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

COMPL	ETED BY STAFF
Received By: MB	☐ COMP PLAN AMENDMENT ☐ ZONE CHANGE
Date Submitted: 11 12 19	CONDITIONAL USE REVIEW HEARINGS BODY
Application No.: FHD-19-09	ADMINISTRATIVE VARIANCE
Fee: \$75	☐ LAND DIVISION *
Fee Paid: 875	☐ HAZARD REVIEW * ☐ FARM OR FOREST REVIEW *
	FAMILY/MEDICAL HARDSHIP* HOME OCCUPATION/COTTAGE INDUSTRY
Receipt No.: 214423	*Supplemental Application required STAFF NOTES:
Please type or clearly print all of the requested i supplemental application for if required. I. APPLICANT Name: Morrison-Gederos Construction c/o Sheri Mcc	nformation below. Please be sure to include any II. OWNER(S) Grath Name: Scott Manske
Mailing Address: P.O. Box 1548	Mailing Address: P.O. Box 649
City Bandon State OR Zip 97411	City Lakeside State OR Zip 97449
Daytime Phone 541-982-9531	Daytime Phone
Email: cooscurry@gmail.com	Email: smantke Patt.net
III. PROPERTY - If multiple properties are part a separate sheet with property information.	of this review please check here and attached
Location or Address: 64282 Fairview Road, Coqui	ille, OR 97423
No. Acreage 13.76 acres	Tax Acct. 450603
Township:26 Range: 11 Section: 211/4 Section:	1/16 Section: Tax lot: 401
Zone: F	Water Service Type: Well Log COOS 57502
Sewage Disposal Type: On site septic system	
School District: Coquile	Fire District: Coos Forest Protective Association

IV. REQUEST SUMMARY (Example: "To establish a template dwelling in the Forest Zoning District.") Use an existing manufactured home as a hardship dwelling after the replacement dwelling has been constructed.

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. \(\sqrt{\sqrt{Location of all existing and proposed buildings and structures}\)
 - 2. Existing County Road, public right-of-way or other means of legal access
 - 3. \(\sum \) Location of any existing septic systems and designated repair areas
 - 4. \(\sumetextbf{Limits}\) Limits of 100-year floodplain elevation (if applicable)
 - 5. Vegetation on the property
 - 6. \(\sqrt{\sqrt{Location of any outstanding physical features}}\)
 - 7. \(\sum \) 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

Morrison-Gederos Construction, LLC CCB #178168

P.O. Box 1225 * Coos Bay, Oregon 97420 Keith Morrison 541-260-6740

CONSENT FOR REPRESENTATION

I, <u>Scott Manske</u> of <u>P.O. Box 649 in Lakeside</u>, <u>Oregon</u> give permission to Morrison-Gederos Construction to represent me on all design, permit and consulting matters concerning the property located at <u>26-11-21 TL 401 in Coos County, Oregon</u>. The site address for this property is <u>10 64282 Fairview Road in Coquille</u>, <u>Oregon</u>. The tax account for this property is <u>450603</u>.

Sheri McGrath is the direct contact for all permit application questions, plan review comments, concerns or questions, and any other information related to the above property.

RECORDING REQUESTED BY: GRANTOR: James D. Judd and K'Lynn Landmark 60110 Lee Valley Rd. Coquille, OR 97423

GRANTEE: Scott L. Manske PO Box 649 Lakeside, OR 97449

SEND TAX STATEMENTS TO: Scott L. Manske P.O. Box 649 Lakeside, OR 97449

AFTER RECORDING RETURN TO: Scott L. Manske P.O. Box 649 Lakeside, OR 97449

Escrow No: 360614011066-TTCOO42 26-11-21 401 A450603 M195497 64282 Fairview Rd Coquille, OR 97423 COOS COUNTY, OREGON

N 2014-05530 07/17/2014 01:29:67 PM

:57 PM



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AFTER RECORDING
RETURN TO
Ticor Tible Insurance
300 West Anderson Ave - Box 1075
Cooe Bay, OR 97420-0233

Jan May 1

STATUTORY WARRANTY DEED

James D. Judd and K'Lynn Landmark, not as tenants in common, but with the right of survivorship, that is the fee shall vest in the survivor of the grantees, Grantor, conveys and warrants to

Scott L. Manske, 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:

See Attached Exhibit "A"

THE TRUE AND ACTUAL CONSIDERATION FOR THIS CONVEYANCE IS \$175,000.00. (See ORS 93,030)

Subject to and excepting:

2014/15 taxes, covenants, conditions, restrictions, easements, rights of way, homeowners association assessments, if any, and matters now of record.

