



**Coos County  
Planning Department  
Application to Develop in a  
Special Flood Hazard Area**

Official Use Only  
Fee \$875.00  
Receipt No. 209896  
Check No./Cash 3404  
Date 5/8/19  
Received By A. Dibble  
File No. FP-19-004

The undersigned hereby makes application for a permit to develop in a designated Special Flood Hazard Area ("floodplain"). The work to be performed is described below and in attachments hereto. The undersigned agrees that all such work shall be done in accordance with the requirements of the Coos County Comprehensive Plan, Coos County Zoning and Land Development Ordinance, and any other applicable Local, State, and Federal regulations. This application does not create liability on the part of the Coos County Planning Department or any officer or employee thereof for any flood damage that results from the reliance on this application or any decision made lawfully there under.

Owner(s): Debbie Burt Telephone: 541-771-1134  
Address: 607 W. 11th  
City/State: Coquille Zip Code: 97423  
Agent(s): \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Township: \_\_\_\_\_ Section: \_\_\_\_\_  
Range: \_\_\_\_\_ Tax Lot: \_\_\_\_\_  
Situation Address: \_\_\_\_\_  
City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**A. Description of Work (Complete for All Proposals):**

1. Proposed Development Description:

- New Building  Improvement to Existing Building  
 Manufactured Structure  Fill  
 Other \_\_\_\_\_

2. Size and location of proposed development (a site plan must be attached):

30x30 - See attached Site Plan

3. Is the proposed development in a Special Flood Hazard Area (Zones A, AE, A1-A30, AH, AO, V, or VE)?

Yes Zone: AE  
 No

4. Per the FIRM, what is the zone and panel number of the area of the proposed development?

Zone: AE

Panel Number: 41011C0537

5. Have any other Federal, State, or Local permits been obtained?

Yes - Copies of all permits must be attached.  
 No

6. Is the proposed development in an identified floodway?

Yes - A "No Rise Certification" with supporting data must be attached.  
 No

**B. Complete for New Structures and Building Site:**

1. Base Flood Elevation (BFE) at the site (complete one):

NGVD 29 \_\_\_\_\_ feet Source: \_\_\_\_\_

NAVD 88 24.00 feet Source: FIRM

2. Required lowest floor elevation, including basement (complete one):

NGVD 29 \_\_\_\_\_ feet Source: 4

NAVD 88 25.00 feet Source: FIRM

3. Number and area of flood openings (vents): 0

4. Enclosed area below BFE (in square feet): 0

**C. Complete for Alterations, Additions, or Improvements to Existing Structures:**

1. What is the estimated market value of the existing structure? Justification for the estimate must be attached and may include, but is not limited to, appraisals completed by private agencies or the County Assessor's office.

\$12,400

2. What is the cost of the proposed construction? Justification for the estimate must be attached. The estimate is required to include fair market value for any work provided by the property owner or without compensation.

\$12,400

3. If the cost of the proposed construction equals or exceeds 50 percent of the market value of the structure, then the substantial improvement provisions shall apply.

**D. Complete for Non-Residential Floodproofed Construction:**

1. Type of floodproofing method:

elevated 2 feet above BFE

2. The required floodproofing elevation is (complete one):

NGVD 29 \_\_\_\_\_ feet Source: \_\_\_\_\_

NAVD 88 \_\_\_\_\_ feet Source: \_\_\_\_\_

3. Floodproofing certification by a registered engineer must be attached.

**E. Complete for Land Divisions, Subdivisions, and Planned Unit Development:**

1. Does the proposal contain 50 lots or 5 acres?

Yes - The plat or proposal must clearly identify base flood elevation.

No

2. Are the 100-year Floodplain and Floodway delineated on the site plan?

Yes

No

**F. Authorization: All areas must be initialed by all applicant(s) prior to the Planning Department accepting any application.**

I hereby attest that I am authorized to make the application for Application to Develop in a Special Flood Hazard Area and the statements within this application are true and correct to the best of my knowledge and belief. I affirm that this is a legally created tract, lot or parcel of land. I understand that I have the right to an attorney for verification as to the creation of the subject property. I understand that any action authorized by Coos County may be revoked if it is determined that the action was issued based upon false statements or misrepresentation.

*DB*

Applicant

I understand it is the function of the Planning Department to impartially review my application and to address all issues affecting it regardless of whether the issues promote or hinder the approval of my application. In the event a public hearing is required to consider my application, I agree I bear the burden of proof. I understand that approval is not guaranteed and the applicant(s) bear the burden of proof to demonstrate compliance with the applicable review criteria.

