



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

Official Use Only

Fee 500<sup>00</sup>  
Receipt No. 94341750  
~~Check No./Cash~~ P+P  
Date 5/19/21  
Received By JMB  
File No. FP-21-001

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 thereunder.

Owner(s): Craig and Colleen Briggs Telephone: 360-823-9238

Address: 85208 North Bank Lane

City/State: Coquille Or Zip Code: 97423

Agent(s): James Dias Telephone: 541-808-7816

Address: 61007 Old wagon Rd

City/State: Coos Bay Or Zip Code: 97420

Township: 28s Section: 10

Range: 14w Tax Lot: 700

Situs Address: 85208 North Bank Lane

City/State: Coquille Or Zip Code: 97423

**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):

Construct 2 addition to house, 205sqft and 152sqft. add to deck on house and add 450 sqft covered structure over deck.

Construct a new 50x120 Equipment/Horse Barn, Barn will not have a restroom.

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

Yes Zone: Zone A

No

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

Zone: F

Panel Number: 41011C0515

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 \_\_\_\_\_ feet Source: \_\_\_\_\_

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

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

NAVD 88 14 feet Source: \_\_\_\_\_

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

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

**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.

\$801,200.00 Based off of County Assessor's Office GIS Site

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.

\$161,000.00

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:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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.

James Dias Digitally signed by James Dias  
Date: 2021.04.19 19:32:24 -0700  
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.

James Dias Digitally signed by James Dias  
Date: 2021.04.19 19:32:24 -0700  
Applicant

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

James Dias Digitally signed by James Dias  
Date: 2021.04.19 19:32:24 -0700  
Applicant

James Dias Digitally signed by James Dias  
Date: 2021.04.19 19:32:24 -0700  
Applicant(s) Original Signature

4-19-2021  
Date

Applicant(s) Original Signature

Date



**FEMA**

*NATIONAL FLOOD INSURANCE PROGRAM*

**ELEVATION CERTIFICATE**

**AND**

**INSTRUCTIONS**

**2019 EDITION**

U.S. DEPARTMENT OF HOMELAND SECURITY  
Federal Emergency Management Agency  
National Flood Insurance Program

## ELEVATION CERTIFICATE AND INSTRUCTIONS

### Paperwork Reduction Act Notice

Public reporting burden for this data collection is estimated to average 3.75 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street SW, Washington, DC 20742, Paperwork Reduction Project (1660-0008). **NOTE: Do not send your completed form to this address.**

### Privacy Act Statement

**Authority:** Title 44 CFR § 61.7 and 61.8.

**Principal Purpose(s):** This information is being collected for the primary purpose of estimating the risk premium rates necessary to provide flood insurance for new or substantially improved structures in designated Special Flood Hazard Areas.

**Routine Use(s):** The information on this form may be disclosed as generally permitted under 5 U.S.C. § 552a(b) of the Privacy Act of 1974, as amended. This includes using this information as necessary and authorized by the routine uses published in DHS/FEMA-003 – National Flood Insurance Program Files System or Records Notice 73 Fed. Reg. 77747 (December 19, 2008); DHS/FEMA/NFIP/LOMA-1 – National Flood Insurance Program (NFIP) Letter of Map Amendment (LOMA) System of Records Notice 71 Fed. Reg. 7990 (February 15, 2006); and upon written request, written consent, by agreement, or as required by law.

**Disclosure:** The disclosure of information on this form is voluntary; however, failure to provide the information requested may result in the inability to obtain flood insurance through the National Flood Insurance Program or the applicant may be subject to higher premium rates for flood insurance. Information will only be released as permitted by law.

### Purpose of the Elevation Certificate

The Elevation Certificate is an important administrative tool of the National Flood Insurance Program (NFIP). It is to be used to provide elevation information necessary to ensure compliance with community floodplain management ordinances, to determine the proper insurance premium rate, and to support a request for a Letter of Map Amendment (LOMA) or Letter of Map Revision based on fill (LOMR-F).

The Elevation Certificate is required in order to properly rate Post-FIRM buildings, which are buildings constructed after publication of the Flood Insurance Rate Map (FIRM), located in flood insurance Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, and AR/AO. The Elevation Certificate is not required for Pre-FIRM buildings unless the building is being rated under the optional Post-FIRM flood insurance rules.