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 ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, 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.**

DATED: 7-15-14

360614011066-TTCOO42 Deed (Warranty-Statutory)

State of OREGON		
COUNTY of CCDS		
This instrument was acknowledged before me on	7-15	, 20_14
by: James D. Judd and K'Lynn Landmark	, Motary Public - State	of Oregon
My commission expires:	ip	



Order No.: 360614011066-TTCOO42

EXHIBIT "A"

That portion of land located in the NW 1/4 and the NW 1/4 of the SW 1/4 of Section 21, Township 26 South, Range 11 West of the Willamette Meridian, Coos County, Oregon, being more particularly described as follows: Beginning at a point 1125.28 feet North and 3284.49 feet East of the Center-South 1/16th comer, Section 20, Township 26 South, Range 11 West of the Willamette Meridian, Coos County, Oregon, said point being the end of the Laverne Park North County Road; thence North 35° 02' West a distance of 30.00 feet to the Northerly boundary of a 60 foot right-of-way; thence continuing along said right-of-way boundary North 54° 58' East a distance of 242.33 feet; thence North 60° 27' East a distance of 344.22 feet; thence North 47° 51' 30" East a distance of 221.92 feet; thence North 69° 41' 30" East a distance of 77.92 feet; thence North 17° 40' 30" East a distance of 295.53 feet; thence North 57° 41' East a distance of 314.20 feet; thence North 33° 38' 30" East a distance of 163.04 feet; thence North 69° 20' 30" East a distance of 378.28 feet; thence North 49° 50' East a distance of 251.55 feet; thence North 32° 22' 30" East a distance of 521.42 feet; thence North 36° 39' East a distance of 20 feet, more or less, to a point 60.00 feet West of the East line of the NW 1/4; thence Northerly and parallel with the East line of the NW 1/4 to the Southeasterly edge of the North Fork of the Coquille River; thence Southwesterly along the Southerly edge of the North Fork of the Coquille River to the West line of Section 21, Township 26 South, Range 11 West of the Willamette Meridian, Coos County, Oregon; thence Southerly along said West line of Section 21 a distance of 250 feet, more or less, to the Northerly boundary of the Laverne Park North County Road; thence Northeasterly along the Northerly boundary of said County Road to the point of beginning.

TOGETHER WITH a perpetual right for ingress and egress as disclosed in instrument recorded June 3, 1978, as Microfilm No. 78-4-6370, Records of Coos County, Oregon.

ALSO TOGETHER WITH a perpetual right for ingress and egress as set forth in instrument recorded August 10, 2001, as Microfilm No. 2001-9243, Records of Coos County, Oregon.

EXCEPT:

Beginning at a point 1125.28 feet North and 3284.49 feet East of the center South 1/16 corner of Section 20, Township 26 South, Range 11 West of the Willamette Meridian, Coos County, Oregon, said point being the end of the LaVerne Park North County Road; thence North 35° 02' West 30.00 feet to the Northwesterly boundary of a 60 foot right of way and the true point of beginning; thence continuing along the right of way boundary, North 54° 58' East 242.33 feet; thence North 60° 27' East 344.22 feet; thence North 47° 51' 30" East 142.43 feet; thence leaving the right of way boundary, North 67° West 600 feet, more or less, to the Southerly edge of the North Fork of the Coquille River; thence Southwesterly along the Southerly edge of the North Fork of the Coquille River to the West Section line of Section 21; thence Southerly along said Section line 250 feet, more or less, to the Northerly boundary of the LaVerne Park North County Road; thence Northeasterly along the Northerly boundary of said County Road to the point of beginning. Being a portion of the Southwest quarter of the Northwest quarter and the Northwest quarter of the Southwest quarter of Section 21, Township 26 South, Range 11 West of the Willamette Meridian, Coos County, Oregon.

November 8, 2019
APPLICATION FOR HARDSHIP DWELLING
64282 Fairview Road
Coquille, OR 97423
26-11-21 TL 401
Tax Account 450603

PROPERTY OWNER

Scott Manske P.O. Box 649 Lakeside, OR 97449

APPLICANT

Morrison-Gederos Construction, LLC % Sheri McGrath P.O. Box 1548 Bandon, OR 97411 cooscurry@gmail.com CCB #178168

EXISTING PROPERTY CONDITIONS

The Manske property is located outside of the city limits of Coquille, found in Coos County, Oregon. The property is known as Tax Lot 401 on the Coos County Tax Assessor's Map 26-11-21. The property is located in the forest zoning district. The property is 13.76 acres in size. The situs address is 64282 Fairview Road, Coquille, OR 97423.

Existing development includes a septic system, well, a 1970 manufactured home with porch and deck, a small wood shed, a 24'x40' shop, a 22'-6" x 59' garage, and a 10'-6" x 36'-6" barn. With exception to the well, these improvements existed when Mr. Manske purchased the property. A mix of vegetation exists including bushes and scrubs, a variety of trees and grasses. The property is not used for farming or forest practices and is primarily cleared. All driveways are installed, and kept in good working order.

The North Fork of the Coquille River abuts the property, and a portion of the property is located within the 100 year floodplain. A site survey by Troy Rambo of Mulkins and Rambo, LLC shows the location of the floodplain, and all existing development is outside of that area. A floodplain application is not required for the existing or proposed development.

All development pre-exists the records of the Coos County Tax Assessor's office. Enclosed is the oldest assessment record available, and shows that all development was placed prior to 1990.

PROPOSED PROPERTY CONDITIONS

The Manske family would like to construct a single family dwelling on the subject property with the intent to reside on site to care for a family member in need. An application for the replacement dwelling accompanies this application for a comprehensive review by the Coos County Planning Department. The existing manufactured home is needed for a medical hardship dwelling, and enclosed is a Physician's Letter for Opal Murphy who is need of full time assistance.

