

WASCO COUNTY PLANNING
AND DEVELOPMENT
Todd R. Cornett, Director
2705 East Second Street
The Dalles, Oregon 97058



Phone: (541) 506-2560
Fax: (541) 506-2561
www.co.wasco.or.us

F: _____ Fee: \$1,171 Receipt #: _____
PD. 11-22-10

PLAFFD-10-11-0006



Associated M37 File # _____

Date Submitted: 11/22/10 Planner Initials: DB Date complete: _____

Applicant/Owner Information: _____
Applicant(s) _____ Property Owner(s) MARY LOU PORCELL
DENNIS K SHERMAN
RALPH R. SHERMAN
Mailing Address 187 SCENIC HEIGHTS DR, Mailing Address _____

BEND, OREGON - 97701

Phone (H) 1-541-382-6322 (W) Phone (H) 1-541-771-8990 (W) CEL

Email NONE Email _____

Requested Structure(s)/Use(s): 1 - BEDROOM - 37.6 TRAILER HOME

Property Information

Map #	Tax Lot#	Acct #	Acreage	Zoning
<u>65 15E 0 200</u>	<u>12676</u>		<u>1159.33</u>	<u>A-1 (160)</u> <u>FARMLAND</u>
<u>1100*</u>	<u>12681</u>			
<u>65 16E 0 1000*</u>	<u>12692</u>			

Property location: 5 MILES - OFF ROAD BETWEEN MADPIN & SHANIKO THRU WARNOCK RANCH

Property Address: NONE Tax Status: FARM

Water Source: NONE - YET -

Sewage: NONE - TRAILER SELF CONTAINED

Power: LIMITED SOLAR

Contiguous Ownership: RALPH R. SHERMAN - M.L. PORCELL - DR. DENNIS SHERMAN

Legal Access: DEEDED ACCESS

Current Use of Property: WILDLIFE - CRP Use of Adjacent Properties: GRAZING

*The House will be on 65 15E 0 200. The other 2 TRS are NOT contiguous. DB 11-22-10 Page 1 of 2

Legal Parcel Status:
1st pre-Sept. 4, 1974 Deed No.,
Partition, or Subdivision

Date Filed

Current Deed No. 2008-003456 Date Filed 08/06/2008 - 3:18 PM.
08/06/2008 - 03:18 P.M.

The deed, taxcard, and map showing the property described in the deed(s) must accompany this application.

Pre-Application Conference:

Per Section 2.050, a pre-application conference is required for a subdivision, planned unit development, conditional use, farm dwelling or site plan review for a home occupation outside the NSA.

Do you wish to waive the pre-application conference?

Yes No

Planner:

Conference Date:

Conference Time:

Signatures:

Applicant(s)

Ralph R. Sherman

Date

11/18/10

Date

Property Owner(s)

Date

Ralph R. Sherman

Date

11/5/10

Mary Sue Preece

Date

11/5/10

Denise Sherman

Date

11/11/10

Date

Date

PLEASE NOTE: Before this application will be processed, you must supply all the requested information including but not limited to a site plan, elevation drawings and responses to all listed or referenced criteria pursuant to the attached instructions. Pursuant to ORS 215.428 this office will review the application for completeness and notify the applicant of any deficiencies within 30 days of submission. By signing this form, the property owner or property owner's agent is granting permission for Planning Staff to conduct site inspections on the property.

