

**City of West Linn
PRE-APPLICATION CONFERENCE MEETING**

Notes

June 16, 2016

SUBJECT: Flood Management Area (FMA) permit

FILE: PA-16-10

ATTENDEES: Applicant: David Eraut; Gary Buford, PE, PLS.; Rachael Verdick
Staff: Jennifer Arnold (Associate Planner)

The following is a summary of the meeting discussion provided to you from staff meeting notes. Additional information may be provided to address any "follow-up" items identified during the meeting. These comments are PRELIMINARY in nature. Please contact the Planning Department with any questions regarding approval criteria, submittal requirements, or any other planning-related items. Please note disclaimer statement below.

Site Information

Site Address: 5688 River Street
Area: 18,877 sq. ft. (0.43 acres)
Comprehensive Plan Designation: Low Density Residential
Zoning Classification: R-10 (10,000 square foot minimum lot size)
Overlays: Flood Management Area (FMA) (100 and 500 year flood areas)
Habitat Conservation Area (HCA)

Project Details

The existing house is within the 100-year floodplain. The base flood elevation at this site is 47.8 feet. The area where the proposed addition would be located is in the 100 year floodplain, and will be required to be properly elevated above the base flood elevation. The applicant proposes to construct an addition to the living and dining room, as well as a second story addition above the existing garage. The current Elevation Certificate indicates the existing single family dwelling is properly elevated. The existing single family dwelling and the proposed addition will not impact the Habitat Conservation Area, which is on the back of the property.

Process

A FMA permit is required for development within the flood boundaries. The FMA permit deposit is \$1,050. Staff hours are billed against that amount. The submittal requirements of CDC 27.050 and approval criteria of CDC 27.060, 27.070, 27.080 must be met. The CDC is online at <http://westlinnoregon.gov/cdc>.

The elevation certificate must provide the pre-construction elevation of the site and existing structure to be developed and post construction elevation (post construction as a condition of approval) per FEMA's online elevation certificate <http://www.fema.gov/media-library/assets/documents/160> . For enclosed areas below the addition, the applicant should anticipate, as a condition of approval, to provide a "no rise" certification by a civil engineer that confirms that the proposed design has adequate

venting (“one for one”) that automatically equalizes flood levels so that encroachment into the floodway fringe will not result in a significant increase in the flood levels.

N/A is not an acceptable response to the FMA approval criteria. The submittal requirements may be waived, but the applicant must first identify the specific submittal requirement and request, in letter form, that it be waived by the Planning Manager and must identify the specific grounds for that waiver. The application form must be signed by the property owner.

Once the application and deposit/fee are submitted, the City has 30 days to determine if the application is complete or not. If the application is not complete, the applicant has 180 days to make it complete or provide written notice to staff that no other information will be provided.

Once the submittal is deemed complete, the staff will notify the affected parties of the proposal and invite comment. The Planning Manager will issue a decision to approve, approve with conditions or deny the application and notify affected parties. There is a 14-day window to appeal the decision of the Planning Manager following notice of the decision. If no appeal has been received by the close of the appeal period, the Planning Manager decision becomes final and the applicant may move forward with the development of their proposal.

Pre-application notes are void after 18 months. After 18 months with no application approved or in process, a new pre-application conference is required.

Typical land use applications can take 6-10 months from beginning to end.

DISCLAIMER: This summary discussion covers issues identified to date. It does not imply that these are the only issues. The burden of proof is on the applicant to demonstrate that all approval criteria have been met. These notes do not constitute an endorsement of the proposed application ***or provide any assurance of potential outcomes.*** Staff responses are based on limited material presented at this pre-application meeting. New issues, requirements, etc. could emerge as the application is developed. ***A new pre-application conference would have to be scheduled one that period lapses and these notes would no longer be valid. Any changes to the CDC standards may require a different design or submittal.***

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name David Eraut		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5688 River St		Company NAIC Number:
City West Linn	State Or	ZIP Code 97068

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
 Lot 5, Arbordale Tax Lot 1605 of Assessor's Map 2 2E 30AC

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential
 A5. Latitude/Longitude: Lat. 45°22'09.5"N Long. 122°36'36.1"W Horizontal Datum: NAD 1927 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 2

A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:	
a) Square footage of crawlspace or enclosure(s)	<u>1800</u> sq ft	a) Square footage of attached garage	<u>450</u> sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	<u>13</u>	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade	<u>N/A</u>
c) Total net area of flood openings in A8.b	<u>1248</u> sq in	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		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 City of West Linn 410024		B2. County Name Clackamas	B3. State Or
B4. Map/Panel Number 41005C0276	B5. Suffix D	B6. FIRM Index Date	B7. FIRM Panel Effective/Revised Date June 17, 2008
B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 47.8		

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
 FIS Profile FIRM Community Determined Other/Source: _____

B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source: _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
 Designation Date: N/A CBRS OPA

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: RD1491 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.

