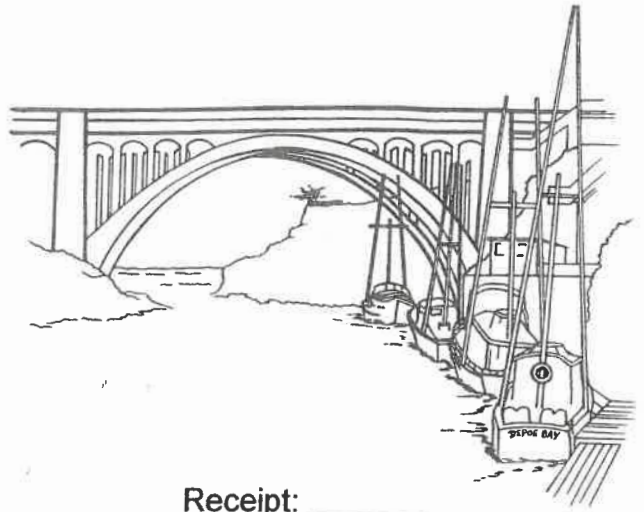


CITY of DEPOE BAY

Post Office Box 8 + Depoe Bay, Oregon 97341
Phone (541) 765-2361 + Fax (541) 765-2129
TDD# 1-800-735-2900



Zoning Action Application

TO BE COMPLETED BY OFFICE:

Deposit: N/A

Receipt: _____

Fee: TBD

1. Date Received _____	Staff Initials _____
1. Case File Number _____	Action: _____ Planning Commission _____
2. Action Requested C.U. _____ N.C.U. _____	Variance _____ Zone Change _____
Geotechnical Report _____	<u>Other</u> <u>BUILDING PERMIT</u>
3. Current Zoning _____	Current Plan Designation _____ Lot Size _____
4. Previous Planning Actions on Property _____	
5. Existing Code Violation(s) _____	

TO BE COMPLETED BY APPLICANT:

Reason For Request _____

Property Description T _____ S, R _____ W, W.M., Section _____ Tax Lot(s) _____

Applicant's Name _____

Address _____ City _____ State _____

Zip Code _____ Daytime Phone Number _____

Relationship to Property _____

(Owner, Contract Purchaser, etc.)

Agent (if any) _____

Directions to Property _____

Existing Structures _____

Current/Proposed Utilities: Sewage _____ Water _____

Anticipated Date of Development _____



Lincoln County

Building Division

210 SW 2nd St

Newport, OR 97365

lincolncountybldgdiv@co.lincoln.or.us

(541) 265-4192 Fax (541) 265-6945

RESIDENTIAL BUILDING APPLICATION

DEPARTMENT USE ONLY

Permit No:

Date Issued:

By:

WORK SITE LOCATION:

ADDRESS:
MAP & TAX LOT #:
CATEGORY OF CONSTRUCTION:
<input type="radio"/> Single Family <input type="radio"/> Multi-Family <input type="radio"/> Accessory Dwelling Unit
TYPE OF WORK:
<input type="radio"/> New <input type="radio"/> Addition (adding square footage) <input type="radio"/> Accessory structure (garage, carport, sheds, etc.) <input type="radio"/> Alteration (no change to square footage) <input type="radio"/> Other (retaining walls, solar, driveways, etc.)
DESCRIPTION OF WORK:

Valuation*:	
Sq Ft – 1st Floor:	
Sq Ft – 2nd Floor:	
Sq Ft – Unfinished living space:	
Sq Ft – Basement:	
Sq Ft – Covered porch/deck	
Sq Ft – garage or carport	
Garage or carport orientation:	
Number of bedrooms:	
Number of bathrooms:	
Number of floors:	
Total Height:	

APPLICANT:		
Name:		
Full Mailing Address:		
City:	State:	Zip:
Phone:		
Email:		
PROPERTY OWNER:		
Same as applicant? <input type="radio"/> Yes <input type="radio"/> No		
Name:		
Full Mailing Address:		
City:	State:	Zip:
Phone:		
Email:		
CONTRACTOR INSTALLATION		
Same as applicant? <input type="radio"/> Yes <input type="radio"/> No		
Business Name:		
Address:		
City/State/Zip:		
Phone:	Fax:	
E-mail:		
CCB license no.:		
Contact Name:	Phone:	
REQUIRED DOCUMENTS FOR APPLICATION		
I have downloaded and reviewed the plans and documents Checklist (Initials): _____		
SUBMITTAL METHOD FOR PLANS AND DOCS		
<input type="radio"/> Paper <input type="radio"/> Electronic		

Project information:

*The value (rounded to the nearest dollar) of all equipment, materials, labor, overhead and profit for the work described.

