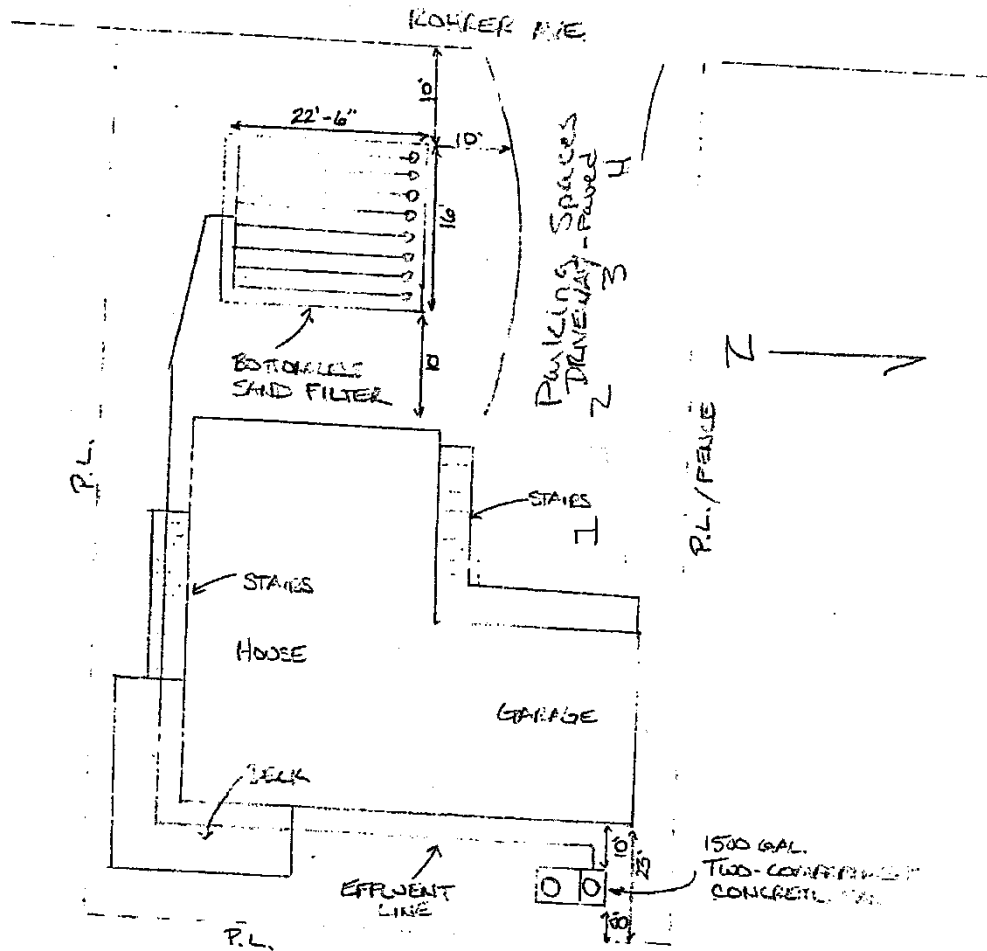
I certify that this application and its related documents are accurate to the best of my knowledge. I am aware that there is an appeal period following the date of the Planning Director's decision on this land use action. I understand that the signature on this application authorizes representatives of the Coos County Planning Department to enter upon the subject property to gather information pertinent to this request. If the application is signed by an agent, the owner's written authorization must be attached.

If this application is refereed directly to a hearings officer or hearings body I understand that I am obligated to pay the additional fees incurred as part of the conditions of approval. I understand that I/we are not acting on the county's behalf and any fee that is a result of complying with any conditions of approval is the applicants/property owner responsibility. I understand that conditions of approval are required to be complied with at all time and an violation of such conditions may result in a revocation of this permit.

