



Federal Emergency Management Agency
Washington, D.C. 20472

LETTER OF MAP AMENDMENT
DETERMINATION DOCUMENT (REMOVAL)

COMMUNITY AND MAP PANEL INFORMATION		LEGAL PROPERTY DESCRIPTION
COMMUNITY	CITY OF COTTAGE GROVE, LANE COUNTY, OREGON	Lot 1, Block 1, Oak Grove, as described in the Individual Bargain and Sale Deed recorded as Instrument No. 2003-118842, in the Office of the County Clerk, Lane County, Oregon
	COMMUNITY NO.: 410120	
AFFECTED MAP PANEL	NUMBER: 41039C2087F	
	NAME: LANE COUNTY, OREGON AND INCORPORATED AREAS	
	DATE: 06/02/1999	
FLOODING SOURCE: SILK CREEK		APPROXIMATE LATITUDE & LONGITUDE OF PROPERTY: 43.796, -123.075 SOURCE OF LAT & LONG: PRECISION MAPPING STREETS 4.0 DATUM: NAD83

DETERMINATION

LOT	BLOCK/SECTION	SUBDIVISION	STREET	OUTCOME WHAT IS REMOVED FROM THE SFHA	FLOOD ZONE	1% ANNUAL CHANCE FLOOD ELEVATION (NGVD 29)	LOWEST ADJACENT GRADE ELEVATION (NGVD 29)	LOWEST LOT ELEVATION (NGVD 29)
1	1	Oak Grove	1620 Anthony Avenue	Structure	X (shaded)	646.8 feet	648.1 feet	—

Special Flood Hazard Area (SFHA) - The SFHA is an area that would be inundated by the flood having a 1-percent chance of being equaled or exceeded in any given year (base flood).

ADDITIONAL CONSIDERATIONS (Please refer to the appropriate section on Attachment 1 for the additional considerations listed below.)

PORTIONS REMAIN IN THE FLOODWAY

This document provides the Federal Emergency Management Agency's determination regarding a request for a Letter of Map Amendment for the property described above. Using the information submitted and the effective National Flood Insurance Program (NFIP) map, we have determined that the structure(s) on the property(ies) is/are not located in the SFHA, an area inundated by the flood having a 1-percent chance of being equaled or exceeded in any given year (base flood). This document amends the effective NFIP map to remove the subject property from the SFHA located on the effective NFIP map; therefore, the Federal mandatory flood insurance requirement does not apply. However, the lender has the option to continue the flood insurance requirement to protect its financial risk on the loan. A Preferred Risk Policy (PRP) is available for buildings located outside the SFHA. Information about the PRP and how one can apply is enclosed.

This determination is based on the flood data presently available. The enclosed documents provide additional information regarding this determination. If you have any questions about this document, please contact the FEMA Map Assistance Center toll free at (877) 336-2627 (877-FEMA MAP) or by letter addressed to the Federal Emergency Management Agency, 3601 Eisenhower Avenue, Suite 600, Alexandria, VA 22304-6439.

Doug Bellomo, P.E., CFM, Acting Chief
Hazard Identification Section, Mitigation Division
Emergency Preparedness and Response Directorate Version 1.3.3

1029299.1LOMA-SL103050821



PROFESSIONAL ENGINEERS
LAND SURVEYORS
BUILDING DESIGNERS

806 N. NINTH STREET COTTAGE GROVE, OREGON 97424
TELEPHONE: (541) 942-0126 FAX: (541) 942-7935

October 28, 2005

City of Cottage Grove
400 East Main
Cottage Grove, Oregon 97424

RECEIVED OCT 28 2005

Attn: Howard Schesser,
Community Development Director

RE: Letter of Map Amendment

Dear Mr. Schesser:

Recently we submitted a Letter of Map Amendment (LOMA) application to the Federal Emergency Management Agency (FEMA) for 1520 Anthony Street. We recently received back a request that a Community Acknowledgment Form be signed verifying that the structure is not within the Regulatory Floodway.


I have enclosed the required form as well as copies of the original submittal to FEMA for your review and signature.

