



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 ROSEBURG, DOUGLAS COUNTY, OREGON	Lots 7 and 8, Block 6, Cloake's Ferry, as shown on the Plat recorded in Book 8, Page 14, in the Office of the County Clerk, Douglas County, Oregon
	COMMUNITY NO.: 410067	
AFFECTED MAP PANEL	NUMBER: 4100670005E	
	NAME: CITY OF ROSEBURG, DOUGLAS COUNTY, OREGON	
	DATE: 04/21/1999	
FLOODING SOURCE: SOUTH UMPQUA RIVER		APPROXIMATE LATITUDE & LONGITUDE OF PROPERTY: 43.218, -123.387 SOURCE OF LAT & LONG: PRECISION MAPPING STREETS 4.0 DATUM: NAD 83

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)
7 & 8	6	Cloake's Ferry	337 Hazel Street	Structure	X (shaded)	431.7 feet	432.4 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.)

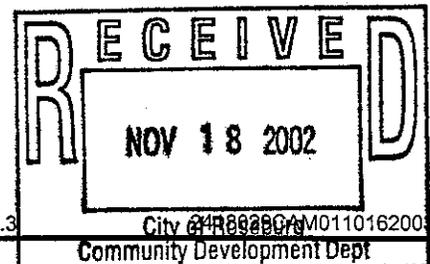
PORTIONS REMAIN IN THE SFHA

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.

Matthew B. Miller

Matthew B. Miller, P.E., Chief
Hazards Study Branch
Federal Insurance and Mitigation Administration





Federal Emergency Management Agency

Washington, D.C. 20472

LETTER OF MAP AMENDMENT DETERMINATION DOCUMENT (REMOVAL)

ATTACHMENT 1 (ADDITIONAL CONSIDERATIONS)

PORTIONS OF THE PROPERTY REMAIN IN THE SFHA (This Additional Consideration applies to the preceding 1 Property.)

Portions of this property, but not the subject of the Determination/Comment document, may remain in the Special Flood Hazard Area. Therefore, any future construction or substantial improvement on the property remains subject to Federal, State/Commonwealth, and local regulations for floodplain management.

This attachment provides additional information regarding this request. If you have any questions about this attachment, please contact the FEMA Map Service 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.

Matthew B. Miller

Matthew B. Miller, P.E., Chief
Hazards Study Branch
Federal Insurance and Mitigation Administration

Version 1.3.3

2418029CAM01101620032



Federal Emergency Management Agency

Washington, D.C. 20472

November 13, 2002

MS. KIM WING
337 HAZEL STREET
ROSEBURG, OR 97470

CASE NO.: 03-10-0032A
COMMUNITY: CITY OF ROSEBURG, DOUGLAS COUNTY,
OREGON
COMMUNITY NO.: 410067

DEAR MS. WING:

This is in reference to a request that the Federal Emergency Management Agency (FEMA) determine if the property described in the enclosed document is located within an identified Special Flood Hazard Area, the area that would be inundated by the flood having a 1-percent chance of being equaled or exceeded in any given year (base flood), on the effective National Flood Insurance Program (NFIP) map. Using the information submitted and the effective NFIP map, our determination is shown on the attached Letter of Map Amendment (LOMA) Determination Document. This determination document provides additional information regarding the effective NFIP map, the legal description of the property and our determination.

Additional documents are enclosed which provide information regarding the subject property and LOMAs. Please see the List of Enclosures below to determine which documents are enclosed. Other attachments specific to this request may be included as referenced in the Determination/Comment document. If you have any questions about this letter or any of the enclosures, 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.

Sincerely,

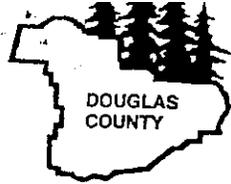
A handwritten signature in black ink that reads "Matthew B. Miller".