*DB*

Applicant

As applicant(s) I/we acknowledge that it is in my/our desire to submit this application and staff has not encouraged or discouraged the submittal of this application.

*DB*

Applicant

*Dana R. Bent*

Applicant(s) Original Signature

*5/8/2019*

Date

Applicant(s) Original Signature

Date



Compliance Determination

SUBMIT TO COOS COUNTY PLANNING DEPT. AT 225 N. ADAMS STREET OR  
MAIL TO: COOS COUNTY PLANNING 250 N. BAXTER, COQUILLE OR 97423.  
EMAIL [PLANNING@CO.COOS.OR.US](mailto:PLANNING@CO.COOS.OR.US) PHONE: 541-396-7770

THIS APPLICATION WILL TAKE AT LEAST 30 DAYS TO REVIEW

Date Received: 5/2/19 Fee Received \$306.00 Receipt #: 209896 Received by: A. Dibble  
*Please be aware if the fees are not with the included the application will not be processed.*

FILE # CD- \_\_\_\_\_ (If payment is received on line a file number is required prior to submittal)

Land Owner(s) (print name): Debbie Burt  
Mailing address: 607 W. 11<sup>th</sup> Coquille OR 97423  
Phone: 541-771-1134 Email: debbie@coppertree Realty.com

Applicant(s) (print name): Debbie Burt  
Mailing address: 607 W. 11<sup>th</sup>  
Phone: 541-771-1134 Email: debbie@coppertree Realty.com

PROPERTY LOCATION:

275 13W 36 6800  
Township Range Section Tax lot(s)  
Site address None

PROJECT DESCRIPTION:

Pole Building

An application for Compliance Determination (CD) is required to be submitted to the Planning Department with the elements described in §5.10.200. Once the application is received the Planning Staff will review the CD against the applicable zoning district to determine if additional reviews or notifications are required.

**ACKNOWLEDGEMENT STATEMENT:** PERTAINING TO THE SUBJECT PROPERTY DESCRIBED ABOVE, I HEREBY DECLARE THAT I AM THE LEGAL OWNER OF RECORD OR AN AGENT HAVING CONSENT OF THE LEGAL OWNER OF RECORD AND I AM AUTHORIZED TO OBTAIN THIS ZONING COMPLIANCE LETTER SO AS TO OBTAIN NECESSARY PERMITS FOR DEVELOPMENT FROM THE DEPARTMENT OF ENVIRONMENTAL QUALITY AND/OR THE BUILDING CODES AGENCY. THE STATEMENTS WITHIN THIS FORM ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT ANY PERMITS AND/OR AUTHORIZATION FOR DEVELOPMENT ISSUED BY THE PLANNING DEPARTMENT MAY BE REVOKED IF IT IS DETERMINED THAT IT WAS ISSUED BASED ON FALSE STATEMENTS, MISREPRESENTATIONS OR IN ERROR. AS A CONDITION FOR THE ISSUANCE OF THIS ZONING COMPLIANCE LETTER THE UNDERSIGNED HEREBY AGREES TO HOLD COOS COUNTY HARMLESS FROM AND INDEMNIFY THE COUNTY FOR ANY LIABILITY FOR DAMAGE WHICH MAY OCCUR AS A RESULT OF THE FAILURE TO BUILD, IMPROVE OR MAINTAIN ROADS WHICH SERVE AS ACCESS TO THE SUBJECT PROPERTY.

RURAL RESIDENTIAL COMPATIBILITY WITH FARM/FOREST MANAGEMENT PRACTICES: I HEREBY ACKNOWLEDGE THAT THE NORMAL INTENSIVE MANAGEMENT PRACTICES OCCURRING ON

ADJACENT RESOURCE LAND WILL NOT CONFLICT WITH THE RURAL RESIDENTIAL USE OR ENJOYMENT OF THE ABOVE DESCRIBED PROPERTY.

BY SIGNING THIS APPLICATION I AM ACKNOWLEDGING THAT I CAN ONLY DEVELOPE MY PROPERTY AS ALLOWED PURSUANT TO THE AUTHORIZATIONS GRANTED IN THE ZONING COMPLIANCE LETTER THAT WILL BE ISSUED. IF ADDITIONAL REVIEW IS REQUIRED I UNDERSTAND THAT IT IS MY RESPONSIBLY TO COMPLETE THE REVIEW. ALL APPLICABLE FEDERAL, STATE, AND LOCAL PERMITS SHALL BE OBTAINED PRIOR TO THE COMMENCEMENT OF ANY DEVELOPMENT ACTIVITY. ALL COSTS ASSOCIATED WITH COMPLYING WITH THE CONDITIONS ARE THE RESPONSIBILITY OF THE APPLICANT AND THAT THE APPLICANT IS NOT ACTING AS AN AGENT OF THE COUNTY.