NOTICES

Associated permits: Separate permit applications are required for plumbing, mechanical, electrical, right of way, fire sprinkler, fire alarm and/or fire line permits associated with this building permit.

Expiration of application: This application is valid for 180 days after it has been accepted as complete.

Inspections required: Approved county inspections must be completed before the work performed is enclosed.

TERMS AND CONDITIONS

Correct information: I hereby certify I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Copyright release for government entities: I hereby grant permission to the County of Lincoln to copy, in whole or part, drawings and all other materials submitted by me, my agents, or representatives. This grant of permission extends to all copies needed for administration of the Counties regulatory, administrative, and legal functions, including sharing of information with other governmental entities.

Indemnity: I, the permit applicant, shall indemnify, defend and hold harmless the County of Lincoln, its officers, employees and agents from any and all claims arising out of or in connection with work done under this permit.

Owner permission: I have the legal right or permission from any property owner whose property is affected by the work covered under this permit to: 1) enter the property; 2) perform the work covered under this permit; 3) leave structures on or in the affected property. The issuance of this permit shall not be construed as permission or a grant of a legal right to enter upon or remain on any property affected by the work covered under this permit.

Electronic signature certification: By attaching an electronic signature (whether typed, graphical or free form) I certify herein that I have read, understood and confirm all the statements listed above and throughout the application form.

I agree (initials): _____

Authorized Signature: _____ **Print Name:** _____ **Date:** _____

RESIDENTIAL PLAN SUBMITTAL INTAKE CHECKLIST



Lincoln County Building Division
210 SW 2nd Street
Newport, OR 97365
Phone: 541-265-4192 • Fax: 541-265-6945
Email: lincolncountybldgdiv@co.lincoln.or.us

DEPARTMENT USE ONLY

Permit #: _____
County: _____
By: _____ Date: _____

PROJECT TYPE AND APPLICABLE CODE EDITION			
<input type="checkbox"/> New residence	<input type="checkbox"/> New, detached <i>accessory structure</i>	<input type="checkbox"/> Other:	
<input type="checkbox"/> Alteration/addition to existing residence	<input type="checkbox"/> Alteration/Addition to existing detached <i>accessory structure</i>		
<input type="checkbox"/> Deck	<input type="checkbox"/> Repair	ORSC Edition:	
MINIMAL SUBMITTAL REQUIREMENTS CHECKLIST FOR PLAN REVIEW			
	Provided	N/A	
1.			Planning/Zoning, water/sewer approval.
2.			Site/Plot Plan. (must be signed/stamped by Planning) Show the size and location of new construction and existing structures on the site and distances from lot lines. Reference ORSC Section R106.2.
3.			One complete set of Construction Documents. Construction documents must be of sufficient clarity to indicate the location, site specific design criteria per Table R301.2(1), nature and extent of the work proposed and show in detail conformity to the provisions of the code, relevant laws, ordinances, rules, and regulations. Reference ORSC Section R106.1.1.
4.			Foundation Plan. Provide plan dimensions, footing sizes, posts, anchor bolts, hold-downs, associated details, including reinforcement requirements and foundation vent locations. Reference ORSC Chapter 4.
5.			Floor Plans. Provide dimensions, room identification, door size, window size, location of smoke and carbon monoxide alarms, water heater, furnace, ventilation fans, plumbing fixtures, and balconies and decks that are 30 inches above grade. Reference ORSC Chapter 5.
6.			Cross sections and details. Show all framing members such as floor beams, headers, joists, sub-floor, wall construction, and roof construction. More than one cross section may be required to clearly portray construction. Show all wall and roof sheathing, roofing, roof slope, ceiling height, siding material, footings and foundation, stairs, fireplace construction, thermal insulation, etc. Reference ORSC Section R106.1.1.
7.			Elevation Views. Provide dimensions, including but not limited to, floor and roof eave and ridge elevations, opening locations, and finish grade profile. Reference ORSC Section R106.1.1.
8.			Wall Bracing. Provide engineered or prescriptive lateral calculations and plans showing braced wall lines, bracing method, location and length of braced wall panels, and associated connections to roof, floor, and foundation. Lateral design details and connections shall be incorporated into the plans. Reference ORSC Sections R106.1.3, R602.10, R301.1.3. See https://www.oregon.gov/bcd/codes-stand/Pages/residential-structures.aspx for prescriptive wall bracing calculators.
9.			Floor/Roof Framing Plans. Provide a plan for each roof and floor framing assembly that shows all structural framing members and supports, their sizes, spacing, species, grade, bearing locations, method of attachment (e.g. hardware), roof pitch, and attic ventilation requirements. Reference ORSC Chapter 5 and Chapter 8.
10.			Design Calculations. Provide for all structural load carrying members that are not based on prescriptive span tables in the code. Reference ORSC Section R301.1.3.
11.			Floor and/or Roof Trusses. Provide the design layout plan with truss details and calculations that have been stamped by an Oregon licensed engineer. Reference ORSC Sections R502.11 and R802.10.
12.			Energy Code Compliance. Show compliance with Chapter 11 Energy Efficiency, identifying the additional Envelope Enhancement Measure and Conservation Measure chosen from Table N1101.1(2) (when applicable). Reference ORSC Chapter 11.