As part of the agreement for making flood insurance available in a community, the NFIP requires the community to adopt floodplain management regulations that specify minimum requirements for reducing flood losses. One such requirement is for the community to obtain the elevation of the lowest floor (including basement) of all new and substantially improved buildings, and maintain a record of such information. The Elevation Certificate provides a way for a community to document compliance with the community's floodplain management ordinance.

Use of this certificate does not provide a waiver of the flood insurance purchase requirement. Only a LOMA or LOMR-F from the Federal Emergency Management Agency (FEMA) can amend the FIRM and remove the Federal mandate for a lending institution to require the purchase of flood insurance. However, the lending institution has the option of requiring flood insurance even if a LOMA/LOMR-F has been issued by FEMA. The Elevation Certificate may be used to support a LOMA or LOMR-F request. Lowest floor and lowest adjacent grade elevations certified by a surveyor or engineer will be required if the certificate is used to support a LOMA or LOMR-F request. A LOMA or LOMR-F request must be submitted with either a completed FEMA MT-EZ or MT-1 package, whichever is appropriate.

This certificate is used only to certify building elevations. A separate certificate is required for floodproofing. Under the NFIP, non-residential buildings can be floodproofed up to or above the Base Flood Elevation (BFE). A floodproofed building is a building that has been designed and constructed to be watertight (substantially impermeable to floodwaters) below the BFE. Floodproofing of residential buildings is not permitted under the NFIP unless FEMA has granted the community an exception for residential floodproofed basements. The community must adopt standards for design and construction of floodproofed basements before FEMA will grant a basement exception. For both floodproofed non-residential buildings and residential floodproofed basements in communities that have been granted an exception by FEMA, a floodproofing certificate is required.

Additional guidance can be found in FEMA Publication 467-1, Floodplain Management Bulletin: Elevation Certificate, available on FEMA's website at <https://www.fema.gov/media-library/assets/documents/3539?id=1727>.

# 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 Craig Allen & Colleen R Briggs				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 85208 North Bank Lane				Company NAIC Number:	
City Coquille		State Oregon		ZIP Code 97423	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Township 28s, Range 14w, Section 10, Tax lot 700					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Farm House</u>					
A5. Latitude/Longitude: Lat. <u>43.155877</u> Long. <u>-124.341476</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>3</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>3575.00</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>15</u>					
c) Total net area of flood openings in A8.b <u>2295.00</u> sq in					
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>750.00</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>					
c) Total net area of flood openings in A9.b <u>N/A</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number Coos County 41011C0515F			B2. County Name Coos		B3. State Oregon
B4. Map/Panel Number 41011C0515	B5. Suffix F	B6. FIRM Index Date 12-07-2018	B7. FIRM Panel Effective/ Revised Date 12-07-2018	B8. Flood Zone(s) A	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 22.00 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 type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input checked="" type="checkbox"/> Other/Source: <u>USGS Topo Map</u>					
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, 2022

<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. 85208 North Bank Lane			Policy Number:	
City Coquille	State Oregon	ZIP Code 97423	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: NGA OPUS SOLUTION REPORT    Vertical Datum: OP1615477975374

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) _____   | 19.1 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor _____   | 19.4 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) _____   | N/A  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab) _____  | 17.2 | <input checked="" 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) _____ | 14.5 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) _____  | 14.4 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) _____   | 15.9 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____                                  | 15.6 | <input checked="" 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.

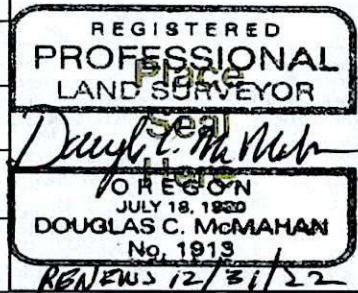
Certifier's Name Doug C. McMahan	License Number PLS 1913
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Title Surveyor
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Company Name Stuntzner Engineering and Forestry, LLC
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Address 705 S 4th St., P.O. Box 118
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City Coos Bay	State Oregon	ZIP Code 97420
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Signature <i>Douglas C. McMahan</i>	Date 3/11/21	Telephone (541) 267-2872	Ext. 203
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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)  
Propane Tank is at 14.5 feet



# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expiration Date: November 30, 2022

<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. 85208 North Bank Lane			Policy Number:
City Coquille	State Oregon	ZIP Code 97423	Company NAIC Number

## SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

## SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative's Name

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments

Check here if attachments.



# BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008  
Expiration Date: November 30, 2022

## ELEVATION CERTIFICATE

<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. 85208 North Bank Lane			Policy Number:
City Coquille	State Oregon	ZIP Code 97423	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

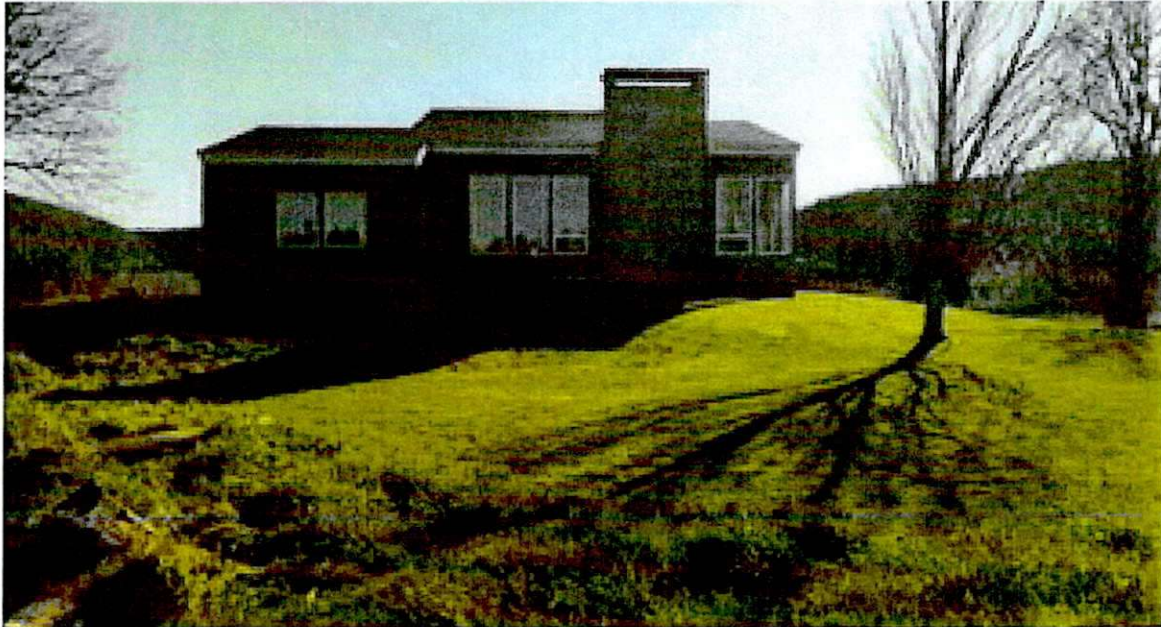


Photo One

Photo One Caption West side of house

Clear Photo One

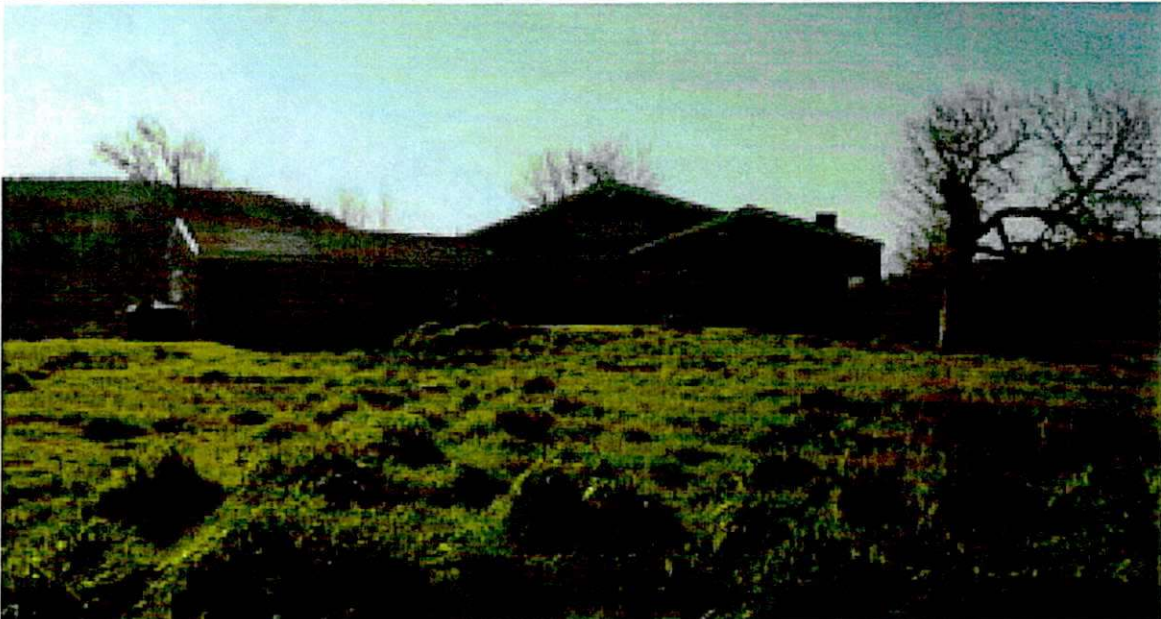


Photo Two

Photo Two Caption North side of house

Clear Photo Two

# BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008  
Expiration Date: November 30, 2022

## ELEVATION CERTIFICATE

<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. 85208 North Bank Lane			Policy Number:
City Coquille	State Oregon	ZIP Code 97423	Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo Three