APPLICANTS SIGNATURE: Debbie Burt

**SUBMITTAL REQUIREMENTS PLEASE CHECK OFF**

The application form must be completed and include the following:

1.  Plot plan drawn to scale;
2.  If this is for an industrial or commercial use a parking plan is required (see Article 7.5);
3.  If this is bare land and a driveway has not be completed a driveway confirmation form is required to be completed by the Roadmaster (see Article 7.6 for bonding options);
4.  If this is bare land and the request is for a dwelling an address is required;
5.  If this is for an estuary zoned property as defined in Chapter III then applicable zoning district standards and policies must be addressed; and
6.  Consent if not the legal owner of record.

**Coos County / Official Use Only**

Zoning Compliance Letter Issued     Requires additional Review

Planner: \_\_\_\_\_ Date \_\_\_\_\_

Version 5/2014



Coos County Planning Department  
Coos County Courthouse Annex, Coquille, Oregon 97423  
Mailing Address: 250 N. Baxter, Coos County Courthouse, Coquille, Oregon 97423  
Physical Address: 225 N. Adams, Coquille, Oregon

## Plot Plan Instructions

FAILURE TO INCLUDE ALL INFORMATION IN THIS CHECKLIST WILL RESULT IN A DELAY OF YOUR PERMIT OR APPLICATION REVIEW.

The following information and elements must be on your plot plan map. The Plot Plan ***MUST*** be drawn on white paper that is 8½" x 11". Multiple pages may be used. Please verify that your plot plan contains each of the following elements listed below.

### General Information

1.  Owner's name, address and phone number
2.  Assessor's map and tax lot number
3.  North arrow
4.  Scale – using standard engineering scale
5.  Accurate shape and dimensions of parcel or development site. Draw the property lines in a solid black line
6.  Lengths of all property lines
7.  Any adjacent public or private roads, all easements and/or driveway locations – including road names
8.  All natural features on the entire property, which may include but are not limited to creeks, rivers, ponds, lakes, wetlands, ravines, and slopes.
9.  Driveway location and parking areas – including the distance from at least one property line to the intersection of the driveway and the road (apron area)

### Existing Structure(s)

1.  Clearly label *all* existing structures on the property and indicate if these structures will remain or be removed. Existing Structures include: all commercial and non-commercial buildings, dwellings, shops, garages, barns, porches, barns, equine facilities, sheds, propane tanks, pump houses, etc.
2.  Show distances to all property lines. If you have a large property you may want to submit a insert map.
3.  Location of existing water source (ie. well, lake, pond, etc.) and distance from property lines and development.
4.  Location of existing sewage facility (ie. tank, lines, replacement area, etc.) and distance from property lines and development.
5.  Show the distances from all Natural Features to the existing development.