The structure is located within Zone X (unshaded) by map and the lowest adjacent grade is 2.0 feet above the Base Flood Elevation.

We only have 90 days to get this signed form back to FEMA so your prompt attention to this matter is appreciated.

Please feel free to call with any questions.

Yours truly,
Geomax, Inc.



Sean E. Swanson
Survey Crew Chief

V:\Projects\2005\F173\Wpdocs\city_ltr_O28_05.wpd



Cottage Grove



Community Development

400 Main Street
Cottage Grove, OR 97424

(541) 942-3340
Fax 942-1267
www.cottagegrove.org
E-mail: planning@cottagegrove.org

December 1, 2005

Sean E Swanson
Geomax
806 N Ninth St
Cottage Grove, Or 97424

Dear Sean:

Re: LOMA for 1520 Anthony Street

Please be advised that I have now reviewed the material submitted and completed the requested form noting that the structure is outside the regulated floodway but the property at the rear of the structure is in the regulated floodplain & floodway. If I can provide any further information please contact this office.

Sincerely yours,

Howard P. Schesser
Community Development Director &
Emergency Program Manager

cc: File

FEDERAL EMERGENCY MANAGEMENT AGENCY
COMMUNITY ACKNOWLEDGMENT FORM

O.M.B. No. 3067-0147
 Expires September 30, 2005

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 0.88 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing, reviewing, and submitting the form. You are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472, Paperwork Reduction Project (3067-0147). Submission of the form is required to obtain or retain benefits under the National Flood Insurance Program. **Please do not send your completed survey to the above address.**

This form must be completed for requests involving the existing or proposed placement of fill (complete Section A) OR to provide acknowledgment of this request to remove a property from the SFHA that is located within the regulatory floodway (complete Section B).

This form must be completed and signed by the official responsible for floodplain management in the community. The community number and the subject property address must appear in the space provided below.

Community Number: 410120 Property Name or Address: 1520 ANTHONY

A. REQUESTS INVOLVING THE PLACEMENT OF FILL

As the community official responsible for floodplain management, I hereby acknowledge that we have received and reviewed this Letter of Map Revision Based on Fill (LOMR-F) or Conditional LOMR-F request. Based upon the community's review, we find the completed or proposed project meets or is designed to meet all of the community floodplain management requirements, including the requirement that no fill be placed in the regulatory floodway, and that all necessary Federal, State, and local permits have been, or in the case of a Conditional LOMR-F, will be obtained. In addition, we have determined that the land and any existing or proposed structures to be removed from the SFHA are or will be reasonably safe from flooding as defined in 44CFR 65.2(c), and that we have available upon request by FEMA, all analyses and documentation used to make this determination. For LOMR-F requests, we understand that this request is being forwarded to FEMA for a possible map revision.

Community Comments: _____

Community Official's Name and Title: (Please Print or Type)		Telephone No.:
Community Name:	Community Official's Signature: (required)	Date:

B. PROPERTY LOCATED WITHIN THE REGULATORY FLOODWAY

As the community official responsible for floodplain management, I hereby acknowledge that we have received and reviewed this request for a LOMA. We understand that this request is being forwarded to FEMA to determine if this property has been inadvertently included in the regulatory floodway. We acknowledge that no fill on this property has been or will be placed within the designated regulatory floodway. We find that the completed or proposed project meets or is designed to meet all of the community floodplain management requirements.

Community Comments: The existing structure is outside the regulated floodway, but the rear portion of the property is in the flood plain & floodway.

Community Official's Name and Title: (Please Print or Type)		Telephone No.:
<u>HOWARD F SCHESSER, Community Development Director</u>	<u>Howard F Schesser</u>	<u>541-942-5340</u>
Community Name:	Community Official's Signature: (required)	Date:
<u>CARRAGE GROVE</u>	<u>Howard F Schesser</u>	<u>12-1-05</u>

October 13, 2005



PROFESSIONAL ENGINEERS
LAND SURVEYORS
BUILDING DESIGNERS
806 N. NINTH STREET COTTAGE GROVE, OREGON 97424
TELEPHONE: (541) 942-0126 FAX: (541) 942-7935

FEMA
LOMA Department
3601 Eisenhower Avenue, Suite 600
Alexandria, Virginia 22304-6425

Attention: LOMA Manager

RE: LOMA Request

Dear Sir/Madam:

The purpose of this letter is to request a LOMA for the structure located at 1520 Anthony, Cottage Grove, Oregon 97424.