Applicant: _____ Date: _____
Building Codes Services employee: _____ Date: _____



Information Notice to Owners About Construction Responsibilities

(ORS 701.325 (3))

Homeowners acting as their own general contractors to construct a new home or make a substantial improvement to an existing structure, can prevent many problems by being aware of the following responsibilities:

- Homeowners who use labor provided by workers not licensed by the Construction Contractors Board, may be considered an employer, and the workers who provide the labor may be considered employees. **As an employer, you must comply with the following:**
- **Oregon's Withholding Tax Law:** Employers must withhold income taxes from employee wages at the time employees are paid. You will be liable for the tax payments even if you don't actually withhold the tax from your employees. For more information, call the Department of Revenue at 503-378-4988.
- **Unemployment Insurance Tax:** Employers are required to pay a tax for unemployment insurance purposes on the wages of all employees. For more information, call the Oregon Employment Department at 503-947-1488.
- **Oregon's Business Identification Number (BIN):** is a combined number for both Oregon Withholding and Unemployment Insurance Tax. To file for a BIN, go online to the Oregon Business Registry. For questions, call 503-945-8091.
- **Workers Compensation Insurance:** Employers are subject to the Oregon Workers Compensation Law, and must obtain Workers Compensation Insurance for their employees. If you fail to obtain Workers Compensation Insurance, you could be subject to penalties and be liable for all claim costs if one of your workers is injured on the job. For more information, call the Workers Compensation Division at the Department of Consumer and Business Services at 800-452-0288.
- **Tax Withholding:** Employers must withhold Social Security Tax and Federal Income Tax from employee wages. You may be liable for the tax payment, even if you didn't actually withhold the tax. For a Federal EIN number, go online to www.irs.gov.

Other Responsibilities of Homeowners:

- **Code Compliance:** As the permit holder for a construction project, the homeowner is responsible for notifying building officials at the appropriate times, so that the required inspections can be performed. Homeowners are also responsible for resolving any failure to meet code requirements that may be found through inspections.
- **Property Damage and Liability Insurance:** Homeowners acting as their own contractors should contact their insurance agent to ensure adequate insurance coverage for accidents and omissions, such as falling tools, paint overspray, water damage from pipe punctures, fire, or work that must be redone. Liability Insurance must be sufficient to cover injuries to persons on the job site who are not otherwise covered as employees by Workers Compensation Insurance.
- **Expertise:** Homeowners should make sure they have the skills to act as their own general contractor, and the expertise required to coordinate the work of both rough-in and finish trades.