  
Applicant/Owner Signature

  
Applicant/Owner Signature

Provide a Site Plan in the space below: Show the actual or best estimate measurements of components that were confirmed during this evaluation; septic tank, soil absorption system, property lines (if known), easements (if known), existing structures, driveways, and water supply (water lines and wells). Draw to scale and indicate the direction north.



Parking:  
The driveway will  
accommodate four vehicles.

\* NOT TO SCALE

1-30-2020

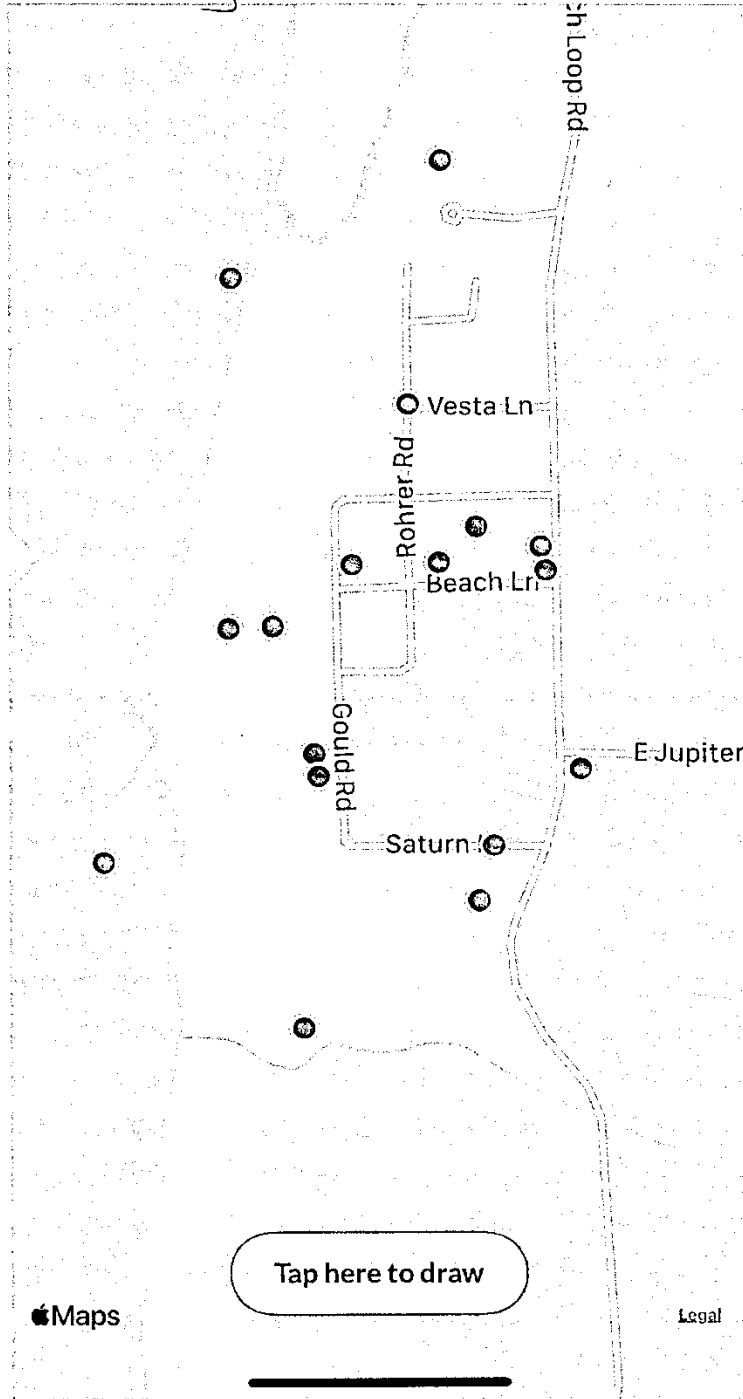
1:47



HomeAway vacation rental listings  
in the Sunset City area.