**WASCO COUNTY
PRIMARY/ACCESSORY FARM DWELLING APPLICATION**

DWELLING TYPE

Indicate which type of dwelling you are applying for:

Primary Farm Dwelling on:

- Non High Value Farm Ground 160 acres or greater in size
- Non High Value Farm Ground less than 160 acres in size
- High Value Farm Ground

- Accessory Farm Dwelling *BARN*
- Relative Help Dwelling *NONE*
- Seasonal Farm Worker Housing *NONE*

DETAILED STRUCTURAL INFORMATION

Proposed Improvements				
	Length	Width	Height	Square Footage
Dwelling	<i>37.6 HOUSE</i>	<i>6'4" EXPANDED</i>	<i>10'</i>	<i>336</i>
Garage <i>NONE</i>	<i>TRAILER</i>			
Shed <i>NONE</i>				
Decks <i>8x10</i>				
Fences/Gates	<i>NONE</i>			
Driveway	<i>DIRT</i>			
Agricultural Bldg				
Lighting	<i>SOLAR</i>			
Other				
Existing Improvements				
Dwelling	<i>NONE</i>			
Garage	<i>NONE</i>			
Other				

4. Are any other dwellings on lands designated exclusive farm use owned by the farm operator, other than the primary farm dwelling? NO YES

If yes explain why this dwelling(s) cannot reasonably be used as an accessory farm dwelling

5. The principal farm dwelling is located on a farm or ranch operation that is currently employed for farm use, as defined in ORS 215.203, and produced in the last two years or three of the last five years, one (1) of the following:

- a. On land not identified as high-value farmland at least \$40,000 (1994 dollars) in gross annual income from the sale of farm products. In determining the gross income, the cost of purchased livestock shall be deducted from the total gross income attributed to the tract.

Documentation verifying this has been submitted?

NO YES N/A

- b. On land identified as high-value farmland, and produced at least \$80,000 (1994 dollars) in gross annual income. In determining the gross income, the cost of purchased livestock shall be deducted from the total gross income attributed to the tract.

Documentation verifying this has been submitted?

NO YES N/A

Relative Help Dwelling

1. A map has been including showing the relative help dwelling will be on the same parcel as the primary dwelling? NO YES

2. Describe the relationship between the person(s) who will be living in the new dwelling and the person(s) living in the primary dwelling.

NO OTHER DWELLINGS

3. Describe how the relative occupying the dwelling will provide assistance in the management and farm use of the existing commercial farming operation.

NONE

4. Describe how the farm operator shall continue to play the predominant role in the management and farm use of the farm.

Seasonal Farm Worker Housing

1. Describe the role the seasonal laborers will play in regards to the farm use.

NONE

2. How long per year will the seasonal laborers occupy the housing? The time frame shall not exceed nine months or 273 days in any calendar year.

0

FARM MANAGEMENT PLAN

All of the dwelling types allowed as part of this application require verification of a farm use on the subject tract consistent with ORS 215.203. A farm management plan includes but is not limited to the following:

1. The subject parcel is enrolled in the farm deferral program with the Wasco County Assessor? NO YES

2. List the existing and/or proposed types of farm uses and their acreages on the subject tract:

CRP - 124.1 AC..

3. List the current and/or proposed number and type of animals grazing or being raised on the subject tract:

NONE.

4. List existing and/or proposed farm structures (including irrigation sprinklers) supporting the farm use.

NONE

5. List the existing and/or proposed number of employees, including owners, working the farm parcel, and their responsibilities and the hours per week they will be principally engaged in the farm use.

NONE

6. A map(s) has been included that shows the location of all current and/or proposed farm activities (registered fields, grazing areas, areas dedicated to farm structures, acres and location of water rights). Check with the Farm Services Agency for maps identifying the location of all registered field crops. NO YES

7. For farm uses or activities not yet established, a schedule of when they will be completed is included? NO YES N/A

8. Other information to verify the farm use:

SHADED AREA TO BE COMPLETED BY PLANNING DEPARTMENT

Review Authority: Sections 2.060(A)(6) , 2.080, and 2.110(D) _____

Review Criteria: Chapter 3 _____

Other: _____

Legal Parcel: Property has been determined to be a legal parcel?

Fire Safety: A Fire Safety Self Certification Form has been submitted?

Site Plan: A site plan has been submitted that includes all required information (verify checklist on site plan sheet)?

Elevation drawings: An elevation drawing has been submitted that shows the sides and heights of all proposed buildings including surrounding final grades?