CONSTRUCTION CONTRACTORS BOARD

PO Box 14140, Salem, OR 97309-5052

Telephone: 503-378-4621 – Fax: 503-373-2007

Website Address: www.oregon.gov/ccb

Property Owner Statement Regarding Construction Responsibilities

Oregon Law requires residential construction permit applicants who are not licensed with the Construction Contractors Board to sign the following statement before a building permit can be issued. **(ORS 701.325 (2))**

This statement is required for residential building, electrical, mechanical, and plumbing permits. Licensed architect and engineer applicants, exempt from licensing under ORS 701.010 (7), need not submit this statement. This statement will be filed with the permit.

Please check the appropriate box:

☐

I own, reside in, or will reside in the completed structure and my general contractor is:

Name

CCB#

Expiration Date

☐

I will inform my general contractor that all subcontractors who work on the structure must be licensed with the Construction Contractors Board.

or

☐

I will be performing work on property I own, a residence that I reside in, or a residence that I will reside in. If I hire subcontractors, I will hire only subcontractors licensed with the Construction Contractors Board. If I change my mind and hire a general contractor, I will select a contractor who is licensed with the CCB and will immediately give the name of the contractor to the office issuing this Building Permit.

I have read and understand the Information Notice to Homeowners About Construction Responsibilities, and I hereby certify that the information on this homeowner statement is true and accurate.

Print Name of Permit Applicant

Signature of Permit Applicant

Date

Permit #: _____

Address: _____

Issued by: _____ Date: _____



SECTION A, SYSTEM DEVELOPMENT CHARGES/CONNECTION FEES

"This institution is an equal opportunity provider"

APPLICANT NAME: _____

MAILING ADDRESS: _____

TELEPHONE: HOME: _____ WORK: _____

OWNERS'S NAME, IF OTHER THAN APPLICANT: _____

PROPERTY ADDRESS: _____

LEGAL DESCRIPTION: (EXAMPLE: T 9 R 11 SEC 5AA TAX LOT 100.)

T _____ R _____ SEC _____ TAX LOT _____

DESCRIBE PROPOSED USE/CONNECTION AND PROPOSED DATE OF CONNECTION:

1. CITY DOES **NOT** INSTALL SEWER: DO YOU WISH CITY TO INSTALL WATER SERVICE ?
(IF AGREEMENT AVAILABLE) YES _____ NO _____

2. **CONNECTION FEES MUST** BE PAID AT TIME BUILDING PERMIT IS FILED.

3. UPON APPROVAL OF SERVICE CONNECTION, PLEASE NOTIFY CITY HALL **ONE WEEK IN ADVANCE OF DESIRED DATE OF CONNECTION.**

"FOR OFFICE USE ONLY"

COMMENTS/REQUIREMENTS FOR SERVICE CONNECTIONS TO PROPERTY:

CITY WATER SERVICE INSTALLATION AGREEMENT AVAILABLE? YES _____ NO _____

TYPE	SDC CHARGE	INSPECT AND/OR INSTALL	TOTAL
WATER SERVICE	_____	_____	_____
SEWER SERVICE	_____	_____	_____
STORM DRAIN	_____	_____	_____
TRANSPORTATION	_____	_____	_____
PARKS	_____	_____	_____
OTHER (CULVERT?)	_____	_____	_____
(Per Res. No. 183 and Ord. No. 61)			

GRAND TOTAL _____

SIGNATURE: _____ DATE: _____

Refer to Ordinance # 264 (adopted 6/21/11, eff 7/1/11)

ENR-Construction Cost Index 04/20-03/21 = 2.95%

Water SDC: \$ 3,120/EDU plus applicable inspection/installation fees (see below)

Sewer SDC: \$ 4,343/EDU plus applicable inspection/installation fees (see below)

Storm Drain SDC: \$1,788/EDU

Parks SDC: \$ 771/EDU

Transportation SDC: See attached chart

***Note to Staff: **View of the Bay Lots 1 thru 28** (Phase I) each are credited \$ 160.71 toward the Transportation SDC.
(Ex: SDC for a Single Family Dwelling is **\$ 3,141.29**)

Water & Sewer Inspection/Installation Charges

Rev. 10/2021

Refer to Resolution # 234

CPI-U - Portland-Salem 04/2020-03/2021 = 1.6%

Charges for service connections, in addition to SDC's are as follows:

SEWER: Inspection Only	\$ 295
------------------------	--------

WATER: 5/8" or 3/4" Service:	
Inspection Only, includes meter	\$ 894
Inspection & Installation	\$ 1,586