She currently resides in the manufactured home, and the new construction will house the family members who will attend to her needs.

The applicant is requesting clearance for the hardship dwelling, and if necessary, after the fact clearance for the existing improvements shown on the plot plan and described above. Clearance for a new septic system is also needed for the siting of the new home site as shown on the plot plan and provided in the compliance determination application for the replacement dwelling.

Enclosed is a Conditional Use Permit Application and associated fee of \$875.00. Below are findings to support the request.

COOS COUNTY ZONING AND LAND DEVELOPMENT ORDINANCE (CCZLDO) FINDINGS OF FACT

2.1.200 Single Family Dwelling is defined as, "a single household unit of which construction is characterized by no common wall or ceiling with another unit, including a mobile home unless otherwise prohibited." The existing dwelling meets this definition.

Accessory Use is defined as, "a use, building or structure that is (1) customarily incidental and subordinate to the principal use, main building or structure, and (2) subordinate in extent, area, and purpose to the principal use. A use that constitutes, in effect, conversion to a use not permitted in the district is not an accessory use." There are no proposed changes to the existing accessory structures.

Agricultural Building is defined as, "a structure customarily provided in conjunction with farm or forest use for..." In the instance of this specific property, the barn is used for, "Storage, maintenance or repair of farm or forestry machinery and equipment."

Conditional Use is "applied to a use which may be permitted by the issuance of a conditional use permit." The hardship dwelling may be permitted as an Administrative Conditional Use.

Evidence is defined as, "Facts, documents, data or other information offered to demonstrate compliance or noncompliance with the standards believed by the proponent to be relevant to the decision.

Zoning District is defined as, "a zoning designation in this Ordinance text and delineated on the zoning maps, in which requirements for the use of land or buildings and development standards are prescribed." The proposed hardship dwelling is located in the Forest zoning district.

4.6.110(3,a) A medical hardship dwelling may be allowed as a conditional use if certain criteria are met. One manufactured home in conjunction with an existing dwelling may be used as a hardship dwelling. The existing manufactured home is proposed to be the Medical Hardship Dwelling. The existing resident is need of full time care, and the family is medically responsible for her well being. A new home will need to be constructed in order for the existing home to be considered a hardship dwelling. The applicant has applied for a Replacement Dwelling in order to provide a location for the family caregiver to live.

A shared sewage disposal system is required for both dwellings, and the applicant is proposing a new septic system. The new system will be located near the proposed new construction in order to better serve the permanent home. A pump may be required by DEQ for the distance between dwellings, though that will be determined during the DEQ review process. The applicant is proposing a new

- system, and the decommissioning of the existing septic system in order to comply with the requirement for one sewage system.
- 4.6.110(3,a,v) The applicant must provide certification from a qualified physician stating what the hardship is and that the person must live close to someone during the hardship. A physician's letter is enclosed.
- 4.6.110(3,a,vi) Within three months of the end of hardship, the manufactured dwelling must be removed or demolished or converted to a non residential use. The applicant is aware of this criteria, and will notify the planning department when the hardship ends for either removal or non residential conversion approval.
- 4.6.110(3,a.vii)The applicant must provide updates every two years for the Planning Director to determine that the permit still qualifies. The applicant understands the criteria, and will provide updates every two years.
- 4.6.110(3,a,viii) A temporary residence approved under this section is not eligible for replacement. *The applicant understands the criteria.*
- 4.6.110(3,a,ix) The landowner shall acknowledge and file a Forest Management Covenant in the deed records of the county prior to county approval. The applicant understands the criteria, and will provide evidence of the recording to the planning department.
- 4.6.130 All conditional uses are subject to requirements that make the use compatible with forest and agricultural operations. *The applicant understands the criteria*.
- 4.6.130(1) The proposed use will not result in a significant change or increase the cost of accepted farming and forest practices. Though the property is zoned Forest, the use is Residential in nature. There are no known farm or forest practices in the vicinity that will be affected by the hardship dwelling.
- 4.6.130(2) The proposed use will not significantly increase fire suppression costs or increase risk. The property is protected by the Coos Forest Protective Association. The proposed hardship dwelling will be using a manufactured home that was sited prior to 1990. There are no increased risks associated with the use.
- 4.6.130(3) All uses must comply with applicable development standards and fire siting and safety standards.

 There is a primary and secondary firebreak around the structure.
- 4.6.130(4) A "Forest Management Covenant" must be signed by the owner and recorded in the deed records of Coos County. The applicant will sign the covenant and have it recorded. A recorded copy will be given to the planning department.
- 4.6.130(5,a) The dwelling will be sited so that it has the least impact on nearby forest or agricultural lands. There will be no adverse impacts on existing operations. The amount of forest lands used to site roads and structures will be minimized. The risks associated with wildfires will be minimized. The proposed use will be located in a manufactured home that was sited prior to 1990. There have been no impacts on existing operations, and no impacts are anticipated. The new homesite is located near other existing development including the neighboring development and an installed driveway.
- 4.6.130(5,b) Verification of on site water availability has been provided.