Matthew B. Miller, P.E., Chief
Hazards Study Branch
Federal Insurance and Mitigation Administration

LIST OF ENCLOSURES:

LOMA DETERMINATION DOCUMENT (REMOVAL)

cc: State/Commonwealth NFIP Coordinator
Community Map Repository
Region



FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

For Insurance Company Use:

BUILDING OWNER'S NAME: NING, KIM E DEBORAH
 BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.: 337 HAZEL
 CITY: ROSEBURG STATE: OR ZIP CODE: 97470

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): LOTS 788, BL. 6, CLARKS FERRY ACRES TAX ACCOUNT NO. 57305.60
 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.): Residential

LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-###" or ###.####°) _____ HORIZONTAL DATUM: NAD 1927 NAD 1983 SOURCE: GPS (Type): _____
 USGS Quad Map Other: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER: City of Roseburg B2. COUNTY NAME: DOUGLAS B3. STATE: OR

B4. MAP AND PANEL NUMBER: <u>410067 0005</u>	B5. SUFFIX: <u>E</u>	B6. FIRM INDEX DATE: _____	B7. FIRM PANEL EFFECTIVE/REVISED DATE: <u>APR. 21 1999</u>	B8. FLOOD ZONE(S): <u>AE</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding): <u>431g</u>
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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): BM 19-2 City

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)

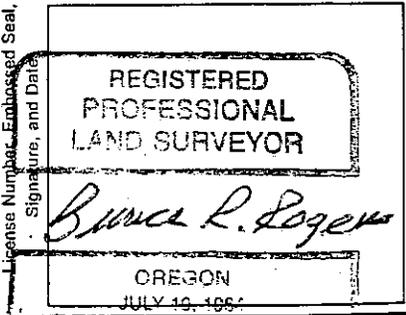
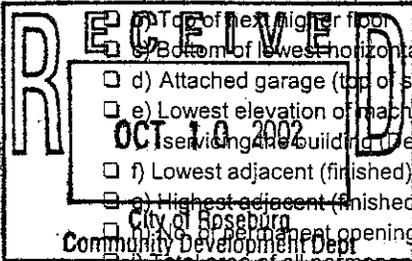
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.

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, AR/A, 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 _____ Conversion/Comments _____

Elevation reference mark used 19-2 51 47012 Does the elevation reference mark used appear on the FIRM? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>432.0</u> ft.(m)
<input type="checkbox"/> b) Top of next higher floor	<u>433.52</u> ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____ ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	<u>433.0</u> ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment (using the building (Describe in a Comments area.))	_____ ft.(m)
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	<u>432.4</u> ft.(m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	<u>432.8</u> ft.(m)
<input type="checkbox"/> h) Total area of all permanent openings (flood vents) within 1 ft. above adjacent grade	<u>8</u> sq. in. (sq. cm)
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h	<u>720</u> sq. in. (sq. cm)



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: Bruce Rogers LICENSE NUMBER: 660

TITLE: _____ COMPANY NAME: _____

ADDRESS: 1727 SE Mill St. CITY: Roseburg STATE: OR ZIP CODE: 97470

SIGNATURE: Bruce R. Rogers DATE: 2/16/02 TELEPHONE: 672-2834

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	
CITY	STATE	ZIP CODE	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

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. 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 _____
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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 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 _____