WATER: 1" Service	
Inspection Only, includes meter	\$ 1,164
Inspection & Installation	\$ 1,856

Water: 1.5" Service	
Inspection Only, includes meter	\$ 1,220
Inspection & Installation	\$ 1,912

WATER: 2" Service	
Inspection Only, includes meter	\$ 2,338
Inspection & Installation	\$ 3,030

WATER: 3", 4" or larger service connections:

Due to the infrequency of these connections the city does not stock these materials, costs shall be based upon actual cost at the time of application.
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**CITY OF DEPOE BAY
TRANSPORTATION SDC FEE SCHEDULE**

Rev. 10/1/2021

LAND USE (ITE CLASS)	ITE TRIP RATE	UNITS BASIS	PASS BY DEPOE BAY VOL. TRIP RATE	TRIP COST	SDC CHARGE
RESIDENTIAL					
Single Family Detached (210)	9.57	per unit	0%	9.57	364.00 \$ 3,483
Apartment (220)	6.63	per unit	0%	6.63	364.00 \$ 2,413
Condominium Townhouse(230)	5.86	per unit	0%	5.86	364.00 \$ 2,133
Mobile Home Park (240)	4.81	per space	0%	4.81	364.00 \$ 1,751
Planned Unit Dev. (270)	7.5	per unit	0%	7.5	364.00 \$ 2,730
Hotel (310)	8.92	per room	40%	5.35	364.00 \$ 1,947
Suites Hotel (311)	6.24	per room	40%	3.74	364.00 \$ 1,361
Motel (320)	9.11	per room	40%	5.47	364.00 \$ 1,991
Campground/RV Park (416)	9.11	per space	40%	5.47	364.00 \$ 1,991
COMMERCIAL/INDUSTRIAL					
Marina (420)	2.96	per berth	0%	2.96	364.00 \$ 1,077
General Light Industrial (110)	6.97	1,000 SF	0%	6.97	364.00 \$ 2,537
General Heavy Industrial (120)	1.5	1,000 SF	0%	1.5	364.00 \$ 546
Industrial Park (130)	6.96	1,000 SF	0%	6.96	364.00 \$ 2,533
Manufacturing (140)	3.82	1,000 SF	0%	3.82	364.00 \$ 1,390
Warehousing (150)	4.96	1,000 SF	0%	4.96	364.00 \$ 1,805
Mini Storage (151)	2.5	1,000 SF	0%	2.5	364.00 \$ 910
Elementary School (520)	1.02	student	0%	1.02	364.00 \$ 371
Middle School/Jr High (522)	1.45	student	0%	1.45	364.00 \$ 528
High School (530)	1.79	student	0%	1.79	364.00 \$ 652
Jr/Community College (540)	1.54	student	0%	1.54	364.00 \$ 561
University (550)	2.38	student	0%	2.38	364.00 \$ 866
Day Care (565)	79.26	1,000 SF	80%	15.85	364.00 \$ 5,769
Nursing Home (620)	2.61	per bed	40%	1.57	364.00 \$ 571
Clinic (630)	31.45	1,000 SF	20%	25.16	364.00 \$ 9,158
General Office (710)	11.01	1,000 SF	20%	8.8	364.00 \$ 3,203
Medical/Dental Office (720)	36.13	1,000 SF	20%	28.9	364.00 \$ 10,520
Specialty Retail Center (814)	40.67	1,000 SF	40%	24.4	364.00 \$ 8,882
Building Materials/Lumber(812)	39.71	1,000 SF	20%	31.77	364.00 \$ 11,564
Discount Store (815)	56.63	1,000 SF	40%	33.98	364.00 \$ 12,369
Hardware/Paint (816)	51.29	1,000 SF	40%	41.03	364.00 \$ 14,935
Nursery/Garden Center (817)	36.08	1,000 SF	40%	21.65	364.00 \$ 7,881
Shopping Center (820)	42.92	1,000 SF	40%	25.75	364.00 \$ 9,373
Restaurant (831)	89.95	1,000 SF	20%	71.97	364.00 \$ 26,197
High Turnover Restaurant(832)	130.34	1,000 SF	40%	78.2	364.00 \$ 28,465
Fast Food w/Drive Thru (834)	496.12	1,000 SF	80%	99.22	364.00 \$ 36,116
Quick Lube (837)	40	svc pos.	40%	24	364.00 \$ 8,736
Car Sales (841)	67.5	1,000 SF	20%	30	364.00 \$ 10,920
Auto Parts (843)	61.91	1,000 SF	40%	37.15	364.00 \$ 13,523
Fuel Service Station (844)	168.56	fuel pos.	80%	33.71	364.00 \$ 12,270
Fuel Service w/Market (845)	162.78	fuel pos.	80%	32.56	364.00 \$ 11,852
Fuel Svc w/Mkt/Car Wash(846)	152.84	fuel pos.	80%	30.57	364.00 \$ 11,127
Car Wash (847)	5.79	wash stall	80%	1.16	364.00 \$ 422
Supermarket (850)	111.51	1,000 SF	40%	66.91	364.00 \$ 24,355
Convenience Market (851)	737.99	1,000 SF	80%	147.6	364.00 \$ 53,726
Discount Club (861)	41.8	1,000 SF	40%	25.08	364.00 \$ 9,129
Pharmacy/Drugstore (880)	90.06	1,000 SF	40%	54.04	364.00 \$ 19,671
Drive In Bank (912)	265.21	1,000 SF	80%	53.04	364.00 \$ 19,307

