



Department of Community Services
MULTNOMAH COUNTY OREGON

Land Use and Transportation Program
1600 SE 190th Avenue
Portland, Oregon 97233-5910
(503) 988-3043

Staff Report – Case T1-05-070
Determination of Compliance
2005 Wrecker Certificate Renewal
Orient Auto Parts, INC
28425 SE Orient Dr.

This Staff Report and Determination of Compliance are made pursuant to the requirements specified by Multnomah County Code (MCC) 15.200 et. seq. Wrecker Certificate, as authorized by Oregon Revised Statutes (ORS) 822.140. An application for renewal of a Wrecker Certificate as required by the State of Oregon Department of Motor Vehicles was submitted on December 6th, 2005 by Orient Auto Parts, INC at 28425 SE Orient Drive.

I. Conditions of Approval:

1. The applicant shall obtain a Business Certificate as a wrecker of motor vehicles from the Oregon Department of Transportation. Applications for future Wrecker Certificate renewals shall include a copy of the Wrecker Certificate issued by the Oregon Department of Transportation from the prior year.
2. If there are any changes to the property during the year prior to renewal of Wrecker Certificate, applications for future Wrecker Certificate renewals shall include submittal of a site plan, drawn to scale, showing the revisions. Expansion of the dimensions of the wrecking yard shall not occur without prior approval of the County.
3. Taxes shall be kept current prior to approval of future Wrecker Certificate renewals.
4. Any application for a Wrecker Certificate or renewal must be reviewed by staff and presented to the Board of County Commissioners as required under MCC 15.200 et. seq.

II. Applicable Zoning Considerations:

The applicable zoning considerations as specified in MCC 15.202(B)(3) and (5) are addressed below:

A. Compliance with the requirements of ORS 822.110:

The Oregon Department of Transportation shall issue a wrecker certificate to any person if the person meets all of the following requirements:

- (1) The person must establish that the area approved under the wrecker certificate for use in a wrecking business meets one of the following:**
 - (a) The area is more than 1,100 feet from the nearest edge of the right of way of any state highway.**
 - (b) The business conducted within the area is hidden or adequately screened by the terrain or other natural objects or by plantings, fences or other natural objects or by plantings, fences or other appropriate means, so as not to be visible from the main traveled way of the highway, in accordance with rules adopted by the director.**
 - (c) The area and the business thereon are located in an area zoned for industrial use under authority of the laws of this state.**
- (2) The person must pay the fee required under ORS 822.700 for issuance of a wreckers certificate.**
- (3) The person must complete the application for a wrecker certificate described under ORS 822.115.**
- (4) The person must deliver to the department any approvals by local governments required under ORS 822.140.**
- (5) The person must deliver to the department a bond or letter of credit that meets the requirements of ORS 822.120.**

Finding: A recent site inspection by staff confirmed that both natural vegetation and a fence screen vehicles from adjacent roads consistent with ORS 822.110 (1)(b). The applicant has provided a Surety Bond by Contractors Bonding and Insurance Company (CBIC) with a dated effectiveness of January 1, 2006 to December 31, 2006. Compliance with the requirements of ORS 822.110 (2)-(5) will be ensured by obtaining a Wrecker Certificate issued by the Oregon Department of Transportation.

B. Compliance with the business locational provisions of ORS 822.135:

- (1) A person commits the offense of improperly conducting a wrecking business if the person holds a wrecker certificate issued under ORS 822.110 and the person does any of the following:**
 - (b) Expands the dimensions of or moves any of the person's places of business or opens any additional places of business without obtaining a supplemental wrecker certificate by the procedure under ORS 822.125.**

Finding: Staff has determined that the dimensions of the wrecking yard have not been expanded beyond that of the Wrecker Certificate most recently issued. This was verified by visual inspection by Land Use Planning Staff on January 10, 2006. The site plan submitted identifies the dimensional boundaries of the wrecking yard (fenced and/or screened areas) in relation to property lines. Submittal of a new site plan will be required if changes are made to the site during the year prior to renewal of Wrecker Certificate. Expansion of the dimensions of the wrecking yard shall not occur without prior approval of the County.