Attached to this letter are the following items:

- 1- Copy of Elevation Certificate
- 2- Copy of Deed
- 3- Copy of a portion of FIRM map 41039C2087F, with the location of property highlighted
- 4- Completed application of LOMA.
- 5- Copy of tax map with the property highlighted
- 6- Copy of the Subdivision Plat with Lot highlighted
- 7- Copy of Case No. 04-10-0821A

The lowest adjacent grade of the structure located at 1520 Anthony, Cottage Grove, Oregon 97424 is 648.2'. The BFE elevation 646.2'. The lowest adjacent grade is 2.0 feet above the Base Flood Elevation. I have included a copy of a nearby LOMA for your review as well.

Your prompt attention to this matter is appreciated.

Yours truly,
Geomax, Inc.


Dennis A. Crowe PLS
Chief of Surveys

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:
BUILDING OWNER'S NAME WENDY FRIES			Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 1520 ANTHONY AVENUE			Company NAIC Number
CITY COTTAGE GROVE	STATE OR	ZIP CODE 97424	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 5, BLOCK 1, OAK GROVE (TL 20-03-29-43:03400)			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL			
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.##" or ##.#####)	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Other: <u>TAX</u>	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER CITY OF COTTAGE GROVE 410120		B2. COUNTY NAME LANE		B3. STATE OREGON	
B4. MAP AND PANEL NUMBER 41039C2087	B5. SUFFIX F	B6. FIRM INDEX DATE 6/2/99	B7. FIRM PANEL EFFECTIVE/REVISED DATE 6/2/99	B8. FLOOD ZONE(S) X	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 646.2

- B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe):
- B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe):
- B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date

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. Building Diagram Number 8 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, ARA, AR/AE, AR/A1-A30, AR/AH, AR/AO

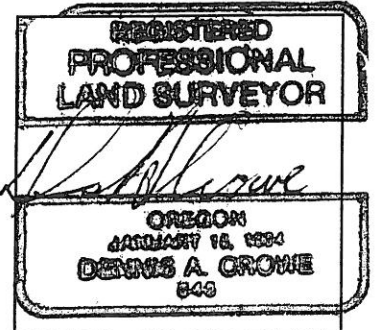
Complete Items C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum NGVD29 Conversion/Comments SEE PG2

Elevation reference mark used SEE PG2 Does the elevation reference mark used appear on the FIRM? Yes No

- a) Top of bottom floor (including basement or enclosure) 648. 6 ft.(m)
- b) Top of next higher floor 650. 2 ft.(m)
- c) Bottom of lowest horizontal structural member (V zones only) ____. ____ ft.(m)
- d) Attached garage (top of slab) 649. 0 ft.(m)
- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) ____. ____ ft.(m)
- f) Lowest adjacent (finished) grade (LAG) 648. 2 ft.(m)
- g) Highest adjacent (finished) grade (HAG) 649. 0 ft.(m)
- h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 12
- i) Total area of all permanent openings (flood vents) in C3.h 1577 sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date



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 in Sections A, B, and C 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.

CERTIFIER'S NAME DENNIS A. CROWE PLS

LICENSE NUMBER 845

TITLE CHIEF OF SURVEYS		COMPANY NAME GEOMAX INC.	
ADDRESS 806 NORTH NINTH	CITY COTTAGE GROVE	STATE OR	ZIP CODE 97424
SIGNATURE <i>Dennis A. Crowe</i>	DATE <u>12/14/05</u>	TELEPHONE 541942-0126	

IMPORTANT: In these spaces, copy the corresponding information from Section A.