Photo Three Caption South side of house

Clear Photo Three



Photo Four

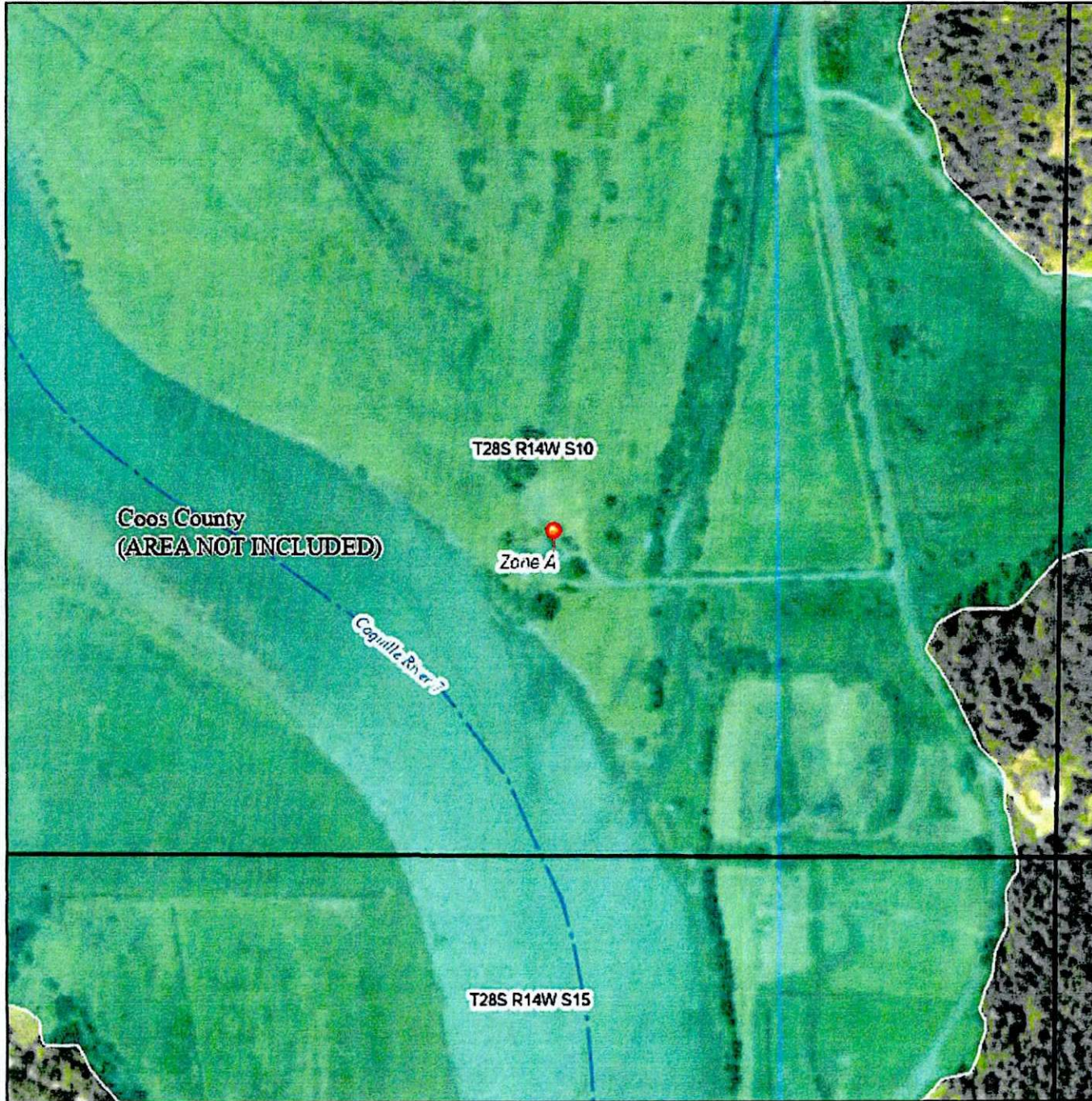
Photo Four Caption East side of house

Clear Photo Four

# National Flood Hazard Layer FIRMette



124°20'47"W 43°9'34"N



## Legend

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

- |                                    |  |  |
|------------------------------------|--|--|
| <b>SPECIAL FLOOD HAZARD AREAS</b>  |  | Without Base Flood Elevation (BFE)<br>Zone A, V, A99   |
|                                    |  | With BFE or Depth Zone AE, AO, AH, VE, AR  |
|                                    |  | Regulatory Floodway  |
| <b>OTHER AREAS OF FLOOD HAZARD</b> |  | 0.2% Annual Chance Flood Hazard, Area of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile Zone C |
|                                    |  | Future Conditions 1% Annual Chance Flood Hazard Zone X   |
|                                    |  | Area with Reduced Flood Risk due to Levee. See Notes. Zone X   |
|                                    |  | Area with Flood Risk due to Levee Zone D   |
| <b>OTHER AREAS</b>                 |  | NO SCREEN Area of Minimal Flood Hazard Zone X  |
|                                    |  | Effective LOMRs  |
| <b>GENERAL STRUCTURES</b>          |  | Area of Undetermined Flood Hazard Zone C   |
|                                    |  | Channel, Culvert, or Storm Sewer   |
|                                    |  | Levee, Dike, or Floodwall  |
| <b>OTHER FEATURES</b>              |  | Cross Sections with 1% Annual Chance Water Surface Elevation   |
|                                    |  | Coastal Transect   |
|                                    |  | Base Flood Elevation Line (BFE)  |
|                                    |  | Limit of Study   |
