



City of Florence
Community Development Department
250 Highway 101
Florence, OR 97439
Phone: (541) 997 - 8237
Fax: (541) 997 - 4109
www.ci.florence.or.us

Type of Request

THIS SECTION FOR OFFICE USE ONLY

☐ Type I ☐ Type II ☒ Type III ☐ Type IV

Proposal: _____

Applicant Information

Name: Joshua R. Mast

Phone 1: _____

E-mail Address: _____

Phone 2: _____

Address: _____

Signature: [Signature]

Date: _____

Applicant's Representative (if any): Jerry Wilson

Property Owner Information

Name: Ronald R. Mast

Phone 1: _____

E-mail Address: _____

Phone 2: _____

Address: _____

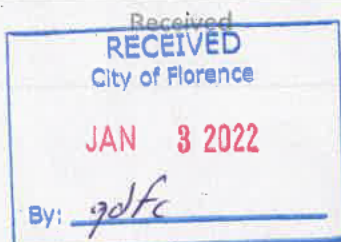
Signature: Ron R Mast

Date: _____

Applicant's Representative (if any): Jerry Wilson

NOTE: If applicant and property owner are not the same individual, a signed letter of authorization from the property owner which allows the applicant to act as the agent for the property owner must be submitted to the City along with this application. The property owner agrees to allow the Planning Staff and the Planning Commission onto the property. Please inform Planning Staff if prior notification or special arrangements are necessary.

For Office Use Only:



Approved

Exhibit

Property Description

Site Address: _____

General Description: Tow yard and Shop

Assessor's Map No.: 18 - _____ - _____ Tax lot(s): _____

Zoning District: _____

Conditions & land uses within 300 feet of the proposed site that is one-acre or larger and within 100 feet of the site that is less than an acre OR add this information to the off-site conditions map

(FCC 10-1-1-4-B-3): _____

Project Description

Square feet of new: _____ Square feet of existing: _____

Hours of operation: _____ Existing parking spaces: _____

Is any project phasing anticipated? (Check One): Yes ☐ No ☐

Timetable of proposed improvements: As Soon As Possible

Will there be impacts such as noise, dust, or outdoor storage? Yes ☐ No ☒

If yes, please describe: _____

Proposal: (Describe the project in detail, what is being proposed, size, objectives, and what is desired by the project. Attach additional sheets as necessary)

1. Per OSP They are Requesting we Install Razor Wire / Barb Wire on TOP of our Fence for Security of Vehicles and Property
2. Wire will Be on TOP of Fence, And only Accessible IF Climbed.
3. Risk of Injury will only occur IF Someone Tries going over.
4. No other Alternatives at This Time

For Office Use Only:

Date Submitted: 1/3/22 Fee: _____

Received by: gdfc

Paid

CYCLONE FENCE

CYCLONE FENCE

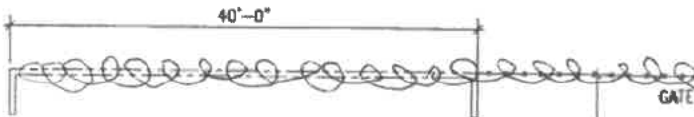


Plans
For
REFERENCES
only

PLOT PLAN

SCALE

ALLEY



GATE

EXISTING SHOP
1600 SQ. FT.

GARAGE
476 SQ. FT.

RECONSTRUCTED OFFICES
1,040 SQ. FT.

44'-0"

GATE

52'-0"

60'-0"

120'-0"

40'-0"

20'-0"

30'-0"

34'-6"

PAVED PARKING

TAX LOT 5102

ADDRESS: 3087 HWY 101

31st STREET

CITY OF FLC
REVIEWED

THE SEALS INCLUDING THE
STAMP OF THE CITY ENGINEER
SHALL BE KEPT IN PLACE UNTIL
THE PROJECT IS COMPLETED
AND THE CITY ENGINEER HAS
REVIEWED THE PROJECT AND
ISSUED A FINAL CERTIFICATE
OF COMPLETION. THIS SEAL
SHALL NOT BE REUSED FOR
ANY OTHER PROJECT. THE
CITY ENGINEER SHALL BE
RESPONSIBLE FOR THE
QUALITY OF THE PROJECT
AND THE CITY ENGINEER
SHALL BE RESPONSIBLE FOR
THE QUALITY OF THE
PROJECT.

PHASE
PARK

HWY 101

RECEIVED
City of Florence

JAN 3 2022

BY: pdfc

308.
B/E
NO
B/E

SEE
4-
2772