4.6.140(1)	The minimum lot size for the Forest Zone is 80 acres. The subject property is 13.76 acres and was lawfully created. Development occurred prior to 1990.
4.6.140(2)	All structures will have a 35' setback from the center of a right of way line, or 5' from the edge of the right of way, whichever is greater. All structures meet the criteria.
4.6.140(3)	No fences are proposed at this time.
4.6.140(4)	Off street parking will be provided per Chapter 7. Existing parking is provided and meets this criteria.
4.6.140(5)	A Forest Management Covenant shall be filed prior to final approval of the dwelling. The applicant understands the criteria, and will provide evidence of the recording to the planning department.
4.6.140(6)	Riparian vegetation will be protected within 50' of a wetland, stream or lake <i>The applicant understands</i> the criteria.
4.6.140(7)	The dwelling is fire protected by the Coos Forest Protective Association.
4.6.140(8)	Alternative methods for water supply are not proposed.
4.6.140(9)	The property owner will provide and maintain a water supply of at least 500 gallons with an operating water pressure of 50PSI. A 3/4" garden hose will be provided to reach the perimeter of the primary setback. The applicant understands the criteria.
4.6.140(10)	A 30' primary safety zone will be provided around the structure. Vegetation will be limited to mowed grasses, low scrubs and trees spaced more than 15' apart. A secondary safety zone will be provided for sloped areas. Owner will follow Table 1 when determining the required feet for the secondary zone based on slope percentage.
4.6.140(16)	All roads will be constructed for fire fighting equipment requirements. The existing driveways meet this criteria.
4.6.140(17)	All roads will meet the standards outlined in Chapter 7. The existing driveways meet this criteria.
4.11.200	Overlay zones add further requirements to the development process.
4.11.211	A portion of the property is located in the Floodplain overlay.
4.11.235	A Floodplain application is required for all development within the overlay. The proposed hardship dwelling and other existing structures are located outside of the floodplain overlay.
6.1.125	The parcel is considered lawfully created.
6.2.550	Improvements will comply with the county and state laws as required for water, sewer, drainage, storm drainage and erosion control.

7.1.425 The road access points and driveway are required to be inspected and permitting by the Coos County Road Department. The driveways will be inspected by the road department as part of the Compliance Determination for the replacement dwelling application.

ADDITIONAL SUPPORTING DOCUMENTS

Consent Form

Coos County Tax Assessor's Map 26-11-21 TL 401

Coos County Tax Assessor's Summary Report, current

Coos County Tax Assessor's Summary Report, year 1990

Proposed plot plan

As Built Survey with Floodplain Location by Mulkins and Rambo, LLC

Aerial showing existing development

Floodplain Overlay

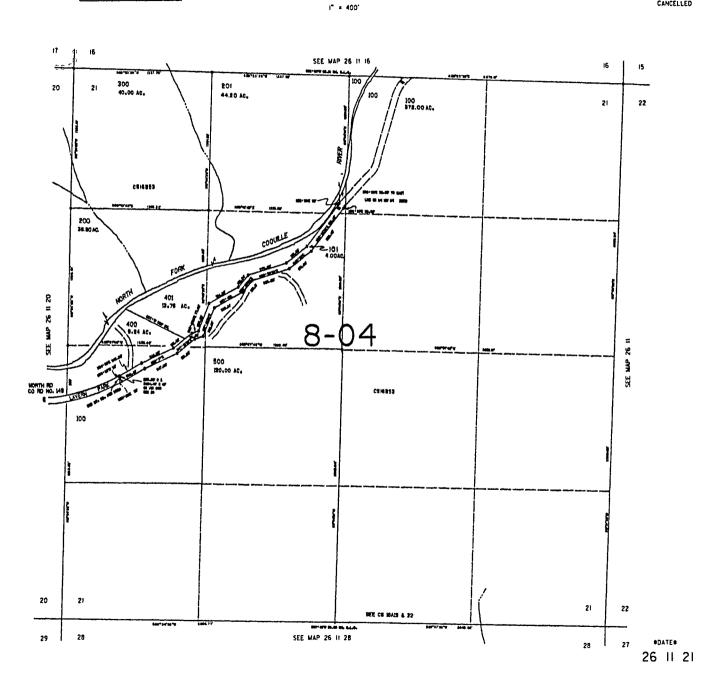
Well Log

Warranty Deed

Physician's Letter

Photographs of existing structure

Compliance Determination application for Replacement Dwelling



COOS County Assessor's Summary Report

Real Property Assessment Report

FOR ASSESSMENT YEAR 2019 **NOT OFFICIAL VALUE**

July 21, 2019 7:21:31 am

Account #

450603

Map # 26S11210000401

Code - Tax # 0804-450603 **Tax Status Acct Status** **ASSESSABLE**

2014-05530

GORDON WEST

07-15-2014 / \$175,000.00

Subtype

Deed Reference #

Sales Date/Price

Appraiser

ACTIVE **NORMAL**

Legal Descr

See Record

Mailing Name

MANSKE, SCOTT L.