Zoning Overlays – Development Site is within the following Divisions:

1. Flood Hazard: Specify Zone _____ NO YES

2. Geological Hazards: _____ NO YES

4. Cultural, Historic and Archeological _____ NO YES

5. Mineral & Aggregate _____ NO YES

7. Natural Areas _____ NO YES

8. Sensitive Wildlife Habitat _____ NO YES

12. Sensitive Bird Sites: _____ NO YES

13. Pond Turtle Sensitive Area: _____ NO YES

Other: Specify _____

Easements – Are there any easements on the property (aerial or land based)? NO YES

If easement limits development, deed(s) shall be required which explain the easement.

Describe: _____

Water Resources

Are there water sources on property or adjacent properties? NO YES

If yes indicate resource type, location and required buffer.

Does proposed development meet required buffer? NO YES

Setbacks

Proposed development meets all property and agricultural setbacks? NO YES

Previous Map and Tax Lot #'s: 12676-12681-12692

Past Actions: If yes, list review #(s) _____ NO YES

Is property still subject to conditions from previous review? NO YES

If yes, list review # and condition(s). _____

Access:

Property has a legal access from _____

Waiver of Remonstrance is required? NO YES

County or ODOT approach permit is required and has been obtained or initiated? NO YES

Address:

Address exists and has been verified to be correct? _____ NO YES

Address needs to be assigned after approval? NO YES

**Department of Environmental Quality LAND USE
COMPATIBILITY STATEMENT (LUCS)
for Onsite Wastewater Treatment System Permits**



WHAT IS A LUCS? The Land Use Compatibility Statement is the process used by the DEQ to determine whether DEQ permits and other approvals affecting land use are consistent with local government comprehensive plans. The LUCS form is included in the onsite permit application approval packet.

WHY IS A LUCS REQUIRED? Oregon law requires state agency activities that impact land use be consistent with local comprehensive plans and land use regulations. Oregon Administrative Rules (OAR) Chapter 340, Division 18 identifies agency activities or programs that significantly affect land use and the process for ensuring consistency.

WHEN IS A LUCS REQUIRED? A LUCS is required for nearly all DEQ permits, registrations under general permits, and certain other approvals and certifications that affect land use. **This form only applies to onsite wastewater treatment system permits and activities. WPCF applicants must complete DEQ's General LUCS form.**

HOW TO COMPLETE A LUCS:

<u>Step</u>	<u>Who Does It</u>	<u>What Happens</u>
1	Applicant	Completes Section 1 of the LUCS and submits it to the appropriate city or county planning office.
2	City or County Planning Office	Completes Section 2 of the LUCS by determining if the activity or use meets all local planning requirements, and returns to the applicant the signed and dated LUCS form <u>with findings of fact for any local reviews or necessary planning approvals.</u>
3	Applicant	Includes the completed LUCS with <u>findings of fact</u> with the DEQ permit or approval submittal application to the DEQ.

A permit cannot be issued if the proposed facility does not comply with all applicable local land use requirements. The applicant is responsible for working with the local planning office to comply with land use requirements.

WHERE TO GET HELP: Questions about the LUCS process can be directed to the region staff responsible for processing the onsite permits. Headquarters and regional offices may also be reached using DEQ's toll-free telephone number 1-800-452-4011.

CULTURAL RESOURCES PROTECTION LAWS: Applicants involved in ground-disturbing activities should be aware of federal and state cultural resources protection laws. *ORS 358.920 prohibits the excavation, injury, destruction, or alteration of an archeological site or object, or removal of archeological objects from public and private lands without an archeological permit issued by the State Historic Preservation Office. 16 USC 470, Section 106, National Historic Preservation Act of 1966 requires a federal agency, prior to any undertaking, to take into account the effect of the undertaking that is included on or eligible for inclusion in the National Register. For further information, contact the State Historic Preservation Office at 503-378-4168, extension 232.*

SECTION 1 - TO BE COMPLETED BY APPLICANT (may be filled in electronically by tabbing to each field)