Filter by map

Cancel



RECORDING REQUESTED BY:



1010 1st Street, Ste 215  
Bandon, OR 97411

GRANTOR'S NAME:  
Joyce A. E. Taylor, Trustee of the Taylor 2000 Living Trust

GRANTEE'S NAME:  
Jonathan V. Lamoureux and Catherine A. Lamoureux

AFTER RECORDING RETURN TO:  
Order No.: 360819029355-JF  
Jonathan V. Lamoureux and Catherine A. Lamoureux  
4800 Coleman Creek Road  
Medford, OR 97501

SEND TAX STATEMENTS TO:  
Jonathan V. Lamoureux and Catherine A. Lamoureux  
4800 Coleman Creek Road  
Medford, OR 97501

APN: 2918600  
Map: 29S-15W-1CB TL 3800  
5421B Rohrer Road, Bandon, OR 97411

Coos County, Oregon **2020-00802**  
**\$91.00 Pgs=2 01/22/2020 01:06 PM**  
eRecorded by: TICOR TITLE COOS BAY  
Debbie Heller, CCC, Coos County Clerk

SPACE ABOVE THIS LINE FOR RECORDER'S USE

**STATUTORY WARRANTY DEED**

Joyce A. E. Taylor, Trustee of the Taylor 2000 Living Trust, Grantor, conveys and warrants to Jonathan V. Lamoureux and Catherine A. Lamoureux, as tenants by the entirety, Grantee, the following described real property, free and clear of encumbrances except as specifically set forth below, situated in the County of Coos, State of Oregon:

Lots 18, 19 and the North half of Lot 17, Block 16, SUNSET CITY, Coos County, Oregon.  
Together with any portion of the vacated alley which was vacated by Vacation No. 497 recorded January 29, 1993 bearing Instrument No. 93-01-1071, Records Coos County, Oregon which would inure thereto by reason of the vacation thereon.

Beginning at the Southwest corner of the North half of Lot 17, Block 16, Plat of Sunset City, Town Plat Records, Coos County, Oregon; thence North 89° 04' 42" East, along the North line of said North half of Lot 17, 106.00 feet to the center of the vacated alley in said Block 16; thence South 00° 55' 18" East along said centerline of the alley, 5.00 feet to an iron rod; thence North 88° 13' 16" West, 106.12 feet to the point of beginning.

THE TRUE AND ACTUAL CONSIDERATION FOR THIS CONVEYANCE IS FOUR HUNDRED FORTY THOUSAND AND NO/100 DOLLARS (\$440,000.00). (See ORS 93.030).

Subject to:

- Any irregularities, reservations or other matters in the proceedings occasioning the abandonment or vacation of the street/road named below:  
Name: alley  
Certified Copy of Resolution – Recording Date: January 29, 1993  
Certified Copy of Resolution – Recording No: 93-01-1071
- Easement(s), Covenant and Servitudes, for the purpose(s) shown below and rights incidental thereto, as granted in a document:  
Granted to: State of Oregon through its Department of Environmental Quality  
Purpose: on site sewage disposal system  
Recording Date: August 21, 1998  
Recording No: 1998-55519

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010. THIS INSTRUMENT DOES NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 OR 215.010, TO VERIFY THE APPROVED USES OF THE LOT OR PARCEL, TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES, AS DEFINED IN ORS 30.930, AND TO INQUIRE

# Existing System Evaluation Report for Onsite Wastewater Systems



State of Oregon Department of Environmental Quality  
Onsite Program  
165 East Seventh Ave, Suite 100  
Eugene, OR 97401

Please answer the following questions completely. Do not leave any blank responses. Write unknown if unknown. Refer to Oregon Administrative Rule 340-071-0155 for more information, and please visit: <http://www.oregon.gov/deq/Residential/Pages/Septic-Smart.aspx>