COMMENTS _____

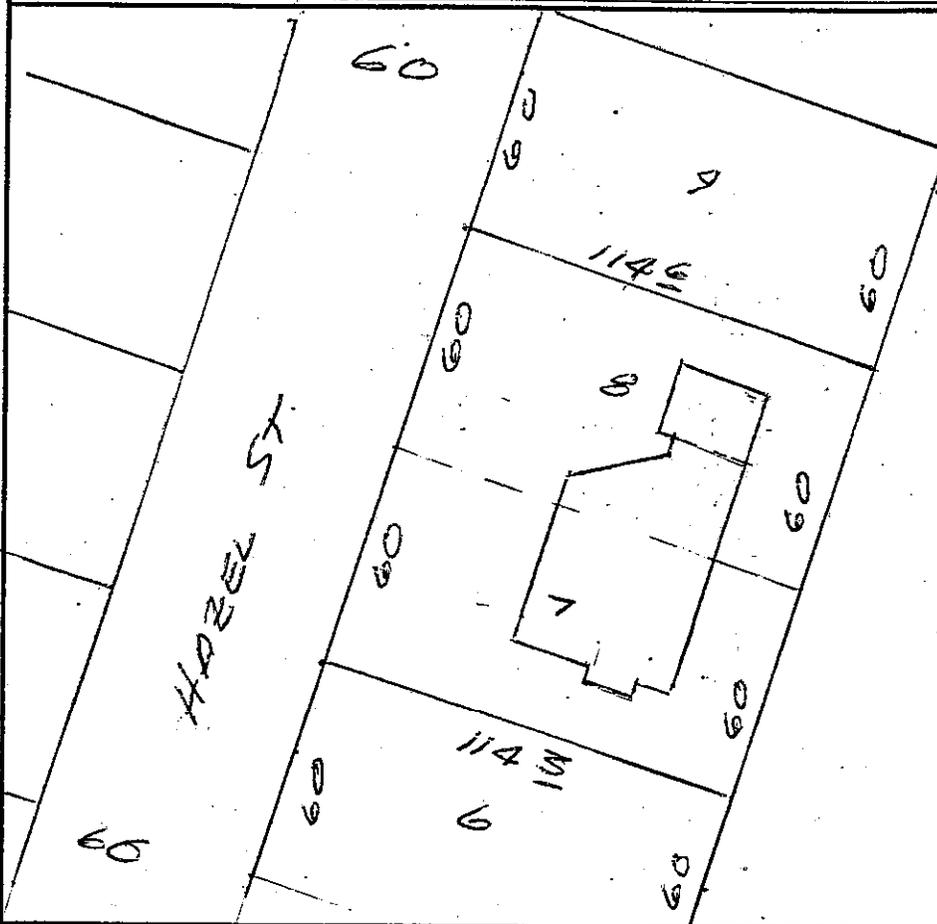
Check here if attachments

FLOODPLAIN BUILDING SITE DIAGRAM

(To be completed by an Oregon Licensed Surveyor or Engineer)

WORK SHEET NO. _____

PROPERTY I.D. NO. R _____ TOWNSHIP 27S. RANGE 6 N. W. 11
 SEC. 15 SUB SEC. DA TAX LOT NO. 4600
 DIRECTIONS TO AND DESCRIPTION OF SITE: Harvard to Hazel to Site



INFORMATION NEEDED ON DIAGRAM

1. Approximate property lines (show dimensions).
2. Permanent land marks (roads, streams, rivers).
3. Distances from landmarks to building site.
4. Put stakes at building site (one flagged stake in middle of the site is sufficient).
5. Temporary bench mark established at 100 year flood elevation.
6. Location of floodway on site.

PART ONE PRE-CONSTRUCTION

BM: NO 19-2 ELEVATION 470.12 LOCATION Harvard 100 YEAR FLOOD ELEVATION 431.6
 (NOTE: Elevation datum MSL) TBM ELEVATION _____ TBM LOCATION _____ TBM DESCRIPTION _____
 [FEDERAL 100 YEAR YES ~~NO~~] [FEDERAL FLOODWAY YES ~~NO~~] [MEAN FLOODWAY VELOCITY _____]
 EXTREME HAZARD HIGH HAZARD LOW HAZARD BUILDING SITE ELEVATION _____
 FLOODWAY MAP _____ ORTHO PHOTO _____ MINIMUM REQUIRED FLOOR HEIGHT ABOVE GROUND _____

PART TWO POST-CONSTRUCTION

The building at the property location described above has the lowest floor (including basement) at an elevation of _____ feet NGVD (Mean Sea Level) or has been floodproofed in accordance with the Floodplain Ordinance to an elevation of _____ feet NGVD. The reference level is based on actual construction. YES NO

I CERTIFY AS AN OREGON REGISTERED PROFESSIONAL ENGINEER/SURVEYOR THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE.

SIGNATURE Lawrence R. Rogers DATE 2/16/02

U.S. Postal Service Delivery Confirmation Receipt

Postage and Delivery Confirmation fees must be paid before mailing.
Article Sent To: (to be completed by mailer)

DELIVERY CONFIRMATION NUMBER:
5912 4224 2000 0960 20ED

Please Print Clearly

FGMA
3601 EISENHOWER AVE SE
ALEXANDRIA VA 22304 ⁶⁰⁰



POSTAL CUSTOMER:
Keep this receipt. For Inquiries:
Access internet web site at
www.usps.com
or call 1-800-222-1811

CHECK ONE (POSTAL USE ONLY)

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- Package Services

(See Reverse)

**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/mit/tsd/dl_mt-1.htm 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):

*Lots 7 & 8, Block 6, Cloakes Acres,
Roseburg, Douglas Co., OR*

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? *1962*

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:
Kim Wing

Company:

Mailing Address:
337 Hazel St., Roseburg, OR, 97470

Daytime Telephone No.:
(541) 672-9510 (wk)

E-mail address:
alboard@ROSENET.NET (LOWER CASE)

Fax No.:

Signature of Applicant (required)
Kim Wing

Date:
10/8/02

End of Section A

B - This section must be completed by a registered professional engineer or licensed land surveyor.