(g) Fails to keep the premises on the outside of the establishment clear and clean at all times.

Finding: The Land Use Planning Section determined on January 10, 2006 that the area outside the establishment is clear and clean. All materials and activities relating to the wrecking yard are taking place within the confines of the wrecking yard property and fences and causing no external visual impact.

(h) Conducts any wrecking, dismantling or altering of vehicles outside the building, enclosure or barrier on the premises of the business.

Finding: Based on the Land Use Planning Section's site inspection, no dismantling, altering, or storage of wrecked vehicles outside the fenced area of the business was evident.

C. Compliance with zoning regulations:

Finding: The wrecking yard was determined to be a non-conforming use on April 5, 1977 and January 15, 1987. Evidence within the Multnomah County file labeled Auto Wrecking – 28425 SE Orient Drive, contains a record that an auto wrecker business has occupied the site continuously and in compliance with zoning regulations since 1977. Examination of Department land use inventory maps and zoning maps indicates that the business was in existence on the property prior to 1977. The land use map shows the site with a case file MC 1-62 listed for the subject parcel. All evidence suggests the business is in compliance with zoning regulations.

III. Notification:

Notice of this application was sent to the Multnomah County Sheriff on January 6th, 2006. A recommendation of approval from the County Sheriff's Office was received on January 9th, 2006. A copy of the Sheriff's report is contained in the permanent case file.

The Wrecker Certificate Renewal for 2005 was approved with a condition that taxes shall be kept current prior to approval of future Wrecker Certificate

renewals. Staff inquired with the County's Assessment and Taxation office on January 6, 2006 and was informed by Mike Brown that taxes for the property have been paid in full.

IV. Recommendation:

The staff of the Land Use Planning Section respectfully recommends that the above certificate renewal be approved, subject to conditions, based upon findings that the business satisfies the applicable requirements contained in MCC 15.200 et. seq. and ORS 822.110, ORS 882.135 and continues to retain a non-conforming status.

Dated this 18th day of January, 2006.

A handwritten signature in cursive script, appearing to read "Adam Barber", written over a horizontal line.

By Adam Barber, Planner

For: Karen Schilling, *Planning Director*



DEPARTMENT OF TRANSPORTATION
DRIVER AND MOTOR VEHICLE SERVICES
1906 LANA AVE NE, SALEM OREGON 97314

APPLICATION FOR BUSINESS CERTIFICATE

AS A DISMANTLER OF MOTOR VEHICLES OR
SALVAGE POOL OPERATOR

CERTIFICATE NUMBER

EXPIRATION DATE

- PLEASE TYPE OR PRINT LEGIBLY WITH INK.
- SEE PAGE 4 FOR INSTRUCTIONS FOR COMPLETING A DISMANTLER APPLICATION.
- ANY ALTERATION OF LINE 3 VOIDS LOCATION APPROVAL.

ORIGINAL RENEWAL

| | | | | |
|---|--|------------------------|---|---|
| 1 | LEGAL NAME OF APPLICANT (OWNER, PARTNERSHIP, LLC OR CORPORATION NAME) Orient Auto Parts Inc. | | OREGON REGISTRY NUMBER (IF LLC OR CORPORATION) 495683-89 | |
| 2 | BUSINESS NAME OF APPLICANT (IF ASSUMED BUSINESS NAME OR TRADE NAME) | | OREGON REGISTRY NUMBER (IF USING ASSUMED BUSINESS NAME OR TRADE NAME) | BUSINESS TELEPHONE (503) 663-1909 |
| 3 | MAIN BUSINESS LOCATION (STREET AND NUMBER) 28425 SE Orient Dr. | CITY Gresham | ZIP CODE 97080 | COUNTY Multnomah |
| 4 | MAILING ADDRESS | CITY | STATE | ZIP CODE |

5 CHECK ORGANIZATION TYPE:
 Individual Partnership LLC Corporation: If corporation, list the state under whose law business is incorporated: **OR**

6 a) THE DIMENSIONS OF THE PROPERTY ON WHICH THE BUSINESS IS LOCATED ARE **500** ft. X **1150** ft.
 b) ORS 822.115(4) requires applicants to file a **description of the location** of the dismantling yard. Accordingly, please file a plat map or other description of the location of the premises..