|                                    |  | Jurisdiction Boundary  |
| <b>MAP PANELS</b>                  |  | Digital Data Available   |
|                                    |  | No Digital Data Available  |
|                                    |  | Unmapped   |

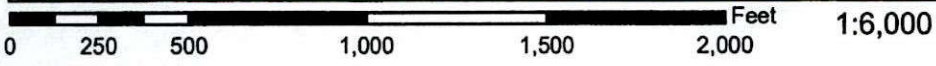


The pin displayed on the map is an approximate point selected by the user and does not represent an authoritative property location.

This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 3/9/2021 at 11:51 AM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.



124°20'10"W 43°9'8"N

## Ashley Miller

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**From:** opus <opus@ngs.noaa.gov>  
**Sent:** Thursday, March 11, 2021 7:55 AM  
**To:** Ashley Miller  
**Subject:** OPUS solution : 66130690.21o OP1615477975374

FILE: 66130690.21o OP1615477975374

2005 NOTE: The IGS precise and IGS rapid orbits were not available  
2005 at processing time. The IGS ultra-rapid orbit was/will be used to  
2005 process the data.  
2005

### NGS OPUS SOLUTION REPORT

=====

All computed coordinate accuracies are listed as peak-to-peak values.  
For additional information: <https://www.ngs.noaa.gov/OPUS/about.jsp#accuracy>

USER: amiller@stuntzner.com                      DATE: March 11, 2021  
RINEX FILE: 6613069q.21o                         TIME: 15:54:28 UTC

SOFTWARE: page5 2008.25 master55.pl 160321    START: 2021/03/10 16:27:00  
EPHEMERIS: igu21483.eph [ultra-rapid]        STOP: 2021/03/10 21:17:00  
NAV FILE: brdc0690.21n                        OBS USED: 13007 / 13701 : 95%  
ANT NAME: TRMR8                                # FIXED AMB: 80 / 84 : 95%  
ARP HEIGHT: 1.64                                OVERALL RMS: 0.014(m)