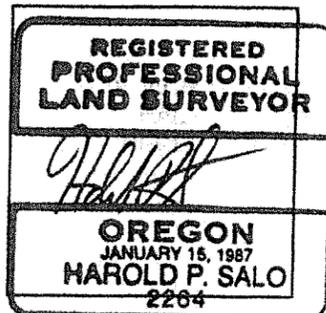
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>44.0</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>49.8</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>48.0</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>50.0</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>45.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>47.9</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>45.1</u>	<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.

Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No
 Check here if attachments.

Certifier's Name Harold P. Salo License Number Oregon PLS 2264
 Title President Company Name Andy Paris & Associates, Inc.
 Address 16057 Boones Ferry Rd. City Lake Oswego State Or ZIP Code 97035
 Signature *[Signature]* Date 12/14/15 Telephone 503-636-3341



ELEVATION CERTIFICATE, page 2

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. 5688 River St.			Policy Number:
City West Linn	State Or	ZIP Code 97068	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 9 out of 13 flood vents covered with styrofoam

Signature  Date 12/14/15

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 8–9 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'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. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by 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–G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
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- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters Datum _____
- G10. Community's design flood elevation: _____ feet meters Datum _____

Local Official's Name	Title
Community Name	Telephone
Signature	Date

Comments _____

Check here if attachments.

Building Photographs

See Instructions for Item A6.

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.
5688 River St

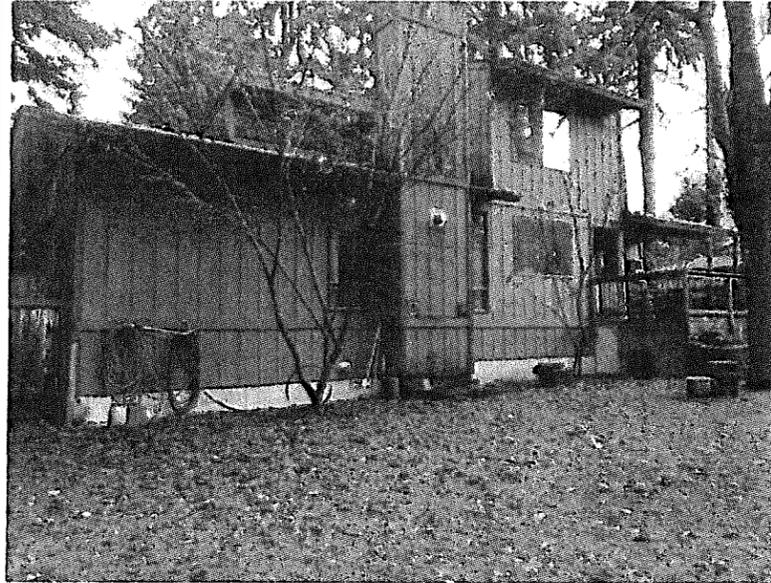
Policy Number:

City West Linn State Or ZIP Code 97068

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.

REAR VIEW



FRONT VIEW SHOWING GARAGE & ENTRANCE



Building Photographs

Continuation Page

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.
5688 River St

Policy Number:

City West Linn

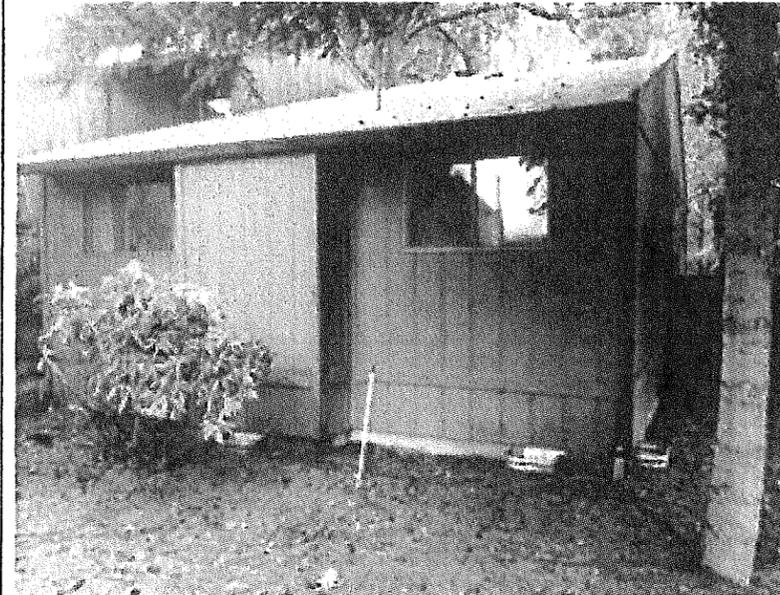
State Or

ZIP Code 97068

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.

FRONT RIGHT VIEW



LEFT SIDE VIEW