Agent

In Care Of Mailing Address PO BOX 649

641

MA SA

LAKESIDE, OR 97449-0649

Prop Class NH Unit **RMV Class** 601 04 16 **RRF** 7456-1

Situs Address(s)	Situs City
ID# 10 64282 FAIRVIEW RD	COQUILLE

Code Are	:a	RMV	MAV	Value Summary AV	RMV Ex	ception	CPR %
0804	Land Impr.	116,766 54,480			Land Impr.	0	•
Code A	Area Total	171,246	156,660	162,624		0	
Gra	and Total	171,246	156,660	162,624		0	

Code	ID#	RFPD Ex	Plan Zone	Value Source	Land Breakdow TD%	LS	Size	Land Class	LUC	Trended RMV
0804	50		F	Designated Forest Land	100	Α	8.26	A	006*	
0804	10	\Box	F	Market	100	Α	1.00	HS	003	
0804	40		F	Market	100	Α	4.50	MV	003	
					Grand T	otal	13.76			

Code		Yr	Stat	Improvement Breakdo	WR	Total		Trended
Area	ID#	Built	Class	Description	TD%	Sq. Ft.	Ex% MS Acct #	RMV
0804	1	0	303	General Purpose Building	100	864		5,350
0804	2		303	General Purpose Building	100	960		11,200
0804	1	1970	462	MH REAL DOUBLE CLASS 6	100	1,392	E - 195497	37,930
				Gra	nd Total	3 216		54 480

Code Type Area

Exemptions/Special Assessments/Potential Liability

NOTATION(S):

- **FARM/FOREST POT'L ADD'L TAX LIABILITY**
 - **FOREST**
- **FIRE PATROL ADDED 2014**
- **REVIEW BY APPRAISER ADDED 2018**

Reappraisal

0804

FIRE PATROL:

■ FIRE PATROL SURCHARGE

Amount

47.50 21.02

2019 Year 13.76

■ FIRE PATROL TIMBER

Amount

Acres

Year 2019

COOS County Assessor's Summary Report

Real Property Assessment Report

FOR ASSESSMENT YEAR 1990

October 15, 2019 9:58:19 am

Account #

450603

Map# Code - Tax #

Legal Descr

26S11210000401

0804-450603

See Record

Mailing Name

PERRY, GLENN L. & MAXINE M.

Agent

In Care Of

Mailing Address HC 83 BOX 4360 COQUILLE, OR 97423

Prop Class RMV Class

543 500 MA SA 04

NH Unit 00 004 7456-1 Tax Status

ASSESSABLE

Acct Status Subtype

ACTIVE NORMAL

Deed Reference # 2014-05530

Sales Date/Price

07-15-2014 / \$175,000.00

Appraiser

Situs Address(s)

Situs City

			Value Summary						
Code Are	ea	RMV ,	MAV	AV	SAV	MSAV		RMV Exception	CPR %
0804	Land	18,333	0	0	18,333	0	Land	D	
	Impr.	19,637	0	0	0	0	lmpr.	D	
Code /	Area Total	37,970	0	0	18,333	0		0	
Gr	and Total	37,970	0	0	18,333	0		0	

Code			Plan		Land Breakdow	n				Trended
Area	ID#	RFPD Ex		Value Source	TD%	LS	Size	Land Class	LUC	RMV
0804	20	Ø	F	Designated Forest Land	100	Α	8.26	AA	006*	1,487
0804	30	Ø	F	Farm Use Unzoned	100	Α	2.50	B4	006*	408
0804	40	$\overline{\mathbf{p}}$	F	Farm Use Unzoned	100	Α	2.00	H5	006*	158
0804	10	Ø	F	Farm Use Zoned	100	A	1.00	MHS	006*	16,280
					Grand 7	otal	13.76			18 333

Code Area	ID#	Yr Built	Stat Class	Improvement Breakd Description	own TD%	Total Sq. Ft.	Ex% MS Acct#	Trended RMV
0804	1	1970	462	MH REAL DOUBLE CLASS 6	100	1,392	R - 195497	0
0804	1	0	309	MISC FARM BUILDING	100	0		19,637
				Gr	and Total	1 392		19 637

Code Type Area

Exemptions/Special Assessments/Potential Liability

NOTATION(S):

■ OTHER POT'L ADD'L TAX LIABILITY

0804

FIRE PATROL:

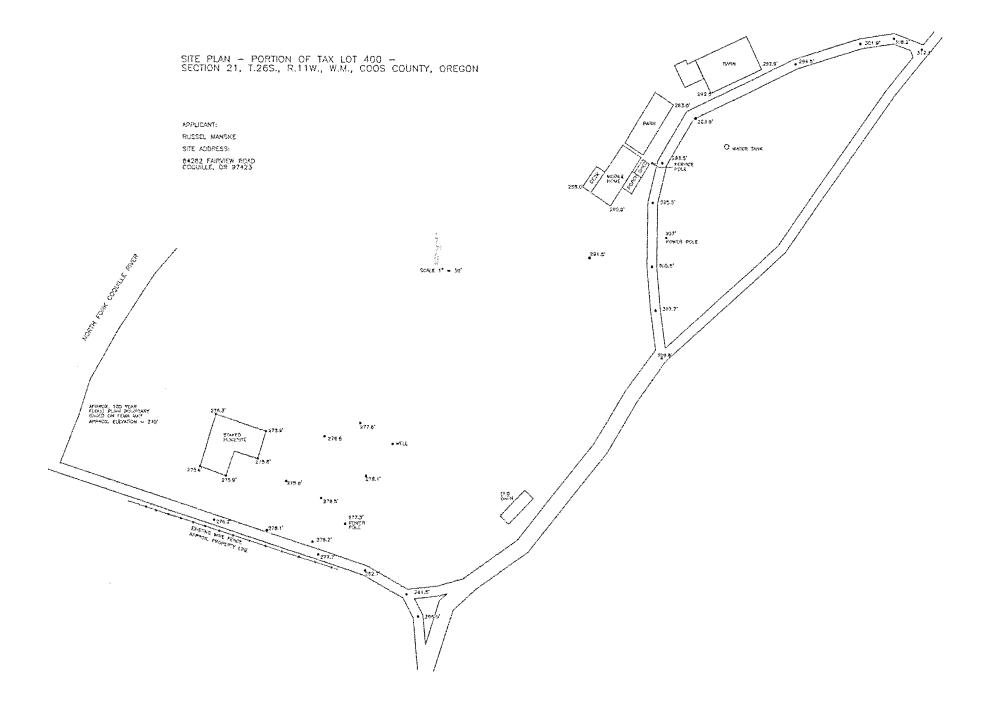
■ FIRE PATROL TIMBER

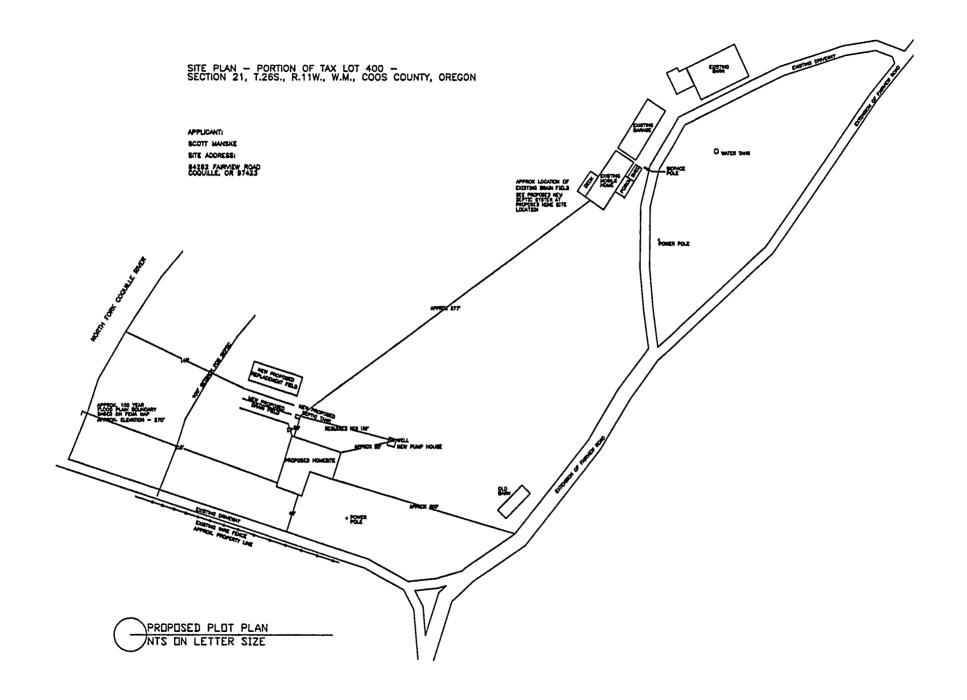
Amount

35.00 Acres

0 Year 1990

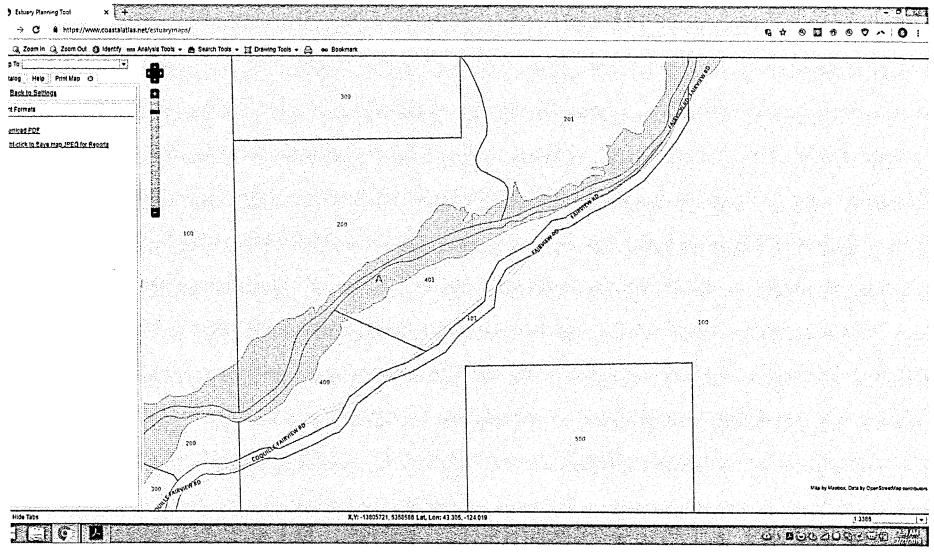
^{***} The Real MS value is not included in the total of the real account