REF FRAME: NAD\_83(2011)(EPOCH:2010.0000)    ITRF2014 (EPOCH:2021.1885)

X:	-2628803.571(m)	0.003(m)	-2628804.459(m)	0.003(m)
Y:	-3847801.536(m)	0.006(m)	-3847800.275(m)	0.006(m)
Z:	4340183.746(m)	0.005(m)	4340183.779(m)	0.005(m)

LAT:	43 9 23.34139	0.005(m)	43 9 23.35414	0.005(m)
E LON:	235 39 33.32599	0.003(m)	235 39 33.26206	0.003(m)
W LON:	124 20 26.67401	0.003(m)	124 20 26.73794	0.003(m)
EL HGT:	-23.368(m)	0.007(m)	-23.739(m)	0.007(m)
ORTHO HGT:	3.021(m)	0.052(m)	[NAVD88 (Computed using GEOID18)]	

### UTM COORDINATES    STATE PLANE COORDINATES

	UTM (Zone 10)	SPC (3601 OR N)
Northing (Y) [meters]	4779064.716	-49274.682
Easting (X) [meters]	390995.342	2187578.830
Convergence [degrees]	-0.91715000	-2.72380000
Point Scale	0.99974617	1.00050233
Combined Factor	0.99974983	1.00050600

US NATIONAL GRID DESIGNATOR: 10TCN9099579064(NAD 83)

**BASE STATIONS USED**

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
AF9662	CABL CABL_PNGA_OR1997	CORS ARP	N425009.943 W1243347.986	39953.8
DO8790	RSBG ROSEBURG	CORS ARP	N431406.049 W1232133.727	80243.2
AJ7211	DDSN DDSN_PNGA_OR1999	CORS ARP	N430707.633 W1231439.212	89319.9

**NEAREST NGS PUBLISHED CONTROL POINT**

OA1438 COQVILLE RIVER BARN WEST GABLE N430921.248 W1242028.743 79.7

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.





James Dias, *Owner*  
61007 Old Wagon Rd  
Coos Bay, OR 97420  
CCB# 230345  
CA Lic #947255



Cell: (541) 808-7816  
Fax: (541) 267-3869  
Jamesdiasconstuction@gmail.com

January 28, 2021

River House  
Attn: **Craig Briggs**  
85208 North Bank Ln  
Couquill Or 97423

We are pleased to offer a *Budget* of \$161,000.00 to complete work as discussed between myself, Craig and Colleen Briggs this work consisting of:

- Deck and cover (26,000.00)
- Masonary Fireplace (25,000.00)
- Living room and Kitchen addition (95,000)
- Contractor Fee (6%) (8,760.00)
- Contingency (4%) (6240.00)

Excludes:

- Permits, Fees. Est. (1500-2500)
- Any unforeseen concealed structural deficiencies.
- Any and all hazardous material abatement or handling.

By: \_\_\_\_\_  
James Dias  
James Dias Construction LLC



# Wetland Land Use Notice Response

## Response Page

Department of State Lands (DSL) WN# \*

WN2021-0465

## Responsible Jurisdiction

Staff Contact	Jurisdiction Type	Municipality
Michelle Berglund	County	Coos
Local case file #	County	
CD-21-079, DR-21-069	Coos	

## Activity Location

Township	Range	Section	QQ section	Tax Lot(s)
30S	14W	07		200

Street Address

Lois Ln

Address Line 2

City

State / Province / Region

Postal / Zip Code

Country

Coos

Latitude

42.985162

Longitude

-124.411229

## Wetland/Waterway/Other Water Features



- There are/may be wetlands, waterways or other water features on the property that are subject to the State Removal-Fill Law based upon a review of wetland maps, the county soil survey and other available information.
- The National Wetlands Inventory shows wetland, waterway or other water features on the property
- The county soil survey shows hydric (wet) soils on the property. Hydric soils indicate that there may be wetlands.

## Your Activity



- A state permit will not be required for the proposed project because, based on the submitted site plan, the project avoids impacts to jurisdictional wetlands, waterways, or other waters.

## Applicable Oregon Removal-Fill Permit Requirement(s)



- A state permit is required for 50 cubic yards or more of fill removal or other ground alteration in wetlands, below ordinary high water of waterways, within other waters of the state, or below highest measured tide.