## Septic System Owner-Provided Information:

Property Owner(s)(Sellers): Joyce A.E. Taylor Living Trust Telephone: \_\_\_\_\_  
Site Address: 54219 Rohrer Ave. City: Bandon Zip Code: 97411  
County: Coos Lot Size: 0.16 acres Acres/Square Feet (circle units) \_\_\_\_\_  
Legal Description: 29S 15W 01CB Tax Lot: 3800  
Age of wastewater treatment system 1999 (years) Is there a service contract for system components? UNK  
Date the septic tank was last pumped UNK (please attach receipt if available)  
Number of people occupying dwelling UNK If unoccupied, for how long has it been vacant? \_\_\_\_\_  
Was this section completed by the evaluator because owner or agent was unavailable? Yes  
The above information is true and to the best of my knowledge.  
11/27/2019 /s/ Johnathen Himmelrick  
Date (MM/DD/YYYY) Signature of Owner, or agent if present

Name of person performing evaluation (please print): \_\_\_\_\_

### Certification:

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Installer                                   | <input type="checkbox"/> Professional Engineer           |
| <input checked="" type="checkbox"/> Maintenance Provider                        | <input type="checkbox"/> Environmental Health Specialist |
| <input type="checkbox"/> National Association of Wastewater Technicians         | <input type="checkbox"/> Waste Water Specialist          |
| <input type="checkbox"/> Other: DEQ approved in writing (please describe) _____ |  |

Certification Number: RI-689, M260

Business name South Coast Septic Email southcoastseptic@gmail.com

Business address 50414 Hwy 101, Bandon, OR 97411 Phone 541-347-6529

Date of Evaluation: 11/21/2019 (MM/DD/YYYY)

I hereby certify, by my signature, that I meet all of the qualifications required to perform onsite wastewater system evaluations in the state of Oregon pursuant to OAR 340-071-0155.

11/27/2019 /s/ Johnathen Himmelrick  
Date (MM/DD/YYYY) Signature of Qualified Septic System Evaluator



1. **General System Information**

The Existing System Evaluation Report form contains 8 pages. Some of the questions on this form may not pertain to the system being evaluated, as there are many system designs. If you (the septic system evaluator) are unable to answer any of the questions on this form please indicate, in writing, why this information was not available at the time the evaluation was completed.

- The existing septic system consists of (check all that apply):

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Septic Tank | <input type="checkbox"/> Cesspool                       |
| <input checked="" type="checkbox"/> Dosing Tank | <input type="checkbox"/> Disposal Trenches/ Leach Lines |
| <input type="checkbox"/> Multi-compartment Tank | <input type="checkbox"/> Capping Fill                   |
| <input type="checkbox"/> Seepage Bed            | <input checked="" type="checkbox"/> Sand Filter         |
| <input type="checkbox"/> Other _____            |   |

**Note:** Cesspools may be used only to serve existing sewage loads and if failing only be replaced with a seepage pit system on lots that are too small to accommodate a standard system or other alternative onsite system.

There is a permit for the septic system Yes No Unknown

- Permit Number(s) 698-038
- Year original septic system installed: 1999 (YYYY) No record of installation date
- Dates of subsequent repairs or alterations: \_\_\_\_\_ (YYYY)
- All plumbing fixtures are connected to the septic system Yes No Unknown

If you answered "No" or "unknown," please describe below:

Unoccupied

- **Additional Comments:**

Recommend tank be pumped due to 10" scum layer.

2. **Overall Septic System Status**

- Discharge of sewage to the ground surface Yes No None observed
- Discharge of sewage to surface waters Yes No None observed
- Sewage backup into plumbing fixtures Yes No Unknown
- Additional Comments:

3. **Septic tank**

In order to fully describe the condition of the tank, the septic tank may need to be pumped. Please indicate below if the septic system tank was pumped during the course of *this* evaluation.

- Septic tank was pumped during the course of *this* evaluation Yes No
- If the septic tank was **NOT** pumped during the course of *this* evaluation, please explain (e.g. septic system owner declined to have the tank pumped etc):

Not requested at time of inspection.