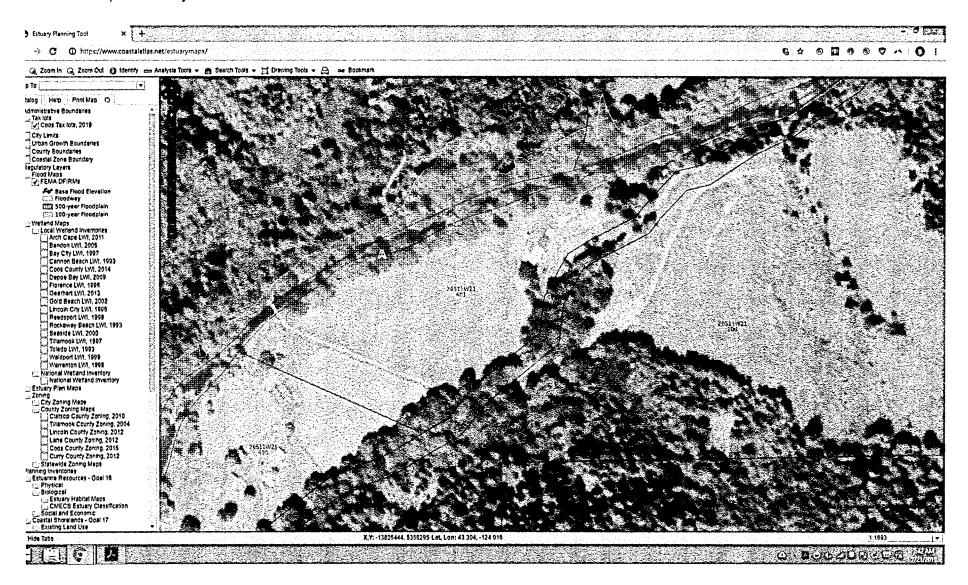


inske Property 64282 Fairview Rd quille, OR 97423 -11-21 TI 401

odplain Overlay



rial with Floodplain Overlay



STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301 (503)986-0900



LOCATION OF WELL

Latitude: 43.3039

Datum: WGS84

Longitude: -124.0174

Township/Range/Section/Quarter-Quarter Section:

WM 26S 11W 21 SWNW

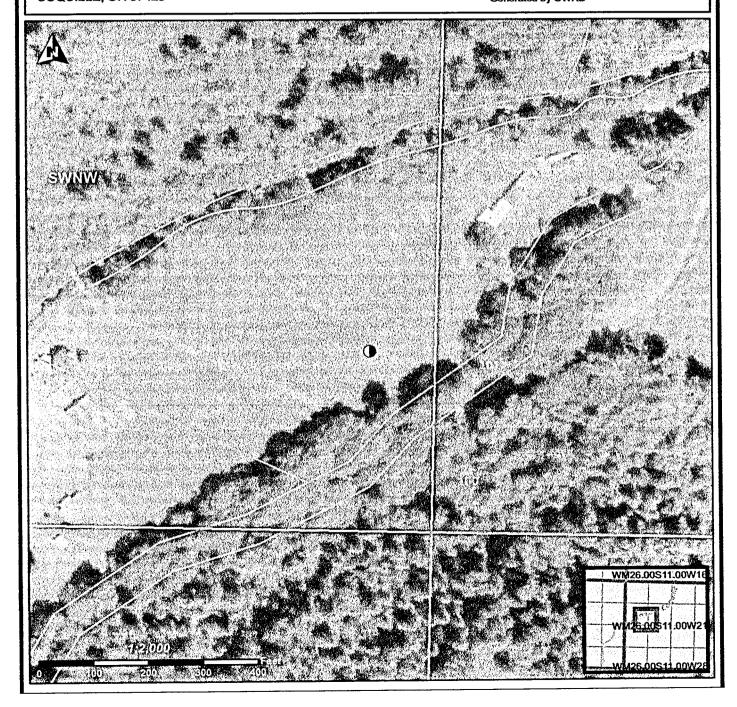
Address of Well: 64282 FAIRVIEW COQUILLE, OR 97423 Well Label: L131293

Well Log: COOS 57502

Printed: May 29, 2019

DISCLAIMER: This map is intended to represent the approximate location of the exempt use well provided by the land owner. It is not intended to be construed as survey accurate in any manner.