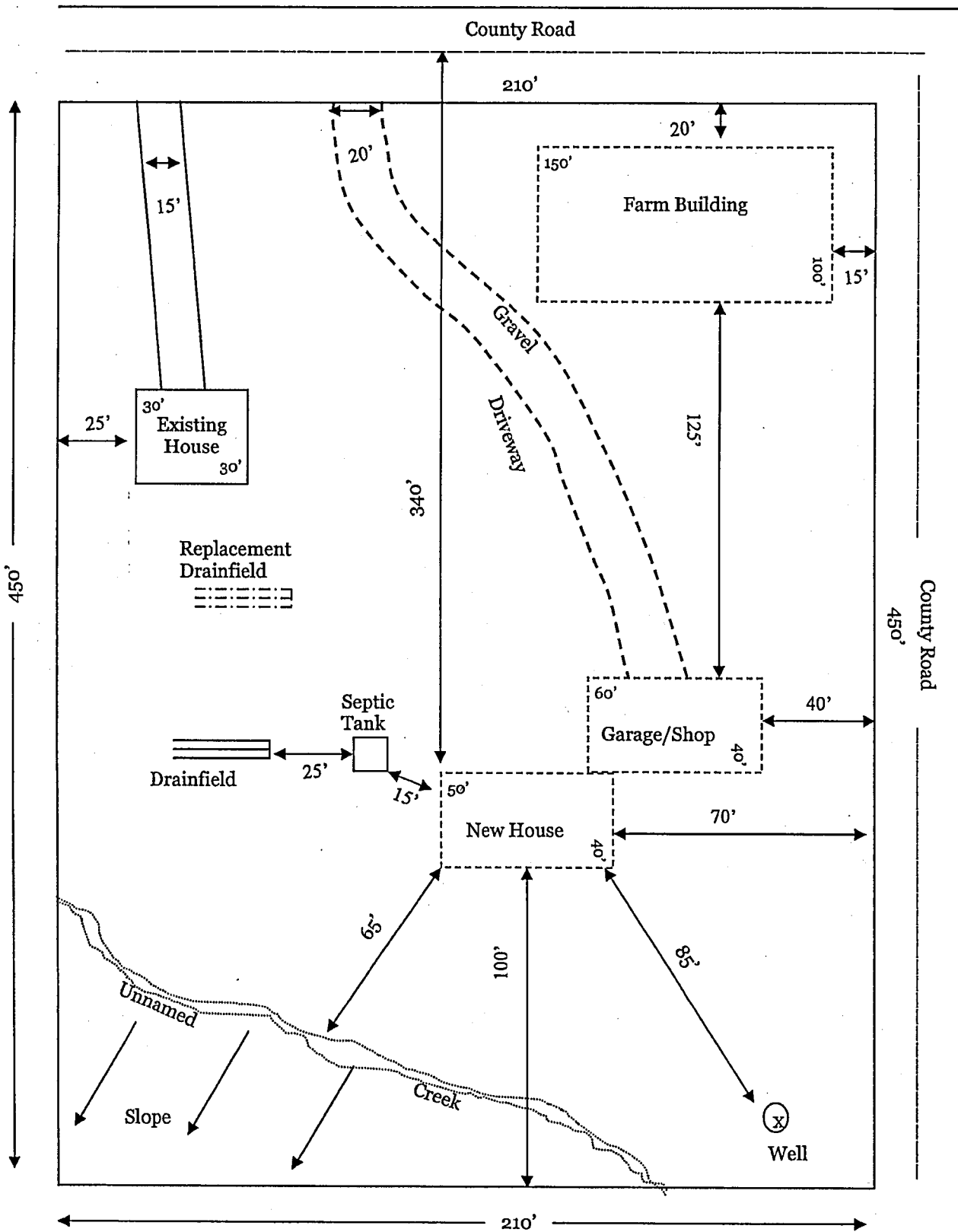
### Proposed Structure(s)

1.  Location of proposed structure showing distances to property lines and natural features. These proposed structures can be shown by dashed lines. Indicate dimensions of structures.
2.  Distance of proposed development from roadways, water sources and sewage facilities.
3.  Location of the proposed structure from existing development.
4.  Direction and location of all slopes.
5.  Location and dimension of all proposed water sources and sewage facilities.
6.  Confirm that all setbacks have been met for the proposed development and project