ENR of 2.95%

Prior Year was 353.63

SECTION B, BUILDING PERMIT REVIEW FEE

BY AUTHORITY OF CITY OF DEPOE BAY ORDINANCE #245, A DEVELOPMENT REVIEW FEE IS ASSESSED WITH EACH BUILDING PERMIT APPLICATION FOR CONSTRUCTION WITHIN THE CITY. THIS FEE IS DETERMINED BY THE GROSS SQUARE FOOTAGE OF THE AREA OF NEW CONSTRUCTION OR RECONSTRUCTION COVERED BY THE PERMIT. GROSS SQUARE FOOTAGE IS DETERMINED BY EXTERIOR DIMENSIONS OF EACH TYPE OF CONSTRUCTION FOR WHICH A PERMIT IS SOUGHT. PLEASE NOTE GROSS SQUARE FOOTAGE DOES INCLUDE DECKS, GARAGES, PORCHES, ETC.

THE FEE SHALL BE DETERMINED BY THE FOLLOWING SCHEDULE:

<u>TYPE OF CONSTRUCTION</u>	<u>SQUARE FOOTAGE</u>	<u>FEE</u>	<u>TOTAL</u>
RESIDENTIAL: NEW OR REMODEL	_____	X \$.04	_____
COMMERCIAL: NEW OR REMODEL	_____	X \$.07	_____

* * * MINIMUM FEE: \$10.00 * * *

I HEREBY CERTIFY THAT THE ABOVE STATEMENTS OF SQUARE FOOTAGE ARE TRUE AND ACCURATE

APPLICANT

"This institution is an equal opportunity provider"

CITY OF DEPOE BAY
SINGLE FAMILY DWELLING
STANDARD CERTIFICATION FORM

Applicant/Owner: _____

Subject Property Map and Tax Lot #: _____

Section 152.068 Design Features for Single-Family Dwellings *(added 12/6/93-ORD 194)*

1. All single-family dwellings located within a residential zone (except for manufactured homes located within a manufactured home subdivision or a 'mobile home park') shall utilize at least two of the following design features:

Please indicate which two or more features will be provided with the proposed dwelling:

- a. ☐ Dormers
 - b. ☐ Recessed entries
 - c. ☐ Cupolas
 - d. ☐ Bay or bow windows
 - e. ☐ Window shutters
 - f. ☐ Off-sets on building face or roof (minimum 12 inches)
 - g. ☐ Gables
 - h. ☐ Covered porch entry or unenclosed deck
 - i. ☐ Pillars or posts
 - j. ☐ Tile, shake or elongated (not corrugated) metal roofing
 - k. ☐ Horizontal lap siding or shakes.
2. Individual lots shall be residentially landscaped and maintained similar to surrounding neighborhood development. Use of native vegetation shall be encouraged wherever possible.
3. A driveway having a durable and dustless surface shall be provided.
4. Single-family dwellings and other improvements shall be developed in compliance with applicable provisions set forth in the City Zoning Ordinance.