1. Applicant Name/Property Owner: RALPH R. SHERMAN
Mailing Address: 187 SCENIC HEIGHTS DR.
City, State Zip Code: BEND, OREGON - 97701
Telephone: 1-541-771-8990 ^{CEL} HOME: 1-541-382-6322

2. Property Information:

County: WASCO Tax Lot No.: 12676-12681-12692
Township: 65 Range: 16E ^{FAX ACC. #} Section: 7
Physical Address: WASCO COUNTY MAP ENCLOSED
Block: _____ Lot: _____
Subdivision Name (if applicable): _____

3. This proposed facility is for:

An individual, single-family dwelling
 Describe the type of development, business, or facility and the provided services or products: _____

4. Permit or approval being requested:

Construction-Installation permit for: SEPTIC New Construction Repair Alteration
 Non-water-carried facility requests (for example, pit privy/vault toilet for campgrounds)
 Authorization Notice for: Replacement of dwelling Bedroom addition
 Other changes in land use involving potential sewage flow increases

[Print Form](#)

SECTION 2 - TO BE COMPLETED BY CITY OR COUNTY PLANNING OFFICIAL

5. Property Zoning: _____ Zoning Minimum Parcel Size: _____

6. The facility is located: inside city limits inside UGB outside UGB

If inside UGB, the proposed facility is subject to:

City jurisdiction County jurisdiction Shared City/County jurisdiction

7. Does the proposed facility comply with all applicable local land use requirements: Yes No

If you answered "Yes" above, was this compliance based on:

Compliance with local comprehensive plans and land use requirements (provide a citation to the applicable provisions)
 Conditional approval (provide findings and citation or attach a copy of the applicable land use decision)
 Measure 49 waiver (provide Department of Land Conservation and Development approval number)

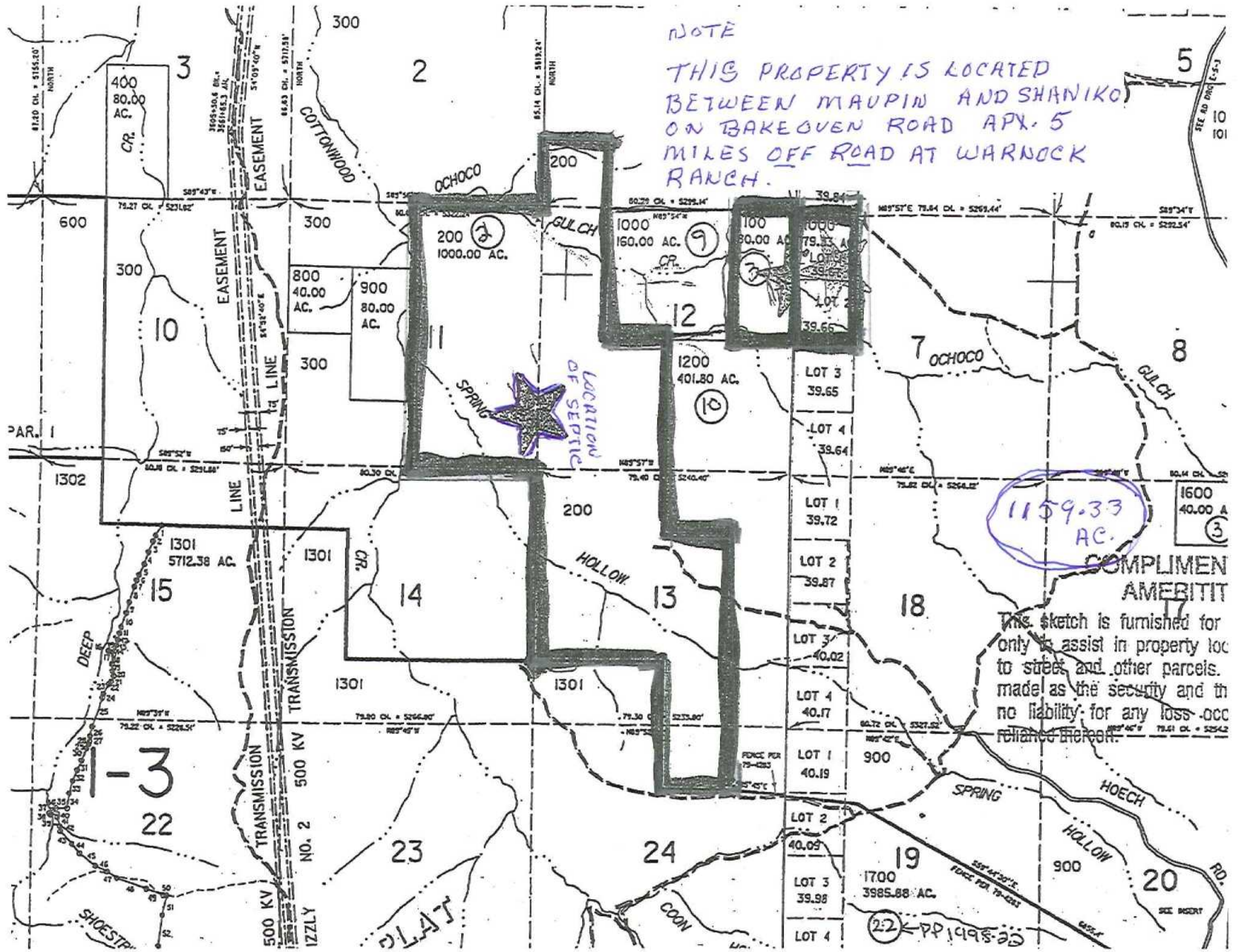
Either provide reasons for affirmative compliance decision or attach findings of fact: _____