For Insurance Company Use:

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

Policy Number

1520 ANTHONY AVENUE

CITY
COTTAGE GROVE

STATE
OR

ZIP CODE
97424

Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

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

COMMENTS

RM IS CITY BENCH MARK J1.23 NGVD 29 PER CITY. THIS STRUCTURE IS WITHIN ZONE X (UNSHADED) PER FIRM 2087. THE LOWEST ADJACENT GROUND ELEVATION TO THIS STRUCTURE IS 2.0' ABOVE THE BASE FLOOD ELEVATION OF THE ADJACENT ZONE AE

Check here if attachments

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

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number __ (Select the building diagram most similar to the building for which this certificate is being completed – see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is __ ft.(m) __ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).

E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is __ ft.(m) __ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.

E4. The top of the platform of machinery and/or equipment servicing the building is __ ft.(m) __ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).

E5. For 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, C (Items C3.h and C3.i only), 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, C, and E are correct to the best of my knowledge.*

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS CITY STATE ZIP CODE

SIGNATURE DATE TELEPHONE

COMMENTS

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER

G5. DATE PERMIT ISSUED

G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED

G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is:

_____ ft.(m)

Datum:

G9. BFE or (in Zone AO) depth of flooding at the building site is:

_____ ft.(m)

Datum:

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY NAME

TELEPHONE

SIGNATURE

DATE

This elevation certificate was reviewed for compliance against the City of Cottage Grove Zoning or Development Code effective at the date of building permit issuance.

Check here if attachments

WARRANTY DEED (INDIVIDUAL)

WEST COAST INVESTMENTS GROUP LLC, herein called grantor, convey(s) to TONY HERRIG and WENDY CHRISTINE FRIES, ~~not as tenants in common, but with the right of survivorship~~, Grantee, all that real property situated in the County of LANE, State of Oregon, described as: *Husband and Wife

LOT 5, BLOCK 1, OAK GROVE, AS PLATTED AND RECORDED IN VOLUME 21, PAGE 18, LANE COUNTY OREGON PLAT RECORDS, IN LANE COUNTY, OREGON.

and covenant(s) that grantor is the owner of the above described property free of all encumbrances except COVENANTS, CONDITIONS, RESTRICTIONS, EASEMENTS OF RECORD AND 2004-05 REA; PROPERTY TAXES, WHICH ARE A LIEN, BUT NOT YET DUE AND PAYABLE

and will warrant and defend the same against all persons who may lawfully claim the same, except as shown above.

The true and actual consideration for this transfer is \$149,900.00.*

Dated July 27, 2004.

WEST COAST INVESTMENTS GROUP LLC

Frank Trotter
FRANK TROTTER, MANAGING MEMBER

STATE OF OREGON, County of LANE) ss.

On this July 29, 2004 personally appeared the above named FRANK TROTTER, AS ^{*Managing} MEMBER OF WEST COAST INVESTMENTS GROUP LLC and acknowledged the foregoing instrument to be his/her/their voluntary act and deed.



Before me:

Gina L. Larson
Notary Public for Oregon
My commission expires: 1/28/08

* The dollar amount should include cash plus all encumbrances existing against the property to which the property remains subject or which the purchaser agrees to pay or assume.

WARRANTY DEED (INDIVIDUAL)

WEST COAST INVESTMENTS GROUP LLC

TO

Send Tax Statements to:
TONY HERRIG and WENDY CHRISTINE FRIES
1520 ANTHONY AVENUE
COTTAGE GROVE, OR 97424

After Recording Return to:
AMERICAN TITLE GROUP
560 COUNTRY CLUB PARKWAY
. SUITE 110
EUGENE, OR 97401

STATE OF OREGON,)