Generated by OWRD



WELL I.D. LABEL# L 131293 STATE OF OREGON **COOS 57502** START CARD# 1042569 WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210) 5/28/2019 ORIGINAL LOG# (1) LAND OWNER Owner Well LD. Last Name MANSKE First Name SCOTT (9) LOCATION OF WELL (legal description) Company_ Twp 26.00 S N/S Range 11.00 W E/W WM Address 64236 FAIRVIEW City COQUILLE 1/4 of the NW 1/4 Tax Lot 00401 sw State OR Zip 97423 Tax Map Number New Well Deepening Conversion (2) TYPE OF WORK " or 43,30388398 DMS or DD Alteration (complete 2a & 10) Abandonment(complete 5a) " or _124.01737691 DMS or DD (2a) PRE-ALTERATION Street address of well Nearest address Gauge Stl Plstc Wld Thrd Casing: 64282 FAIRVIEW Material Amt sacks/lbs COQUILLE, OR 97423 From Seal: (10) STATIC WATER LEVEL (3) DRILL METHOD Date Rotary Air Rotary Mud Cable Auger Cable Mud SWL(psi) SWL(ft) Existing Well / Pre-Alteration Reverse Rotary Other Completed Well 4/29/2019 Flowing Artesian? Dry Hole? Domestic Irrigation Community (4) PROPOSED USE Industrial/ Commercial Livestock Dewatering Depth water was first found 19.00 WATER BEARING ZONES Est Flow SWL(psi) Thermal Injection Other SWL Date + SWL(ft) From To (5) BORE HOLE CONSTRUCTION Special Standard (Attach copy) 4/29/2019 33 19 32 Depth of Completed Well 224.00 ft. 4/29/2019 139 19 138 **BORE HOLE** SEAL sacks/ From To Material From To Amt lbs 20 Bentonite Chips 20___ 12 IS 10 0 Calculated 10.7 224 20 6 (11) WELL LOG Calculated Ground Elevation Method A B C D To How was seal placed: Material From TOP SOIL 0 1 XOther POURED BROWN SANDY CLAY Backfill placed from _ ft. to ft. Material BROWN SANDY CLAYSTONE SANDSTONE 14 ft. to Filter pack from ft. Material BROWN GRAVEL 14 15 Explosives used: Yes Type_ Amount **BLUE GRAY SANDSTONE** 15 36 (5a) ABANDONMENT USING UNHYDRATED BENTONITE **BROWN BLUE SANDSTONE** 36 45 45 88 BLUE GRAY BALSALT Proposed Amount Actual Amount **BLUE GRAY SANDSTONE** 88 130 (6) CASING/LINER 130 138 BLUE GRAY BALSALT Piste Wid Thrd Casing Lines From To Gauge **BLUE GRAY SANDSTONE** 138 224 X 1.6 21 .250 Location of shoe(s) Inside Outside Other Temp casing Yes Dia From $+ \Box$ (7) PERFORATIONS/SCREENS Perforations Method SAW Date Started4/27/2019 Completed 4/29/2019 Screens Type Material Tele/ # of Scrn/slot Slot Casing/ Screen (unbonded) Water Well Constructor Certification Screen Liner Dia To width slots pipe siz From Icneth I certify that the work I performed on the construction, deepening, alteration, or 240 224 4.5 32 25 Lincr abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief. License Number Date (8) WELL TESTS: Minimum testing time is 1 hour Signed O Bailer Flowing Artesian O Pump Air (bonded) Water Well Constructor Certification Drill stem/Pump depth Duration (hr) Yield gal/min Drawdown I accept responsibility for the construction, deepening, alteration, or abandonment 224 work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief. °F Lab analysis Yes By_ Temperature 52 License Number 1381 Date 5/28/2019_ Yes (describe below) TDS amount 91 ppm Units Water quality concerns? Amount Description Signed RONALD BARRINGTON (E-filed) Contact Info (optional) BARRINGTON WELL DRILLING LLC. 541-269-7221

Page 1 of 1



Coor County Planning Department

Coos Coursy Courthouse Amer. Coursile, Oregon 97423
Mailing Address: 250 N. Bristo, Cook Courty Courthouse, Copulle, UR 97823 Physical Address: 223 N. Adams, Copulle, Organ 97423 15411396-7770

FAX (541) 596-1022 / TDD (100) 735-2920 en nemericalisticanis fill Rolfe Pleasing Harris

Physician's Certificate

This form must be completed and signed by a qualified physician and submitted with your application for a Temporary Medical Hardship Dwelling

By completing this form, the physician, therapist or professional counselor asserts their pullent needs frequent care in such a manner that the caretaker must revice on the same premises.

To Be Operated by Physicism

This is to certify that the person listed below is my patient:

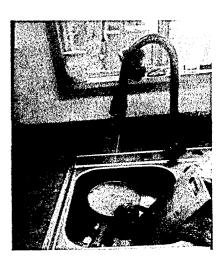
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It is my medical opinion that this person has a medical or physical hardship that requires

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Physician's Nam Address: <u>19</u> 0	10 11001	1/1/1//////////////////////////////////	// Phone	6- 511	<u> 267-515</u> 1
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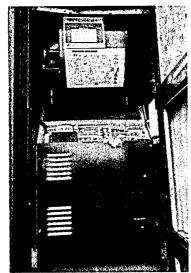




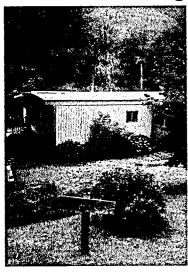


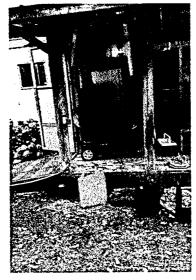
All plumbing is in working condition





All heat is in working condition





All four exterior walls and roof are in tact