8. Planning Official Signature: _____

Print Name: _____ Date: _____

Title: _____ Telephone: _____

NOTE
 THIS PROPERTY IS LOCATED
 BETWEEN MAUPIN AND SHANIKO
 ON BAKEOVEN ROAD APX. 5
 MILES OFF ROAD AT WARNOCK
 RANCH.



1159.33
 AC.

COMPLIMENT
 AMERITIT

This sketch is furnished for
 only to assist in property loc
 to street and other parcels.
 made as the security and th
 no liability for any loss occ
 reliance thereon.

22-PP1498-20

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Fire Safety Standards Applicant's Self Certification Form

This checklist is provided to certify that the applicant has reviewed, understands, acknowledges, and commits to install and maintain improvements as required to comply with fire standards. Fire standards are listed in their entirety in **Chapter 10** of the Wasco County Land Use and Development Ordinance (WCLUDO) or **Chapter 11** of the Wasco County National Scenic Area Land Use and Development Ordinance (NSALUDO).

Applicant's responses on the self certification form and the required site plan shall be recorded in county records (per **Section 10.510** of the WCLUDO or **Section 11.510** of the NSALUDO). Each of the applicable fire standards is listed below. Standards which begin with a 10 refer to the WCLUDO and standards which begin with an 11 refer to the NSALUDO. Please confirm compliance by marking the appropriate box, providing written comment if necessary, and initialing each response. Refer to the **Chapter 10** or **Chapter 11** for illustrations and further explanation of the standards. If compliance with applicable standards cannot be certified by the applicant, county planners will assist the applicant with the required modification process.

If one or more fire safety standard cannot be met, the applicant must request a modification to fire safety standards. The request for modification shall include a site specific fire safety mitigation plan. The modification of standards review shall be processed in accordance with the procedures in **Section 2.060(A)(6)** of the WCLUDO or **Section 2050(A)(3)** of the NSALUDO. Notice prior to the decision shall be provided to fire responders with jurisdiction by the Planning Director. The decision to approve or deny the request for modification shall meet all public notice requirements.

The applicant submitting the self certification form must be consistent with **Section 2.040** of the WCLUDO or **Section 2.060** of the NSALUDO.