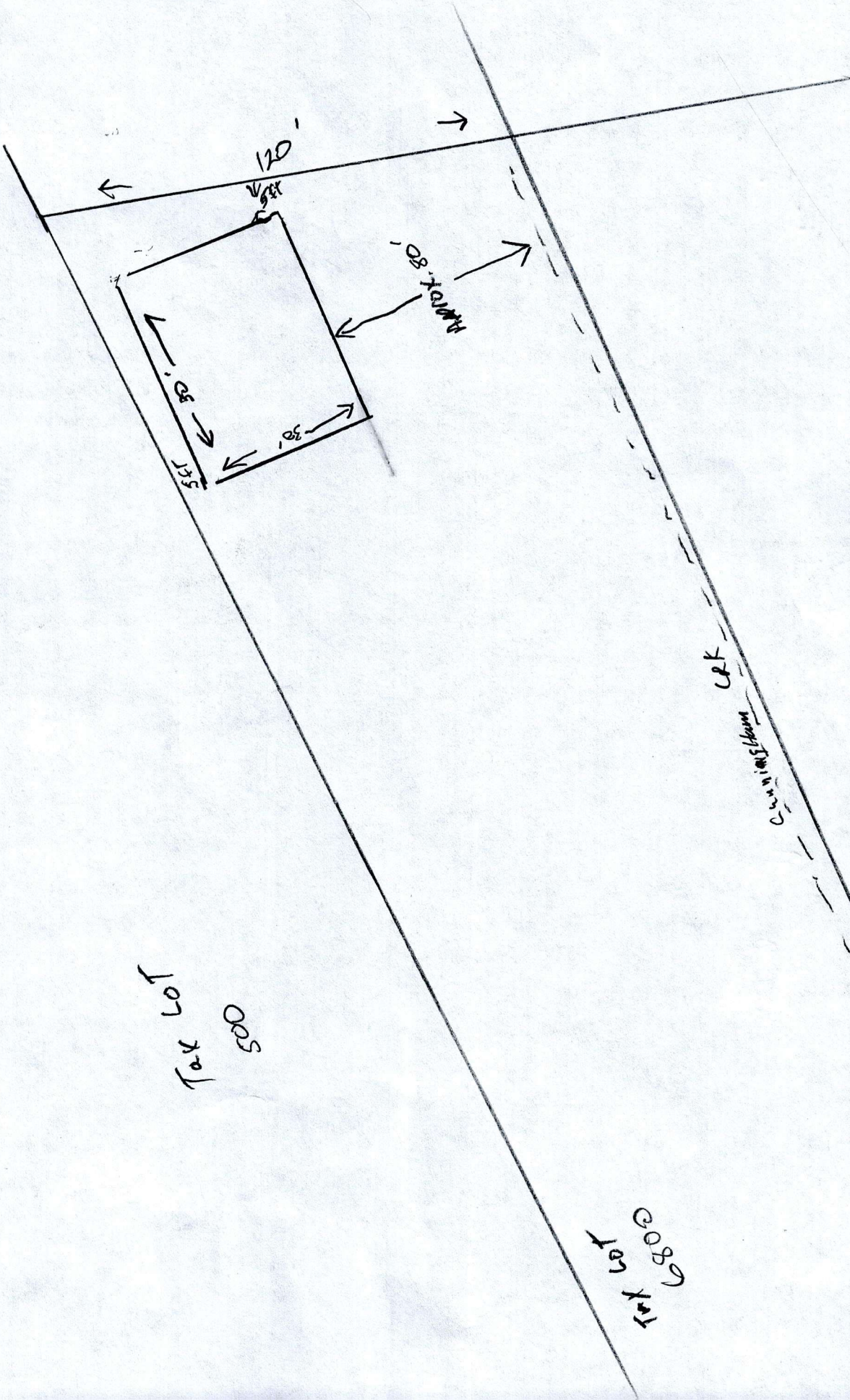
John Doe (541)555-1111  
12345 Hawk Hill Lane  
23-13-26-000

# Sample Plot Plan

1" = 40'







Tax Lot  
500

Tax Lot  
500

Creek  
CRK

# ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name Debbie Burt				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 0 North Fir				Company NAIC Number:	
City Coquille		State Oregon		ZIP Code 97420	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax Lot 6800 - Assessor's Map 27S 13W 36CC					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Accessory - Shop</u>					
A5. Latitude/Longitude: Lat. <u>43.183319 N</u> Long. <u>124.196319 W</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983					
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.					
A7. Building Diagram Number <u>1A</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>900.00</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u>					
c) Total net area of flood openings in A8.b <u>0.00</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>N/A</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____					
c) Total net area of flood openings in A9.b _____ sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number Coos County			B2. County Name Coos		B3. State Oregon
B4. Map/Panel Number 41011C0537	B5. Suffix F	B6. FIRM Index Date	B7. FIRM Panel Effective/ Revised Date 12-07-2018	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 24.0 Feet
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expiration Date: November 30, 2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 0 North Fir			Policy Number:
City Coquille	State Oregon	ZIP Code 97420	Company NAIC Number

## SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction

\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: OA0738 Vertical Datum: NAVD 1988

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

- |   |      |  |                                 |
|---|------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor)   | 26.0 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor   | N/A  | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only)   | N/A  | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| d) Attached garage (top of slab)  | N/A  | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building<br>(Describe type of equipment and location in Comments) | N/A  | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | 25.5 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | 25.5 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support                                  | N/A  | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |

## SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  Check here if attachments.

Certifier's Name Troy Rambo	License Number LS 2865	
Title Member		
Company Name Mulkins & Rambo, LLC		
Address P.O. Box 809		
City North Bend	State Oregon	ZIP Code 97459
Signature <i>Troy Rambo</i>	Date 04-08-2019	Telephone (541) 751-8900

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)  
The Latitude and Longitude were taken from Google Earth.