7 **By signing this application you are also certifying that:**

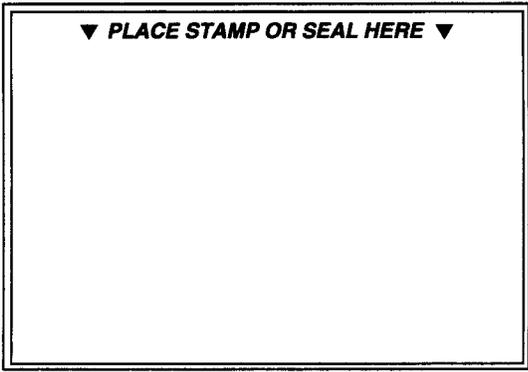
1. The right of way of any highway adjacent to the area proposed for approval to conduct the dismantling business is used for access to the premises and public parking;
2. You maintain a building or enclosure or other barrier at least six feet high for the purpose of conducting the dismantling business;
3. You will not store any vehicles or vehicle parts or conduct the dismantling business outside of the building, enclosure or barrier;
4. The business is hidden and adequately screened by the terrain or other natural objects or by plants, fences or other appropriate means so as not to be visible from the main traveled way or the highway except as permitted by ORS 822.135.

8 **LOCAL GOVERNMENT APPROVAL (CITY / COUNTY)**

By signing this application you are authorizing a dismantler business to be conducted at the location listed on Line 3 of this application. **If a dismantler business cannot be conducted at that location, or if any of the conditions below are not met, do not sign this approval.**

I CERTIFY THAT THE GOVERNING BODY OF THE CITY COUNTY OF _____ HAS:

- A) APPROVED THE APPLICANT AS BEING SUITABLE TO ESTABLISH, MAINTAIN OR OPERATE A MOTOR VEHICLE DISMANTLING BUSINESS (ORIGINAL APPLICATIONS ONLY).
- B) DETERMINED THAT THE LOCATION OR PROPOSED LOCATION MEETS THE REQUIREMENTS FOR THAT LOCATION UNDER ORS 822.110.
- C) DETERMINED THAT THE LOCATION DOES NOT VIOLATE ANY APPLICABLE PROVISION OF ORS 822.135.
- D) APPROVED THE LOCATION AND DETERMINED THAT THE LOCATION COMPLIES WITH ANY REGULATIONS ADOPTED BY THE JURISDICTION UNDER ORS 822.140.



I ALSO CERTIFY THAT I AM AUTHORIZED TO SIGN THIS APPLICATION AND AS EVIDENCE OF SUCH AUTHORITY DO AFFIX HEREON THE SEAL OR STAMP OF THE CITY OR COUNTY.

| | | | |
|----|-----------------------|-------|------------------------|
| 9 | NAME | TITLE | PHONE NUMBER () |
| 10 | SIGNATURE X | | DATE |

Complete the section(s) below and sign.
 (Be sure to attach a separate sheet to show additional owners.)

- List the primary owner, partners, LLC members or corporate officers below.
- If a member of a limited liability company (LLC) is a corporation, the president must provide information below.
- If a partner of a partnership is a corporation, the president must provide information below.
- If corporation or LLC, then Oregon registered agent name and address required below.

| | | | | |
|----|---|--|------------------------------------|-------------|
| 11 | OREGON REGISTERED AGENT NAME Frank H. Hilton Jr. | | TELEPHONE NUMBER (503) 224-6440 | |
| 12 | OREGON REGISTERED AGENT STREET ADDRESS 851 SW Sixth Ave Suite 1500 | | CITY Portland | STATE Or |
| 13 | OREGON REGISTERED AGENT MAILING ADDRESS (IF DIFFERENT) | | CITY | STATE Or |