• The septic tank material is:

- Concrete
- Steel
- Plastic
- Fiberglass
- Other (explain) \_\_\_\_\_
- Unknown

• Is the septic tank accessible?  Yes  No

• Septic tank volume in gallons 1500

• Tank volume determined by: Check all that apply, add comments below as needed

Permit Records  Measured  Stamped on Tank  Other

• Septic tank risers are at ground level  Yes  No

• Tank appears to be free from defects, leaking and signs of deterioration  Yes  No

If you answered "No," please describe the condition of the septic tank below. For example, evidence of gas corrosion, cracks, leaks, etc.

• Septic tank lid(s) is intact  Yes  No

• Septic tank baffles are intact: Inlet  Yes  No Outlet  Yes  No

• Baffle material - Inlet  Plastic  Concrete  Metal Outlet  Plastic  Concrete  Metal  
Effluent filter is present  Yes  No

• Effluent filter is free of debris  Yes  No  Not Applicable

• Liquid level in tank relative to invert of outlet  At  Above  Below

If above or below invert outlet, please explain: \_\_\_\_\_

• Scum layer 10" (inches) Sludge layer see right (inches) sludge in bottom of outlet line

• Scum and Sludge layer more than 35% of the total tank volume  Yes  No

Indicate where sludge measured from:  Inlet  Middle  Outlet

• Additional Comments:

Inspection of outlet baffle is not complete due to high sludge levels. Recommend tank be pumped.

4. Dosing tank / Pump Basin

Dosing tanks use a pump to send effluent to a treatment unit or a soil absorption field.

• The septic system has a dosing tank  Yes  No

(If "No," skip the rest of section 4)

• At the time of this evaluation the power was on to test the pump(s):  Yes  No

- Dosing tank capacity 500 (gallons)
- Tank volume determined by: Check all that apply, add comments below as needed  
 Permit Records  Measured  Stamped on Tank  Other
- Dosing tank material two compartment tank
- Dosing tank appears to be watertight and in good condition  Yes  No
- Dosing tank lid is intact  Yes  No
- Electrical components are sealed and watertight  Yes  No
- Pump/ siphon is functional  Yes  No
- Type of Pump  Demand dose  Time dose
- Pump control mechanism is functional (floats, pressure transducer)  Yes  No
- There is a high water alarm  Yes  No
- The high water alarm (audible and visual) is working  Yes  No  Not Applicable
- Type of screen \_\_\_\_\_
- Screen is clean and free of debris  Yes  No - Screen cleaned for this evaluation  Yes  No
- Scum/ sludge present in Dosing tank  Yes  No
- Scum layer 12" (inches) Sludge layer \_\_\_\_\_ (inches)
- Additional Comments:  
There is gorse taking over the septic tank area. Gorse is a deep and invasive rooted plant; recommend extraction.

**5. Soil absorption system**

The soil absorption system is a set of trenches that receives effluent from the septic tank and filters the effluent before it enters the groundwater.

- The septic system has a soil absorption system  Yes  No  Unknown
- Was the soil absorption system part of the evaluation?  Yes  No  See note below  
If the soil absorption system was not evaluated, please explain below (for example unable to locate, client did not authorize this part of the evaluation):  
\_\_\_\_\_
- Absorption distribution  Equal  Serial  Pressure  Equal via pressure
- Absorption lines construction material:  
 Gravel and pipe  Chamber  Tile  Polystyrene foam and pipe  Other \_\_\_\_\_
- Absorption distribution unit(s):  dropbox  hydrosplitter  equal distribution box
- Intact  Damaged  N/A
- Absorption distribution unit(s) are free of debris or solids  Yes  No  N/A