As the Applicant for a Building Permit to construct a new single family dwelling, I hereby certify that the proposed dwelling will comply with the applicable standards of DBZO Section 152.068.

Signature of Applicant

Date

CITY OF DEPOE BAY APPLICATION FOR WATER AND SEWER SERVICE
P.O. BOX 8, DEPOE BAY, OR 97341 ● 541-765-2361

OFFICE USE ONLY:

Residential / Commercial

Account # -

Former Owner -

Service address: _____

I, _____, certify that I am the owner of the above property as of _____ (date), and hereby request water and sewer service be provided.

I agree to comply with the rules and regulations of the City of Depoe Bay, and to pay such rates/charges for water and sewer as established by the City Council. I understand that as the owner of the property to which the service is provided, I shall be legally liable to pay all the service and usage charges and fees, whether service is supplied to the owner, renter, or other occupant.

Signature: _____ **Date:** _____

Mailing Address: _____

City, State, Zip: _____

Home Phone: _____ Work Phone: _____

Email: _____

This institution is an equal opportunity provider.

The following information is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname.

Race: (Mark one or more)

Ethnicity:

White _____

Hispanic or Latino _____

Black or African American _____

Not Hispanic or Latino _____

American Indian/Alaska Native _____

Asian _____

Native Hawaiian or other Pacific Islander _____

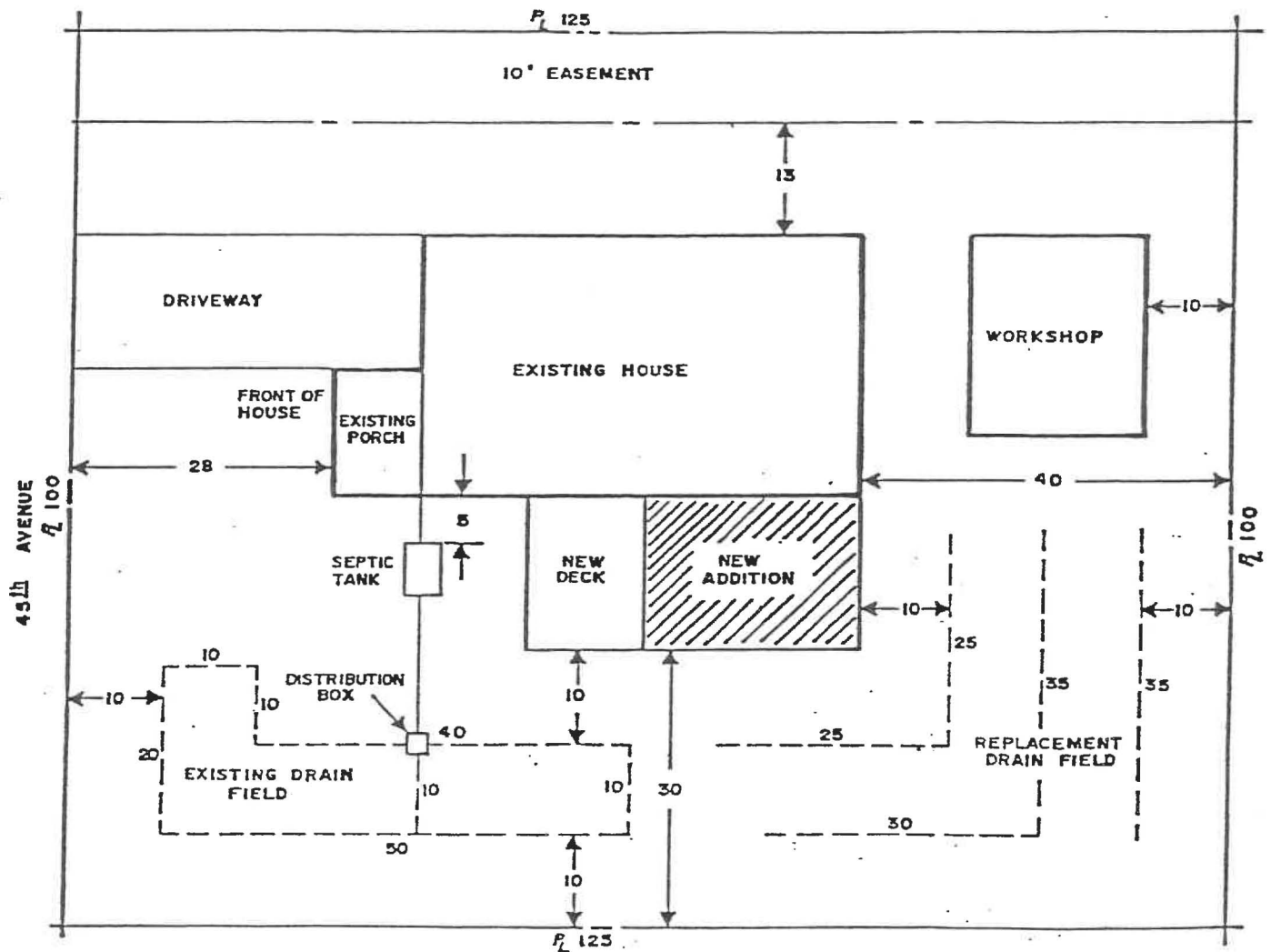
Date: _____

PLOT PLAN REQUIREMENTS

Using Your Own Dimensions Show or Identify:

- All Streets by Name
- All Easements
- All Setbacks (House & Drainfield)
- All Porches & Decks
- All Additions
- All Existing Structures
- Driveway
- Front of House
- Drainfield Location
- Drainpipe Lengths
- Replacement Drainfield Location
- Septic Tank Location
- Distribution Box Location
- All Property Line Dimensions
- Scale
- North Arrow
- Owner Name & Address