OWNERSHIP INFORMATION

| | | | | | |
|----|---|---------------------------------|--------------------------|--|-------------------|
| 14 | PRINT NAME OF OWNER / PARTNER / LLC MEMBER / CORPORATE OFFICER June J. Dawis | | TITLE owner | RESIDENCE TELEPHONE NUMBER (503) 637-6851 | |
| 15 | DATE OF BIRTH 6/22/37 | DRIVER LICENSE NUMBER 984691 | STATE OF ISSUANCE Or. | | |
| 16 | RESIDENCE ADDRESS 40860 SE Kitzmiller | | CITY Eagle Creek | STATE Or | ZIP CODE 97022 |
| 17 | MAILING ADDRESS (IF DIFFERENT) | | CITY | STATE | ZIP CODE |

| | | | | | |
|----|---|--|--|------|--|
| 18 | CERTIFYING SIGNATURE OF OWNER SHOWN ON LINE 14 ABOVE <i>June Dawis</i> | | | DATE | |
|----|---|--|--|------|--|

| | | | | | |
|----|--|----------------------------------|--------------------------|--|-------------------|
| 19 | PRINT NAME OF OWNER / PARTNER / LLC MEMBER / CORPORATE OFFICER Rex M. Dawis | | TITLE owner | RESIDENCE TELEPHONE NUMBER (503) 663-7466 | |
| 20 | DATE OF BIRTH 5/25/55 | DRIVER LICENSE NUMBER 1784307 | STATE OF ISSUANCE Or. | | |
| 21 | RESIDENCE ADDRESS 39131 SE Hudson Rd | | CITY Sandy | STATE Or | ZIP CODE 97055 |
| 22 | MAILING ADDRESS (IF DIFFERENT) | | CITY | STATE | ZIP CODE |

| | | | | | |
|----|--|--|--|------|--|
| 23 | CERTIFYING SIGNATURE OF OWNER SHOWN ON LINE 19 ABOVE <i>Rex Dawis</i> | | | DATE | |
|----|--|--|--|------|--|

| | | | | | |
|----|--|-----------------------|-------------------|-----------------------------------|----------|
| 24 | PRINT NAME OF OWNER / PARTNER / LLC MEMBER / CORPORATE OFFICER | | TITLE | RESIDENCE TELEPHONE NUMBER () | |
| 25 | DATE OF BIRTH | DRIVER LICENSE NUMBER | STATE OF ISSUANCE | | |
| 26 | RESIDENCE ADDRESS | | CITY | STATE | ZIP CODE |
| 27 | MAILING ADDRESS (IF DIFFERENT) | | CITY | STATE | ZIP CODE |

| | | | | | |
|----|--|--|--|------|--|
| 28 | CERTIFYING SIGNATURE OF OWNER SHOWN ON LINE 24 ABOVE <i>X</i> | | | DATE | |
|----|--|--|--|------|--|

29 Please attach (staple) copies of ALL owners, partners, LLC members or corporate officers official photo ID's (driver license or state issued identification card ONLY). If the residence address on the photo ID is different than the residence address listed on Page 2, submit a statement explaining why the addresses do not match.

Copy must be legible.

False certification is a Class B misdemeanor under ORS 162.085 and is punishable by six months in jail, a fine of up to \$1,000 or both. In addition, DMV sanctions against you or your dismantler certificate may be imposed. With this in mind... I certify that I am the owner, a partner, an LLC member, or a corporate officer of this business and that all information on this application is accurate and true. I certify that the right of way of any highway adjacent to the location listed above is used for access to the premises and public parking.

SURETY BOND

BOND NUMBER
804327

FAILURE TO COMPLETE THIS FORM WILL CAUSE UNAVOIDABLE DELAY.

LET IT BE KNOWN:

THAT ORIENT AUTO PARTS INC.

(OWNER, PARTNERS, CORPORATION NAME)

DOING BUSINESS AS _____

(ASSUMED BUSINESS NAME, IF ANY)

HAVING PRINCIPAL PLACE OF BUSINESS AT 28425 SE ORIENT DR GRESHAM, OR 97080

(ADDRESS, CITY, STATE, ZIP CODE)

WITH ADDITIONAL PLACES OF BUSINESS AT _____

(ADDRESS, CITY, STATE, ZIP CODE)

(ADDRESS, CITY, STATE, ZIP CODE)

STATE OF OREGON, AS PRINCIPAL(S), AND

CONTRACTORS BONDING AND INSURANCE COMPANY

(SURETY NAME)