- Locate all drain lines in soil absorption system  Yes  No  
Total length of drain lines \_\_\_\_\_ (ft)  
Lengths determined by  Physically uncovering portions of system/probing  Written records  
 Fish tape  Electronic locator  camera
- Absorption area appears to be free from roads, vehicular traffic, structures, livestock, deep-rooted plants etc.  
 Yes  No

If you answered "No," please describe below:

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- Absorption area appears to be free from surface water runoff and down spouts  Yes  No
- Evidence of ponding in absorption area or distribution unit(s)  Yes  No
- The soil absorption system replacement area assigned in the permit record appears to be intact:  
 Yes  No  Replacement area not identified in permit record

If you answered "No," please explain below:

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- Additional Comments:

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6. Sand Filter System

There are different sand filter system designs used in Oregon. Not every sand filter system will contain all of the components mentioned below, e.g. pumps. The owner of a sand filter system permitted on or after January 2, 2014 must maintain an annual service contract with a certified Maintenance Provider. Maintenance records should be available from the system owner, or the contracted Maintenance Provider. Please attach copies of the previous two years of maintenance records to this evaluation form.

- The septic system has a sand filter  Yes  No

(If "No," skip the rest of section 6)

- Type of sand filter

- Intermittent
- Recirculating
- Bottomless

- Sand filter container appears free from defects, leaks and signs of deterioration:  Yes  No

- Sand filter unit appears to be free from roads, vehicular traffic, structures, livestock, deep-rooted plants etc.

Yes  No

If you answered "No," please describe below:

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- Sand filter appears to be free from surface water runoff and down spouts  Yes  No
- Evidence of ponding in/ on sand filter media surface  Yes  No
- Surface access to manifold and valves  Yes  No
- Monitoring ports are present  Yes  No
- Lateral lines flushed and equal distribution verified  Yes  No
- The sand filter has a pump  Yes  No  
(If "No", skip the rest of section 6)
- Pump vault appears to be watertight and in good condition  Yes  No  N/A
- Pump is functional  Yes  No
- Pump control mechanism is functional (floats, pressure transducer)  Yes  No
- High water alarm in pump vault (audible and visual) is working  Yes  No
- Pump electrical components are sealed and watertight  Yes  No

- Additional Comments:

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**7. Alternative Treatment Technology System**

The owner of an ATT system *must* maintain an annual service contract with a certified Maintenance Provider. Maintenance records should be available from the system owner, or the contracted Maintenance Provider. Please attach copies of the previous two years of maintenance records to this evaluation form.

**Note\*** Some ATT systems may have a WPCF permit. Please contact the local Health Department or the DEQ to obtain a copy of the WPCF permit.

- The septic system has an Alternative Treatment Technology (ATT)  Yes  No  
(If "No," skip the rest of section 7)
- Please provide the product name, system ID number, and manufacturer name below:

Product name \_\_\_\_\_  
System ID number \_\_\_\_\_  
Manufacturer name \_\_\_\_\_

- Previous two years of maintenance records are available  Yes  No  
If you answered "No," please explain below:

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- Previous two years of maintenance records are attached to this form  Yes  No  
If you answered "No," please explain below:

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- Additional Comments:

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- 8. Please attach a copy of the following items to this form. Contact the DEQ, or the local Health Department to locate these items.

- The septic system permit(s) to this form, if available
- The as-built drawing(s) to this form, if available
- The Certificate of Satisfactory Completion to this form, if available
- Additional Comments:

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- 9. Provide a Site Plan

- Please provide a sketch of the complete system (show only system components that were evaluated) on page 8 of this form, if a copy of the original "as-built" drawing is *not* available.
- Please provide a sketch of the complete system on page 8 of this form if the original "as-built" drawing is *not* accurate or representative of the existing system.
- If the original "as-built" drawing is available for copy, and the original appears to be accurate and representative of the existing system, write "see attached as-built" on page 8 of this form, redrawing the system is unnecessary.
- Additional Comments:

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- 10. Disclaimer:

This evaluation report describes the septic system as it exists on the date of evaluation and to the extent that components and operation of the system are reasonably observable. DEQ recognizes that this evaluation report does not provide assurance or any warranty that the system will operate properly in the future.