Division of Chief Deputy Clerk
Lane County Deeds and Records

2004-060337



\$26.00

00609155200400603370010010

07/30/2004 02:50:27 PM

RPR-DEED Cnt=1 Str=6 CASHIER 07
\$5.00 \$11.00 \$10.00

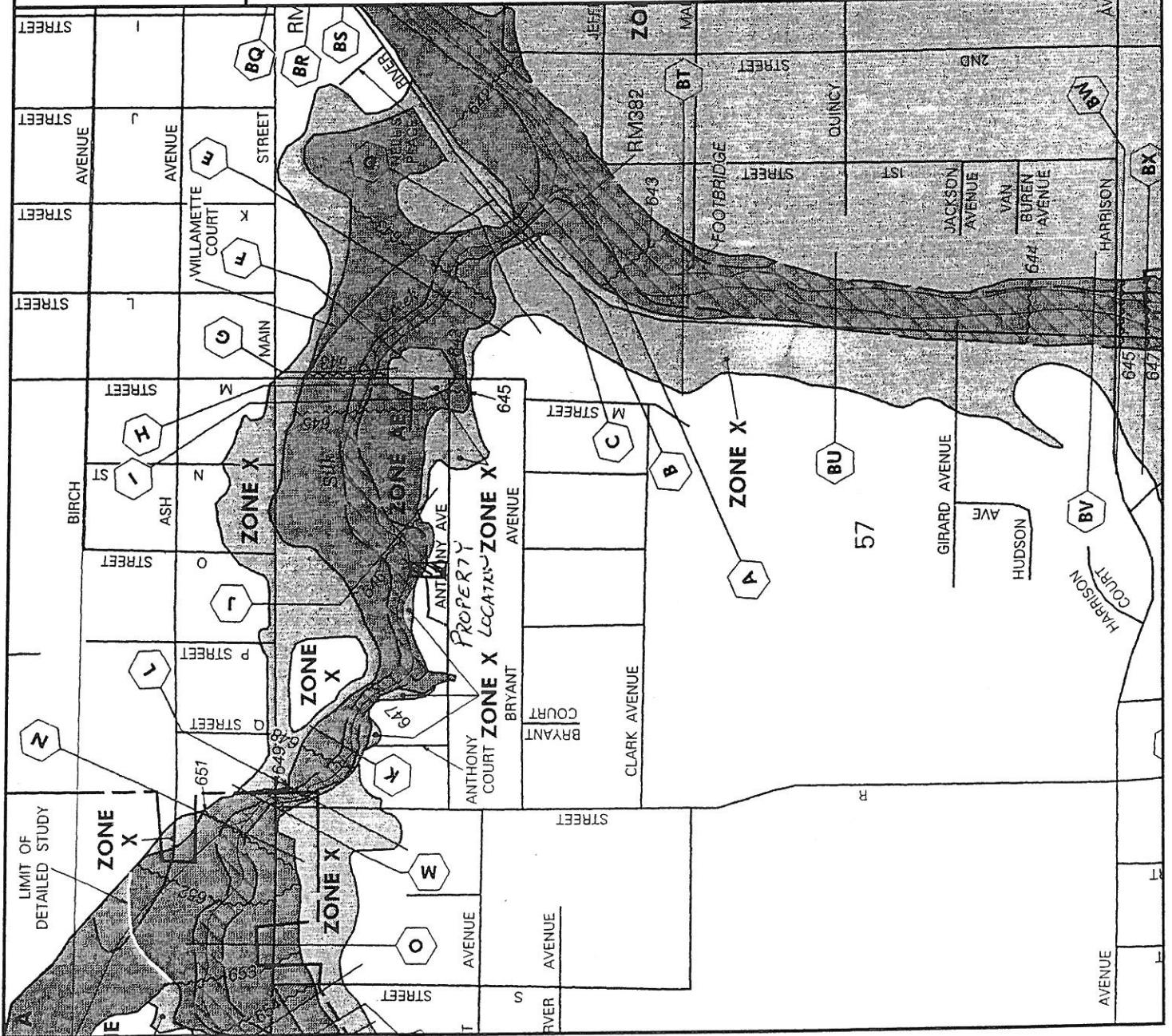
Title

By _____ Deputy



APPROXIMATE SCALE IN FEET

500 0 500



NATIONAL FLOOD INSURANCE PROGRAM

FIRM FLOOD INSURANCE RATE MAP
LANE COUNTY, OREGON AND INCORPORATED AREAS

PANEL 2087 OF 2975
 (SEE MAP INDEX FOR PANELS NOT PRINTED)