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FIRE SAFETY STANDARDS SELF CERTIFICATION FORM

FILE #

DATE:

REQUEST:

APPLICANT/OWNER INFORMATION:

Applicant(s) RALPH R. SHERMAN Property Owner(s)

MARY LOU PORCELL
DENNIS K. SHERMAN
RALPH R. SHERMAN

Mailing Address 187 SCENIC HEIGHTS DR Mailing Address

BEND OR. 97701

Phone (H) 541-382-6322 (W)

CEL 1-541-771-8990
Phone (H) (W)

PROPERTY INFORMATION:

Township Range Section Tax Lot No.

1159.33 16 7 12676-12681-12692

Acres

Acct.#

Zoning

NO ADDRESS

Address

BETWEEN MAUPIN AND SHANIKO - 5 MILES OFF

Location:

ROAD AT WARNOCK RANCH NO ADDRESS

STAFF REVIEWER:

10.110/11.110 - Please show approximate areas of steep slopes and proposed building locations relative to the slopes on the site plan. Information shall be sufficient to demonstrate the following:

A. You have identified site(s) for your building(s) that are not steeper than 40%.

Yes – Comment _____

No – Initials _____ (See Attached Fire Safety Plan)

B(1). If your property is located in a Resource or Large Lot Residential Zone please show, on the site plan, that you have identified site(s) for your building(s) that are at least 50 feet back from the top of any slopes steeper than 30%;

Yes – Comment _____

No – Initials _____ (See Attached Fire Safety Plan)

- or -

B(2). If your property is located in a Resource or Large Lot Residential Zone please show you have identified site(s) for your building(s) that are at least 30 feet back from the top of any slopes steeper than 30% on the site plan and certify that you will be implementing the structural techniques for increasing fire resistance discussed in 10.110(B)(2)/11.110(B)(2) of the ordinance.

Yes – Comment _____

No – Initials _____ (See Attached Fire Safety Plan)

10.120/11.120 – Please show building location(s) including a boundary for the 50 foot fire fuel break boundary on the site plan. Information shall be sufficient to demonstrate the following:

A. You have identified site(s) for the proposed building(s) that allow for a full 50 foot fire fuel break either on the parcel or by easement over the necessary portion of an adjoining parcel;

Yes – Comment _____

No – Initials _____ (See Attached Fire Safety Plan)

-or-

B. Your property is located in an exception area or smaller lot residential zone and building(s) are located to accommodate a 30 foot fire fuel break where a full 50 foot fire fuel break cannot be provided for.

- Yes – Comment _____
- No – Initials _____ (See Attached Fire Safety Plan)

10.130/11.130 – Please provide the following information about construction details you will implement to increase the fire resistance of your proposed building(s):

A(1). Fire resistant roofing will be installed to the manufacturers' specifications. Please confirm the type of roofing and that the rating of the roof material by Underwriter's Laboratory Classification system is Class A, B, or its equivalent.

- Yes – Comment _____

A(2). Please verify that all spark arrestors will be installed to cap all chimneys and stove pipes. (The spark arrestors must meet NFPA standards)

- Yes – Comment NO FIRES _____

B(1). Please verify the following for all decks:

- Decks will be kept clear of fire wood, flammable building material, dry leaves and needles, and other flammable chemicals.

- Yes – Comment _____

- Decks less than three feet above ground will be screened with noncombustible corrosion resistant mesh screening material with openings 1/4" or less in size.

- Yes – Comment _____

- When required by standard 10.110(B)(2)/11.110(B)(2) decks will be built of fire resistant material.

- Yes – Comment _____

- All flammables will be removed from the area immediately surrounding the structure to be stored 20' from the structure or enclosed in a separate structure during fire season.

- Yes – Comment _____

B(2). Please confirm that all openings into and under the exterior of the building including vents and louvers, will be screened with noncombustible corrosion resistant mesh screening material with openings of 1/4" or less.