- 11. I hereby certify, by my signature, that the above information and the plot plan on the next page of this form are accurate and true to the best of my knowledge.

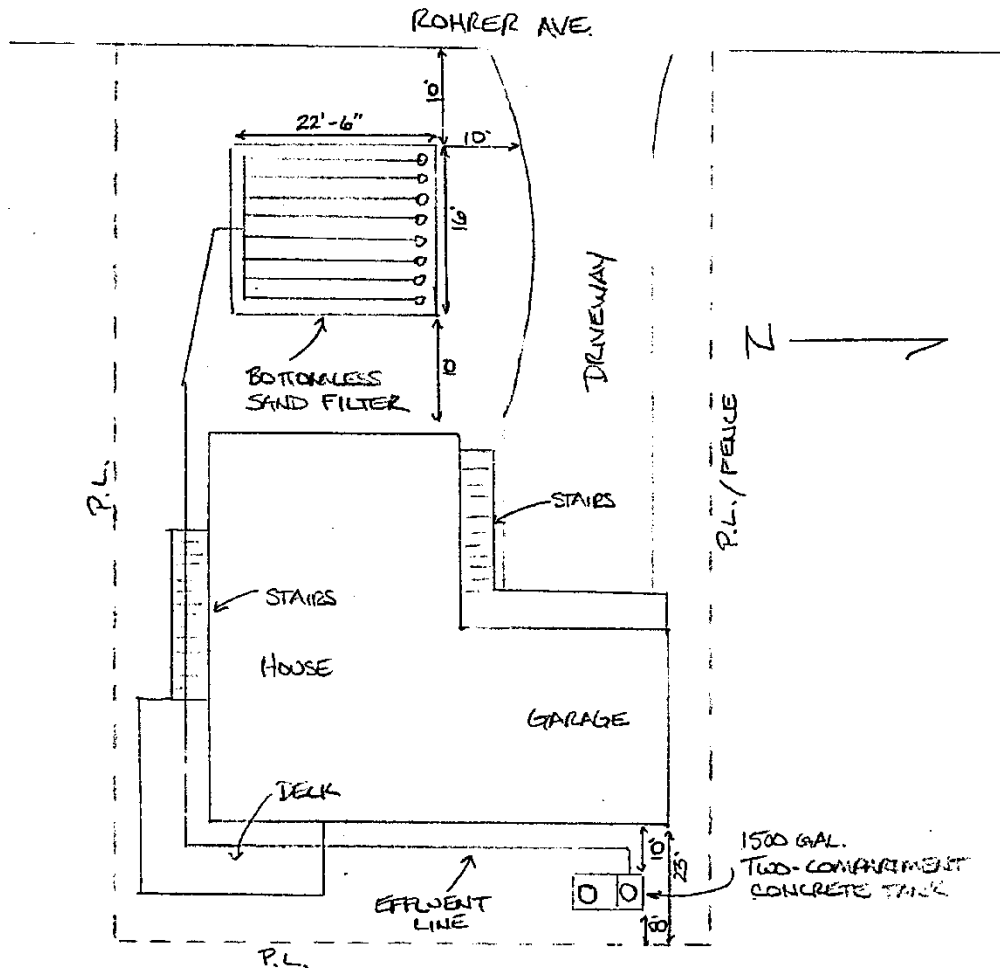
11/27/2019

Date

/s/ Johnathen Himmelrick

Signature of Qualified Septic System Evaluator

Provide a Site Plan in the space below: Show the actual or best estimate measurements of components that were confirmed during this evaluation; septic tank, soil absorption system, property lines (if known), easements (if known), existing structures, driveways, and water supply (water lines and wells). Draw to scale and indicate the direction north.



\* NOT TO SCALE