NOTE: If an NFIP Elevation Certificate has already been completed for this property, it may be submitted in addition to this form.

Applicable Regulations

The regulations pertaining to LOMAs are presented in the National Flood Insurance Program (NFIP) regulations under Title 44, Chapter I, Parts 70 and 72, Code of Federal Regulations. The purpose of Part 70 is to provide an administrative procedure whereby FEMA will review information submitted by an owner or lessee of property who believes that his or her property has been inadvertently included in a designated SFHA. The necessity of Part 70 is due in part to the technical difficulty of accurately delineating the SFHA boundary on an NFIP map. Part 70 procedures shall not apply if the topography has been altered since the effective date of the first NFIP map [e.g., a Flood Insurance Rate Map (FIRM) or Flood Hazard Boundary Map (FHBM)] showing the property to be within the SFHA.

Basis of Determination

FEMA's determination as to whether a structure or legally recorded parcel of land, or portions thereof, described by metes and bounds, may be removed from the SFHA will be based upon a comparison of the Base (1%-annual-chance) Flood Elevation (BFE) with certain elevation information. For Zone A, with no BFE determined, refer to *Managing Floodplain Development in Approximate Zone A Areas, A Guide for Obtaining and Developing Base (100-Year) Flood Elevations*. The elevation information required is dependent on whether a structure, or a legally recorded parcel of land, is to be removed from the SFHA.

Item to be Removed from the SFHA: (check one)	Elevation Information Required: (complete Item 4)
<input checked="" type="checkbox"/> Structure located on natural grade (LOMA)	Lowest Adjacent Grade to the structure (the elevation of the lowest ground touching the structure including attached decks or garage)
<input type="checkbox"/> Undeveloped legally recorded parcel of land (LOMA)	Elevation of the lowest ground on the parcel or within the portion of land to be removed from the SFHA (skip to Item 2)
1. What is the type of construction? (check one) <input checked="" type="checkbox"/> crawl space <input type="checkbox"/> slab on grade <input type="checkbox"/> basement/enclosure <input type="checkbox"/> other (explain)	

2. BUILDING INFORMATION

Building Street Address (including Apt. Unit, Suite, and/or Bldg. No.):

337 Hazel St., Roseburg, OR, 97470

Property Description (Lot and Block Number, Tax Parcel Number, Legal Description, etc.):

Lots 7 & 8, Block 6, Cloakes Ferry Acres, Roseburg, OR

3. FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

NFIP Community Number: <i>410067</i>	Map & Panel Number: <i>0005E</i>	Base Flood Elevation: <i>431.6</i>
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4. ELEVATION INFORMATION (SURVEY REQUIRED)

- Lowest Adjacent Grade (LAG) to the structure *432.4* ft. (m)
- Elevation of the lowest grade on the property; or, metes and bounds area ft. (m)
- Indicate the datum (and datum conversion if different from NGVD 29 or NAVD 88)
- Has FEMA identified this area as subject to land subsidence or uplift? Yes No
- If Yes, what is the date of the current releveling?

This certification is to be signed and sealed by a licensed land surveyor, registered professional engineer, or architect authorized by law to certify elevation information. 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.

Certifier's Name: <i>Bruce R. Rogers</i>	License No.: <i>660</i>	Expiration Date: <i>12/31/02</i>	REGISTERED PROFESSIONAL LAND SURVEYOR Seal (optional) <i>Bruce R. Rogers</i>
Company Name:	Telephone No.: <i>541-672-2834</i>	Fax No.:	
Signature: <i>Bruce R. Rogers</i>	Date: <i>10/01/02</i>		
(See attached address listing for LOMAs)			OREGON JULY 10, 1964 BRUCE R. ROGERS 660

In addition to this form (MT-EZ), ALL requests must include the following:

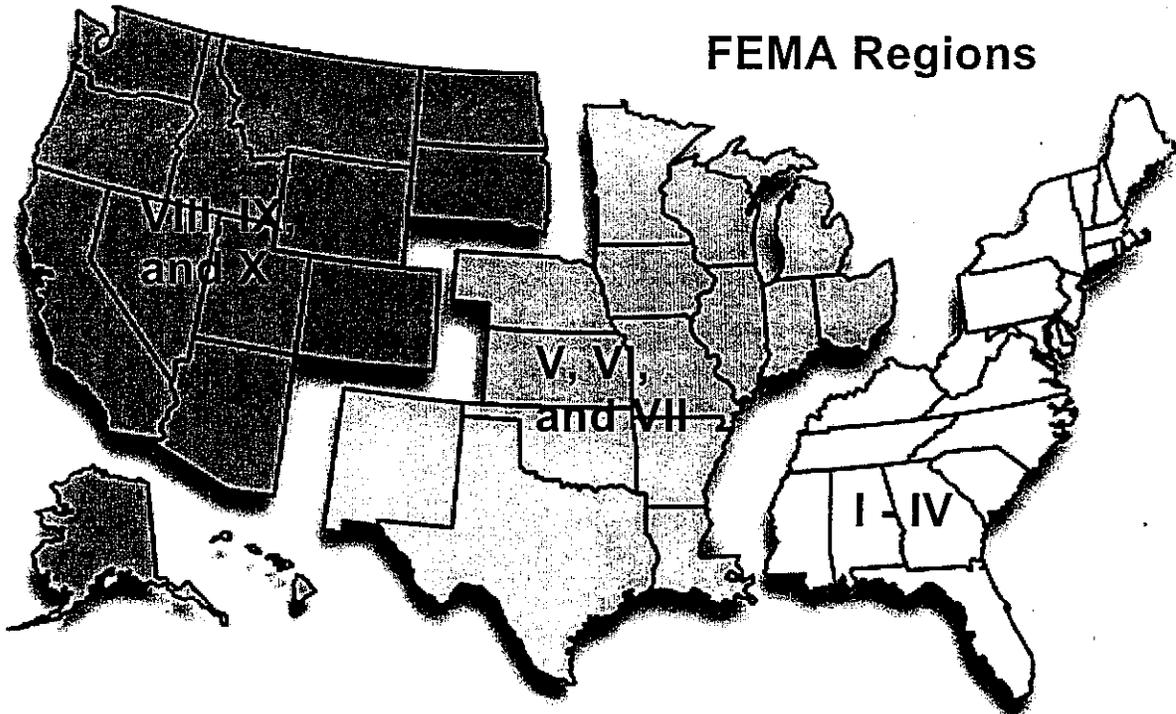
- Copy of the Subdivision Plat Map (with recordation data and stamp of the Recorder's Office)
OR
Copy of the Property Deed (with recordation data and stamp of the Recorder's Office), accompanied by a tax assessor's map or other certified map showing the surveyed location of the property relative to local streets and watercourses
- Copy of the effective FIRM panel and/or Flood Boundary and Floodway Map (FBFM) (if applicable) on which the property location has been accurately plotted
- Please include a map scale on all maps submitted

If your request concerns property in...

FEMA Regions VIII, IX, and X	FEMA Regions V, VI, and VII	FEMA Regions I - IV
Include: Alaska, American Samoa, Arizona, California, Colorado, Guam, Hawaii, Idaho, Montana, Nevada, North Dakota, Oregon, South Dakota, U.S. Trust Territory of the Pacific Islands, Utah, Washington, and Wyoming	Include: Arkansas, Illinois, Indiana, Iowa, Kansas, Louisiana, Michigan, Minnesota, Missouri, Nebraska, New Mexico, Ohio, Oklahoma, Texas, and Wisconsin	Include: Alabama, Connecticut, Delaware, District of Columbia, Florida, Georgia, Kentucky, Maine, Maryland, Massachusetts, Mississippi, New Hampshire, New Jersey, New York, North Carolina, Pennsylvania, Puerto Rico, Rhode Island, South Carolina, Tennessee, U.S. Virgin Islands, Vermont, Virginia, and West Virginia

Mail your request to...