- Yes – Comment _____

B(3).Please acknowledge that you will limb up all trees overhanging the building to 8' above the ground, as required by fire fuel break requirements, that vegetation will be trimmed back 10 feet away from any chimney or stove pipe, and that trees overhanging the building will be maintained free of all dead material.

Yes – Comment NO TREES

B(4).Please verify that the utilities will:

- Be kept clear along their route if your private utility service lines are not underground

Yes – Comment _____

- Have a single point of access to the building if service is not provided underground.

Yes – Comment _____

- Include a clearly marked main power disconnect switch at the pole or off grid power source for all electrical service to new buildings and structures. This has been located on the site plan.

Yes – Comment _____

B(5).Please confirm that a stand pipe will be provided 50 feet from the dwelling and any structure served by a plumbed water system. This has been located on the site plan.

Yes – Comment _____

10.140/11.140 – Please confirm that access onto and through your property meets the following standards (Note: please show route, width, and alignment of access drives on the site plan):

A(1).Improved driving surface(s) will meet and be maintained to comply with driveway design standards.

Yes – Comment _____

No – Initials _____ (See Attached Fire Safety Plan)

A(2).Widths of drive(s) will meet minimum requirements for the type of driveway.

Yes – Comment DIRT FARM ROAD

No – Initials _____ (See Attached Fire Safety Plan)

B(1). Corners will meet the minimum curve radius requirements for access drives.

Yes – Comment _____

No – Initials _____ (See Attached Fire Safety Plan)

B(2). Slope or grade of the driveway will meet maximum grade requirements.

Yes – Comment _____

No – Initials _____ (See Attached Fire Safety Plan)

B(3). Turn outs will be provided as required.

Yes – Comment _____

No – Initials _____ (See Attached Fire Safety Plan)

C(1). Clearance will be established and maintained in accordance with driveway standards.

Yes – Comment _____

No – Initials _____ (See Attached Fire Safety Plan)

C(2). Fire fuel break will be established and maintained along both sides of the drive(s).

Yes – Comment _____

No – Initials _____ (See Attached Fire Safety Plan)

D. Turn arounds will be provided and maintained at the end of drives longer than 150 feet.

Yes – Comment _____

No – Initials _____ (See Attached Fire Safety Plan)

E. Bridges and culverts will support 75,000 pound gross vehicle weight in accordance with driveway standards.

Yes – Comment _____

No – Initials _____ (See Attached Fire Safety Plan)

F. Gates will provide a minimum clearance of 14 feet and will be operable by emergency responders in accordance with access standards.

Yes – Comment _____

G. Legible signs will be installed to identify parking limitations, fire lanes, on site water source, electrical service shut off, and any necessary posted weight limits. Signs will be maintained in accordance with requirements.

Yes – Comment _____

H. Roads leading to the property have been determined to meet driveway access standards other than width, turn radius, and slope;

Yes – Comment _____

No – Initials _____ (See Attached Fire Safety Plan)

-or-

The following improvements have been determined to be necessary:

All necessary improvements will be made and maintained to ensure basic access to the property.

Yes – Comment _____

No – Initials _____ (See Attached Fire Safety Plan)

10.150/11.150 – On site water requirements will be met in the following way:

A. The proposed dwelling will not exceed 3,500 square feet and will be located within a fire protection district.

Yes – Comment _____

No – Initials _____ (See Attached Description of Onsite water requirements)