1201 N.E. Lloyd Blvd., Suite 360 Portland, OR 97232.

(ADDRESS, CITY, STATE, ZIP CODE)

(503) 287-6000

TELEPHONE NUMBER

A CORPORATION ORGANIZED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF Washington AND AUTHORIZED TO TRANSACT A SURETY BUSINESS IN THE STATE OF OREGON, AS SURETY, ARE HELD AND FIRMLY BOUND UNTO THE STATE OF OREGON IN THE PENAL SUM OF \$2,000 FOR THE PAYMENT OF WHICH WE HEREBY BIND OURSELVES, OUR RESPECTIVE SUCCESSORS AND ASSIGN, JOINTLY AND SEVERALLY, FIRMLY BY THESE PRESENTS.

A CONDITION OF THIS OBLIGATION IS SUCH THAT, WHEN THE ABOVE NAMED PRINCIPAL HAS BEEN ISSUED A CERTIFICATE TO CONDUCT, IN THIS STATE, A BUSINESS WRECKING, DISMANTLING AND SUBSTANTIALLY ALTERING THE FORM OF VEHICLES, SAID PRINCIPAL SHALL CONDUCT SUCH BUSINESS WITHOUT FRAUD OR FRAUDULENT REPRESENTATION, AND WITHOUT VIOLATION OF ANY OF THE PROVISIONS OF THE OREGON VEHICLE CODE SPECIFIED IN ORS 822.120(2) THEN AND IN THAT EVENT THIS OBLIGATION TO BE VOID, OTHERWISE TO REMAIN IN FULL FORCE AND EFFECT UNLESS CANCELED PURSUANT TO ORS 743.755.

THIS BOND IS EFFECTIVE January 1 2006 AND EXPIRES December 31 2006 (BOND MUST EXPIRE ON THE LAST DAY OF THE MONTH.)

-- ANY ALTERATION VOIDS THIS BOND --

IN WITNESS WHEREOF, THE SAID PRINCIPAL AND SAID SURETY HAVE EACH CAUSED THESE PRESENTS TO BE EXECUTED BY ITS AUTHORIZED REPRESENTATIVE OR REPRESENTATIVES AND THE SURETY CORPORATE SEAL TO BE HEREUNTO AFFIXED THIS 21 DAY OF September 2005.

SIGNATURE (OWNER/PARTNER/CORPORATE OFFICER)

[Signature]

TITLE

SIGNATURE OF SURETY (AUTHORIZED REPRESENTATIVE)

[Signature]

TITLE

Attorney-in-Fact

SURETY'S AGENT OR REPRESENTATIVE MUST COMPLETE THIS SECTION:

PLACE SURETY SEAL BELOW

IN THE EVENT A PROBLEM ARISES CONCERNING THIS BOND, CONTACT:

NAME **CBIC** TELEPHONE NUMBER **(503)287-6000**
ADDRESS **1201 NE Lloyd Blvd., Suite 360**
CITY, STATE, ZIP CODE **Portland, OR 97232**



APPROVED BY ATTORNEY GENERAL'S OFFICE



Limited Power of Attorney

Home Office: 1213 Valley Street, PO Box 9271, Seattle, WA 98109-0271, (206) 628-7200

KNOW ALL MEN BY THESE PRESENTS that CONTRACTORS BONDING AND INSURANCE COMPANY, a corporation duly organized and existing under the laws of the State of Washington, and having its principal office in Seattle, King County, Washington, does by these presents make, constitute and appoint DEBI LEWIS, of Portland, Oregon, its true and lawful Attorney-in-Fact, with full power and authority hereby conferred in its name, place and stead, to execute, acknowledge and deliver on behalf of the Company any and all bonds and undertakings of suretyship given for any purpose, provided, however, that no Attorney-in-Fact shall be authorized to execute and deliver any bond or undertaking that shall obligate the Company for any portion of the penal sum thereof in excess of \$6,000,000, and provided, further, that no Attorney-in-Fact shall have the authority to issue a bid or proposal bond for any project where, if a contract is awarded, any bond or undertaking would be required with a penal sum in excess of \$6,000,000; and to bind the Company thereby as fully and to the same extent as if such bonds were signed by the President, sealed with the corporate seal of the Company and duly attested by its Secretary; hereby ratifying and confirming all that the said Attorney-in-Fact may do in the premises. Said appointment is made under and by authority of the following resolutions adopted by the Board of Directors of the CONTRACTORS BONDING AND INSURANCE COMPANY on September 19, 2005:

RESOLVED that the President of the Company is authorized to appoint any person as the Company's true and lawful Attorney-in-Fact with power and authority to execute and deliver on behalf of the Company any and all bonds and undertakings of suretyship given for any purpose, subject to such limits as shall be determined by the President of the Company; provided, however, that no such person shall be authorized to execute and deliver any bond or undertaking that shall obligate the Company for any portion of the penal sum thereof in excess of \$10,000,000, and provided, further, that no Attorney-in-Fact shall have the authority to issue a bid or proposal bond for any project where, if a contract is awarded, any bond or undertaking would be required with penal sum in excess of \$10,000,000. Any Attorney-in-Fact authorized to execute a surety bond or undertaking may also be authorized to execute any consent or other documentation incidental to said bond or undertaking, provided such document does not obligate the Company in excess of the limit set forth above.

RESOLVED FURTHER that the authority of the Secretary of the Company to certify the authenticity and effectiveness of the foregoing resolution in any Limited Power of Attorney is hereby delegated to the following persons, the signature of any of the following to bind the Company with respect to the authenticity and effectiveness of the foregoing resolutions as if signed by the Secretary of the Company: Larry A. Byers, Michael D. Burns, Debbie Kidd, Ann Jenes, Nancy M. Young, Marci A. Houts, Rose A. Thorstenson, Hans Rauth, Mark S. Hewitt, Theresa Smith, Tom Dymant, Pat Dorney, Deanna Wersch, JoAnn Johnson, Debi Lewis, James L. Neschke, Cheryl Neschke, Michael K. Neschke. Provided, however, that no such person shall have the authority to certify the authenticity of a resolution or Limited Power of Attorney document which serves to appoint themselves as Attorney-in-Fact.

RESOLVED FURTHER that the signatures (including certification that the Power of Attorney is still in force and effect) of the President, Notary Public and person certifying authenticity and effectiveness, and the corporate and Notary seals appearing on any Limited Power of Attorney containing this and the foregoing resolutions as well as the Limited Power of Attorney itself and its transmission, may be by facsimile; and such Limited Power of Attorney shall be deemed an original in all aspects.

RESOLVED FURTHER that all resolutions adopted prior to today appointing the above named as Attorney-in-Fact for CONTRACTORS BONDING AND INSURANCE COMPANY are hereby superseded.

IN WITNESS WHEREOF, CONTRACTORS BONDING AND INSURANCE COMPANY has caused these presents to be signed by its President and its corporate seal to be hereto affixed this 19th day of September, 2005.

CONTRACTORS BONDING AND INSURANCE COMPANY

By: [Signature] Don Sirkin, President

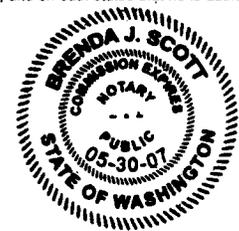


STATE OF WASHINGTON -- COUNTY OF KING

On this 19th day of September, 2005, personally appeared DON SIRKIN, to me known to be the President of the corporation that executed the foregoing Limited Power of Attorney and acknowledged said Limited Power of Attorney to be the free and voluntary act and deed of said corporation, for the uses and purposes therein mentioned, and on oath stated that he is authorized to execute the said Limited Power of Attorney.

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

[Signature] Brenda J. Scott



Notary Public in and for the State of Washington, residing at Seattle

The undersigned, acting under authority of the Board of Directors of CONTRACTORS BONDING AND INSURANCE COMPANY, hereby certifies, as or in lieu of Certificate of the Secretary of CONTRACTORS BONDING AND INSURANCE COMPANY, that the above and foregoing is a full, true and correct copy of the Original Power of Attorney issued by said Company, and does hereby further certify that the said Power of Attorney is still in force and effect.

GIVEN under my hand at [Signature] this 21 day of September, 2005

[Signature] Deanna Wersch