FEMA LOMA Depot 3601 Eisenhower Avenue, Suite 600 Alexandria, VA 22304-6425 Attn.: LOMA Manager	FEMA LOMA Depot 12101 Indian Creek Court Beltsville, MD 20705	FEMA LOMA Depot P.O. Box 2210 Merrifield, VA 22116-2210 Attn.: LOMA Manager
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...change zone designations, to
...previously issued letter of map

...community, contact your
...Program at (800) 638-6620.

100 FEET

NATIONAL FLOOD INSURANCE PROGRAM

**FIRM
FLOOD INSURANCE RATE MAP**

CITY OF
ROSEBURG,
OREGON
DOUGLAS COUNTY

ONLY PANEL PRINTED

RECEIVED
FEB 01 1999

CITY OF ROSEBURG
DEPT. OF COMMUNITY
DEVELOPMENT & BLDG.

COMMUNITY-PANEL NUMBER

410067 0005 E

MAP REVISED:

APRIL 21, 1999



Federal Emergency Management Agency



ELEVATION REFERENCE MARKS

DESCRIPTION OF LOCATION

Unpainted brass cap in curb southeast corner Jefferson Street and Riverview Drive (RSBG).

Top of 2 1/2-inch iron pipe at southwest corner Stewart Park tennis courts, (IBM 2).

Brass cap south side Harvard Boulevard, 6 feet west of entrance to Methodist Church, 1771 Harvard Boulevard (RSBG 17).

Brass cap in sidewalk southeast corner Harvard Boulevard and Fair-

+Co
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 Sp
 con
 flo
 con
 Are
 A3
 Cer
 con
 Bo
 inle
 hydr
 Em
 Flo
 to i
 Co
 the
 tho
 pla
 Co
 shr
 lim

KNOW ALL MEN BY THESE PRESENTS, That MURRAY C. DOBBINS AND JEANNE B. DOBBINS, AS TENANTS BY THE ENTIRETY,

hereinafter called the grantor, for the consideration hereinafter stated, to grantor paid by KIM R. WING AND DEBORAH A WING, HUSBAND AND WIFE

hereinafter called the grantee, does hereby grant, bargain, sell and convey unto the said grantee and grantee's heirs, successors and assigns, that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or appertaining, situated in the County of DOUGLAS and State of Oregon, described as follows, to-wit:

LOTS 7 AND 8, BLOCK 6, CLOAKE'S FERRY ADDITION TO THE CITY OF ROSEBURG, DOUGLAS COUNTY, OREGON.

Tax # 57305.00

TO HAVE and to HOLD the same unto the said grantee and grantee's heirs, successors and assigns forever. And said grantor hereby covenants to and with said grantee and grantee's heirs, successors and assigns, that grantor is lawfully seized in fee simple of the above granted premises, free from all encumbrances SUBJECT TO CONDITIONS, RESTRICTIONS, AND RIGHTS OF WAY OF RECORD

and that grantor will warrant and forever defend the said premises and every part and parcel thereof against the lawful claims and demands of all persons whomsoever, except those claiming under the above described encumbrances.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ 77,750.00. However, the actual consideration consists of or includes other property or value given or promised which is (the whole/ part) consideration (indicate which): (The sentence between the symbols , if not applicable should be deleted. See ORS 93.030.)

In construing this deed and where the context so requires, the singular includes the plural and all grammatical changes shall be implied to make the provisions hereof apply equally to corporations and to individuals.

In Witness Whereof, the grantor has executed this instrument this 22 day of OCTOBER 1990; if a corporate grantor, it has caused its name to be signed and seal affixed by its officers, duly authorized thereto by order of its board of directors.

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES

Murray C. Dobbins
JEANNE B. DOBBINS

STATE OF OREGON
County of DOUGLAS } ss.

BE IT REMEMBERED, That on this 22 day of OCTOBER, 1990, before me, the undersigned, a Notary Public in and for said County and State, personally appeared the within named MURRAY C. DOBBINS AND JEANNE B. DOBBINS

known to me to be the identical individual s described in and who executed the within instrument and acknowledged to me that THEY executed the same freely and voluntarily.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal the day and year last above written.

Notary Public for Oregon.
My Commission expires 7/22/92

Form with fields for Grantor's Name and Address (MURRAY C. DOBBINS), Grantee's Name and Address (KIM R. WING), Date (OCT 10 1990), Fee (25.00), and Notary Signature (P. Dauvenport).

DOUGLAS COUNTY TITLE COMMISSION