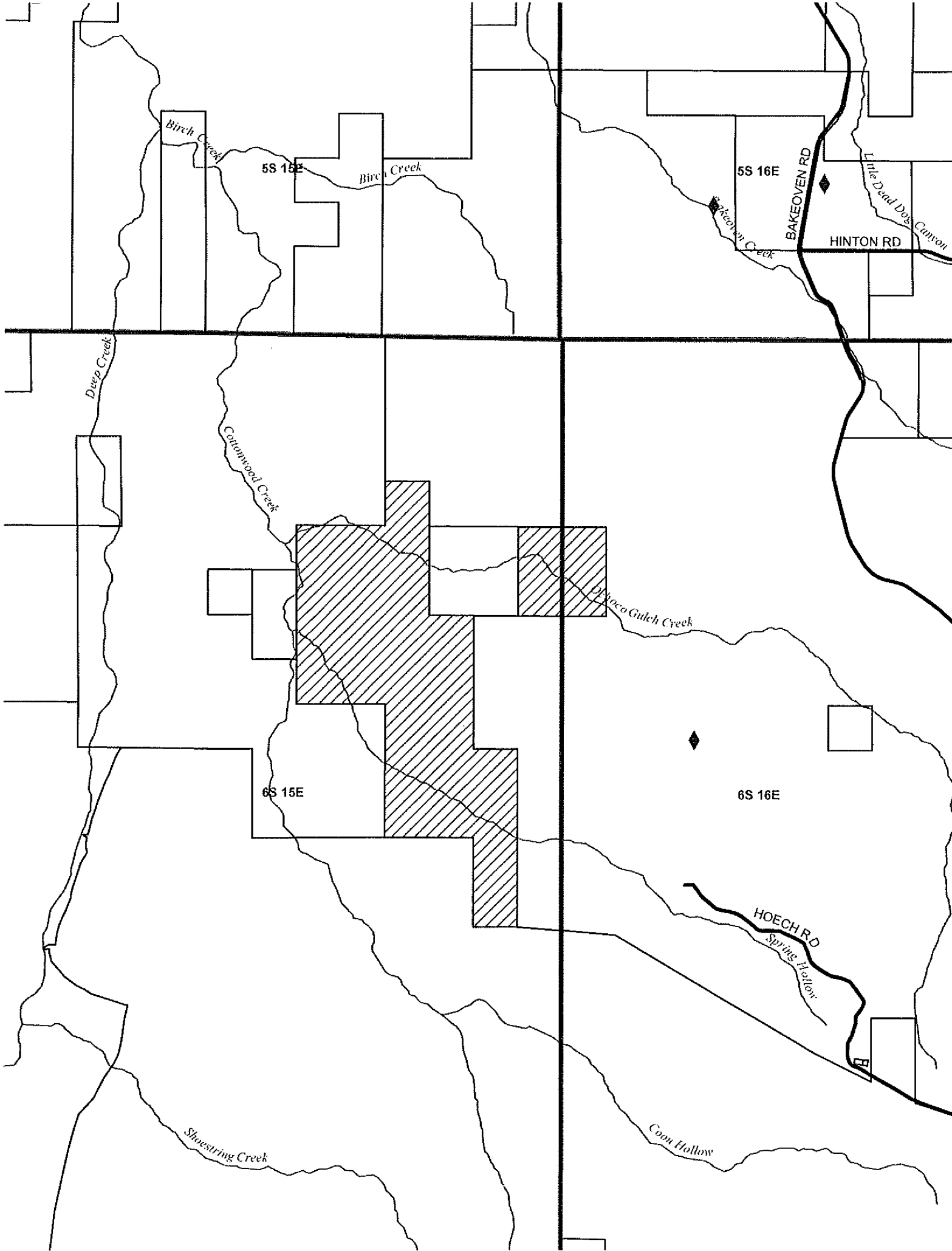
-or-

B. The proposed dwelling will exceed 3,500 square feet or will be located outside a fire protection district (with demonstration that the parcel cannot be annexed into or contract for protection with a nearby district) and will be constructed with an interior sprinkler system that meets NFPA standards.

Yes – Comment _____

No – Initials _____ (See Attached Description of Onsite water requirements)

-or-



Birch Creek

5S 15E

Birch Creek

5S 16E

BAKEOVEN RD

HINTON RD

Little Dead Dog Control

Deep Creek

Cottonwood Creek

Dyeo Gulch Creek

6S 15E

6S 16E

HOECH RD
Spring Hollow

Shoestring Creek

Coon Hollow