

AFFIDAVIT OF INSUFFICIENT INSURANCE COVERAGE SEPTEMBER 2020 CLACKAMAS COUNTY WILDFIRES

INSTRUCTIONS: To be consider for a building permit fee waiver for a structure lost in the September 2020 wildfires, please complete this form and submit it to Clackamas County Building Services at bldservice@clackamas.us or to the Development Services Building, 150 Beavercreek Rd, Oregon City, OR 97045. For more information, call 503-742-4741.

I, _ in t	his	, hereby affirm that the test Affidavit are true and correct in all material respe	following representations and covenants set forth ects as of the date of execution set forth below:	
1)	I am an owner, or an authorized representative of an owner, of property commonly known as <u>insert</u> <u>address or tax lot ID here</u> (the "Property").			
2)		The Property contains a structure or structures that were damaged or destroyed as a direct result of wildfires that occurred during September, 2020.		
3)	At the time of the damage or destruction, the Property was either:			
	a)) not covered by an insurance policy that provides repair of structures damaged or destroyed by the		
	b)) covered in an amount that is less than the full re destroyed, after application of any applicable de		
4)	The insufficient insurance coverage and the costs to rebuild or repair the structures on the Property have created a financial hardship.			
5)	I understand that if any of the above information provided by me is false, that I will be required to reimburse the County the amount of any building permit fees related to the Property that were waived as a result of my representations contained in this affidavit.			
		Ī.	Signature)	
		Ī	Date	
		TE OF OREGON } } ss. NTY OF CLACKAMAS }		
Thi	is	document was acknowledged before	me on, 2021, by	
		ry Public for		