CONTAINS COMMUNITY	NUMBER	PANEL	SUFFIX
COTTAGE GROVE CITY OF LANE COUNTY UNINCORPORATED AREAS	41020	2087	F
	45581	2087	F

MAP NUMBER 41039C2087 F
EFFECTIVE DATE: JUNE 2, 1999



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at www.msc.fema.gov

**FEDERAL EMERGENCY MANAGEMENT AGENCY
APPLICATION FORM FOR SINGLE RESIDENTIAL LOT OR STRUCTURE AMENDMENTS TO
NATIONAL FLOOD INSURANCE PROGRAM MAPS**

O.M.B. NO. 3067-0257
Expires May 31, 2005

PAPERWORK REDUCTION ACT

Public reporting burden for this form is estimated to average 2.4 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing, reviewing, and submitting the form. You are not required to respond to this collection of information unless a valid OMB control number is displayed in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, Federal Emergency Management Agency, 500 C Street, S.W., Washington DC 20472, Paperwork Reduction Project (3067-0257). Submission of this form is required to obtain or retain benefits under the National Flood Insurance Program.

This form should be used to request that the Federal Emergency Management Agency (FEMA) remove a single structure or legally recorded parcel of land or portions thereof, described by metes and bounds, certified by a registered professional engineer or licensed land surveyor, from a designated Special Flood Hazard Area (SFHA), an area that would be inundated by the flood having a 1%-chance of being equaled or exceeded in any given year (base flood), via Letter of Map Amendment (LOMA). It shall not be used for requests submitted by developers, for requests involving multiple structures or lots, for property in alluvial fan areas or coastal high hazard areas (V zones), or requests involving the placement of fill. (NOTE: Use MT-1 forms for such requests). Fill is defined as material placed to raise the grade to or above the Base Flood Elevation (BFE). The common construction practice of removing unsuitable existing material (topsoil) and backfilling with select structural material is not considered the placement of fill if the practice does not alter the existing (natural grade) elevation, which is at or above the BFE. Also, fill that is placed before the date of the first National Flood Insurance Program (NFIP) map showing the area in an SFHA is considered natural grade.

LOMA:

A letter from FEMA stating that an existing structure or parcel of land that has not been elevated by fill would not be inundated by the base flood.

A - This section may be completed by the property owner or by the property owner's agent.

1. Has fill been placed on your property?

- No Yes - If Yes, STOP!! - You must complete the MT-1 application forms; visit http://www.fema.gov/fhm/dl_mt-1.shtm or call the FEMA Map Assistance Center toll free: (877-FEMA MAP) (877-336-2627)

2. Legal description of Property (Lot, Block, Subdivision) and street address of the Property (if different from mailing address): *LOT 5, BLOCK 1, OAK GROVE SUBDIVISION
1520 ANTHONY
COTTAGE GROVE, OR 97424*

3. Are you requesting that the flood zone designation be removed from (check one):

- Your entire legally recorded property?
 A portion of your legally recorded property? (a metes and bounds description and map of the area to be removed, certified by a registered professional engineer or licensed land surveyor are required)
 A structure on your property? What is the date of construction? *1986*

All documents submitted in support of this request are correct to the best of my knowledge. I understand that any false statement may be punishable by fine or imprisonment under Title 18 of the United States Code, Section 1001.

Applicant's Name: <i>DENNIS A. CROWE PLS 845</i>	Company: <i>GEOMAX INC.</i>
Mailing Address: <i>806 NORTH NINTH COTTAGE GROVE - OR 97424</i>	Daytime Telephone No.: <i>541-542-0126</i>
E-mail address:	Fax No.: <i>541-542-7935</i>
Signature of Applicant (required) <i>Dennis A. Crowe</i>	Date <i>14 10/05/05</i>

End of Section A

SW 1/4 SE 1/4 Sec 29 T.20S. R.3W.W.M.
LANE COUNTY
1" = 100'

20 03 29 4 3

045-08

045-07
MARKET ROAD NO 27

WEST MAIN STREET

DATE	REASON	APPROVED

CANCELLED
1000
1700
1701
1702
1800
2800
400
4500
4701
4802
4902
5000

STRUCTURE
LOCATION

NOTE: ON SEPARATE SHEET

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50
---	---	---	---	---	---	---	---	---	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----

See Map 20 03 29 34

See Map 20 03 29 44



045-01

SEE MAP 20-03-32