## Closing Information



### Additional Comments

This response is for the replacement of a house in the same location. This location, as shown on the submitted site plan, does not impact wetlands or other waters of the state. Please note that there may be jurisdictional waters elsewhere on the property.

**This is a preliminary jurisdictional determination and is advisory only.**

This report is for the State Removal-Fill law only. City or County permits may be required for the proposed activity.

### Contact Information

- For information on permitting, use of a state-owned water, wetland determination or delineation report requirements please contact the respective DSL Aquatic Resource, Proprietary or Jurisdiction Coordinator for the site county. The current list is found at: <http://www.oregon.gov/dsl/ww/pages/wwstaff.aspx>
- The current Removal-Fill permit and/or Wetland Delineation report fee schedule is found at: <https://www.oregon.gov/dsl/WW/Documents/Removal-FillFees.pdf>

### Response Date

5/19/2021

### Response by:

Lynne McAllister

### Response Phone:

503-986-5300



## COQUILLE INDIAN TRIBE

3050 Tremont Ave. North Bend, OR 97459  
Telephone: (541) 756-0904 ~ Fax: (541) 756-0847  
[www.coquilletribe.org](http://www.coquilletribe.org)

May 19, 2021

Coos County Planning Department  
250 N Baxter  
Coquille, OR 97429

Re: CD-21-090

Project location: T26S, R14W, Section 1, TL110

Thank you for the opportunity to comment on the proposal to construct a new driveway and single-family dwelling at the above referenced location. The Coquille Indian Tribe THPO concurs with the anticipatory finding of no historic properties/cultural resources effected. **Extreme caution is recommended.** If any known or suspected cultural resources are encountered during the work, ground-disturbing activities should cease and the landowner or contractor should contact our office immediately.

Please be aware that state statutes and federal law governs how archaeological sites are to be managed. 43 CFR 10 applies on tribal and federal lands, federal projects, federal agencies, as well as to federal actions and federally funded (directly or indirectly) projects. ORS 97.745 prohibits the willful removal, mutilation, defacing, injury, or destruction of any cairn, burial, human remains, funerary objects, or objects of cultural patrimony of a Native Indian. ORS 358.920 prohibits excavation, injury, destruction, or alteration of an archaeological site or object, or removal of an archaeological object from public or private lands. If archaeological materials are discovered, uncovered, or disturbed on the property, we will discuss the appropriate actions with all necessary parties.

Thank you again and feel free to contact me at (541) 217-5721 if you have any questions.

*Masi* (thank you),

Todd Martin  
Tribal Historic Preservation Specialist

CRT21206



# COQUILLE INDIAN TRIBE

3050 Tremont Ave. North Bend, OR 97459  
Telephone: (541) 756-0904 ~ Fax: (541) 756-0847  
[www.coquilletribe.org](http://www.coquilletribe.org)

May 19, 2021

Coos County Planning Department  
250 N Baxter  
Coquille, Oregon 97429

Re: V-21-001\_ACU-21-033\_ACU-21-034

Project location: 54182 Gould Rd, Bandon, OR 97411

Thank you for the opportunity to comment on the proposal to construct a new single-family dwelling at the above referenced location. Our records show known cultural resources within extreme proximity to the project area.

Due to the proximity to known cultural resources, we request that the landowner and/or contractor contact our office at (541) 808-5554 (Kassandra Rippee, Archaeologist/THPO) to schedule a Cultural Resource Monitor to be on site during all ground-disturbing activities. Please schedule the monitor a **minimum of 72-hours** in advance of anticipated project start time.

Please be aware that state statutes and federal law governs how archaeological sites are to be managed. 43 CFR 10 applies on tribal and federal lands, federal projects, federal agencies, as well as to federal actions and federally funded (directly or indirectly) projects. ORS 97.745 prohibits the willful removal, mutilation, defacing, injury, or destruction of any cairn, burial, human remains, funerary objects, or objects of cultural patrimony of a Native Indian. ORS 358.920 prohibits excavation, injury, destruction, or alteration of an archaeological site or object, or removal of an archaeological object from public or *private lands*. If archaeological materials are discovered, uncovered, or disturbed on the property, we will discuss the appropriate actions with all necessary parties.

Thank you again and feel free to contact me if you have any questions.

Masi (thank you),

Todd Martin  
Tribal Historic Preservation Specialist

CRT21204