- Legal Description

A TYPICAL PLOT PLAN



PLOT PLAN SCALE: 1" = 20'



OWNER: JOHN DOE
 107 NORTH 45th AVE.
 NEWPORT, OR. 97365
 LEGAL DESCRIPTION: T.11 R.11 SEC. 8
 TAX LOT 5000

Published on *Depoe Bay Oregon* (<https://www.cityofdepobay.org>)

Local Utilities

Utility Companies Serving Depoe Bay

Utility	Name & Website	Address	Phone Number
Cable TV	Astound Broadband ^[1]	646 SE Hwy 101 Depoe Bay, OR 97341	800-829-2225
Electricity	Central Lincoln PUD ^[2]	2129 N Coast Hwy Newport, OR 97365	541-265-3211
Garbage	North Lincoln Sanitary ^[3]	1726 SE Hwy 101 Lincoln City, OR 97367	541-994-5555
Internet (cable broadband)	Astound Broadband ^[1]	646 SE Hwy 101 Depoe Bay, OR 97341	800-829-2225
Internet (DSL broadband)	CenturyLink ^[4]	6475 Gleneden Beach Loop Lincoln City, OR 97367	800-788-3500 541-996-6945
Internet (fiber optic)	Astound Broadband ^[5]	151 E Olive St. Newport, OR 97365	541-574-9999
Internet (satellite)	Viasat Satellite Internet ^[6]	6155 El Camino Real Carlsbad, CA, 92009	760-476-2200
Internet (research resource)	Find Internet by Address ^[7]		
Natural Gas	NorthWest Natural ^[8]	1405 SW Hwy 101 Lincoln City, OR 97367	541-994-2111
Post Office	United States Postal Service ^[9]	486 NE Hwy 101 Depoe Bay, OR 97341	541-765-2480
Telephone	CenturyLink ^[10]	6475 Gleneden Beach Loop Lincoln City, OR 97367	800-788-3500 541-996-6945
Water/Sewer	City of Depoe Bay ^[11]	570 SE Shell Avenue Depoe Bay, OR 97341	541-765-2361

Source URL: <https://www.cityofdepobay.org/publicworks/page/local-utilities>

Links

[1] <http://www.wavebroadband.com/> [2] <http://www.clpud.org/> [3] <http://www.northlincolnsanitary.com/> [4] <http://www.centurylink.com/> [5] <http://www.coastcom.net/> [6] <http://www.viasat.com/internet> [7] <https://decisiondata.org/find-internet-by-address/> [8] <https://www.nwnatural.com/> [9] <https://tools.usps.com/find-location.htm?location=1360711> [10] <https://www.centurylink.com> [11] <https://www.cityofdepobay.org/publicworks>