

Doddridge County, WV Floodplain Management

This permit gives approval for the development/project listed that impacts the FEMA-designated floodplain and/or floodway of Doddridge County, WV, pursuant to the rules and regulations established by all applicable Federal, State and local laws and ordinances, including the Doddridge County Floodplain Ordinance. This permit must be posted at the site of work as to be clearly visible and must remain posted during entirety of development.

Permit #: 23-634

Date Approved: August 7, 2023

Expires: August 7, 2024

Issued to: Tim Dixon

POC: Tim Dixon

Company Address: 9435 WV State Rt. 23N West Union, WV 26456

Project Address: 9435 WV State Rt. 23N West Union, WV

Firm: 54017C0045C

Lat/Long: 39.392688, -80.638578

Purpose of development: Bridge Erosion Mitigation

Issued by: George C. Eidel, Doddridge County FPM (or designee)

Date: August 7, 2023

FLOODPLAIN PERMIT #23-634

Tim Dixon, 9435 WV ST RT 23N, Bridge Erosion Mitigation, 39.392688, -80.638578

TASK	COMPLETE , (DATE)	NOTES
CHECK RECEIVED	N/A	
US ARMY CORP.		
ENGINEERS (USACE)		
US FISH & WILDLIFE		
SERVICES (USFWS)		
WV DEPT. NATURAL		
RESOURCES (WVDNR)		
WV DEPT. ENVIROMENTAL		
PROTECTION (WVDEP)		
STATE HISTORIC &		
PRESERVATION OFFICE	1	
(SHPO)		
OFFICE of LAND & STREAM		
(OLS)		
WVDOH		
Elevation Certificate		
DATE OF COMMISSION		
READING	7/18/2023	
DATE AVAILABLE TO BE		
GRANTED	8/7/2023	
GRANTED	3,7,2323	
PERMIT GRANTED		
COMPLETE		

7057	1970	пппт	7228	4766	
7021	1970	0001	7228	4733	
7021	1970	0001	7228	4740	
7021	1970	0007	7228	4757	



Doddridge County Floodplain Permits

(Week of July 10, 2023)

Please take notice that on the (5th) of (July), 2023, (Tim Dixon) filed an application for a Floodplain

Permit (#23-634) to develop land located at or about (9435 WV Route 23 North); Coordinates:

39.392688, -80.638578. The Application is on file with the Floodplain Manager of the County and may

be inspected or copied during regular business hours in accordance with WV Code Chapter 29B Freedom

of Information, Article 1 Public Records and county policy and procedures. Any interested persons who

desire to comment shall present the same in writing by (August 7, 2023) (20 calendar days after the

announcement at the regularly scheduled Doddridge County Commission Meeting) delivered to the

Floodplain Manager of the County at 105 Court Street, Suite #3, West Union, WV 26456. This project is

for the installation of Bin Blocks to mitigate erosion damage to a low water bridge

GEORGE C. EIDEL, CFM

Doddridge County Floodplain Manager



Permit# 23-634

Low water Bridge Protection

Project Name: BLOCK/mirtigation

Permittees Name: Tim Dixon

Doddridge County, WV

Floodplain Development Permit Application

This document is to be used for projects that impact/potentially impact the FEMA---designated floodplain and/or floodway of Doddridge County, WV pursuant to the rules and regulations established by all applicable Federal, State and local laws and ordinances, including the Doddridge County Floodplain Ordinance.

SECTION 1: GENERAL PROVISIONS (APPLICANT TO READ AND SIGN)

- 1. No work may start until a permit is issued.
- 2. The permit may be revoked if any false statements are made herein.
- 3. If revoked, all work must cease until permit is re-issued.
- 4. The permit will expire if no work is commenced within six months of issuance.
- 5. Applicant is hereby informed that other permits may be required to fulfill local, state, and federal requirements.
- 6. Applicant hereby gives consent to the Floodplain Administrator/Manager or his/her representative to make inspections to verify compliance.
- 7. I THE APPLICANT CERTIFY THAT ALL STATEMENTS HEREIN AND IN ATTACHMENTS TO THIS APPLICATION ARE, TO THE BEST OF MY KNOWLEDGE, TRUE AND ACCURATE.

APPLICANT'S SIGNATURE	1	Som	The	
DATE	5	PIUE	2823	

Applicant Information:

Please provide all pertinent data.

Applicant Information					
Responsible Company Name: Tim Dixon					
Corporate Mailing Address: 9435 WV BT 23 Noch					
City: West Union	State: WV	zip: 26456			
Corporate Point of Contact (POC):	1200				
Corporate POC Title:					
Corporate POC Primary Phone: 304 - 64	1-8442				
Corporate POC Primary Email:					
Corporate FEIN:	Corporate DUN	IS:			
Corporate Website:					
Local Mailing Address:					
City:	State:	Zip:			
Local Project Manager (PM):					
Local PM Primary Phone:					
Local PM Secondary Phone:					
Local PM Primary Email:					
Person Filing Application:					
Applicant Title:					
Applicant Primary Phone:					
Applicant Secondary Phone:					
Applicant Primary Email:					

Project Narrative:

Describe in detail the proposed development including project name/title, type of development, estimated start and completion timeline, and its potential impact on the floodplain. Use additional copies of this page as needed.

Project Narrative:
Input ving calls using bin blocks on the down.
Input ving calls using bin blocks on the down. Stream Side of low vater bridge, ving calls are approximately 12 feel long by 4 feel tall.
enoraximatel , 12 feet lone by 4 feet dell.

Proposed Development:

Please check all elements of the proposed project that apply.

DESCRIPTION OF WORK (CHECK ALL APPLICABLE BOXES)

A. STRUCTURAL DEVELOPMENT

	AC	TIVITY				STRUCTU	RAL TYPE	
[]	New Struct	ture			[]	Residential (1 – 4 Family)		
[]	Addition				[]	Residential (more than 4 F		
[]	Alteration				[]	Non-residential (floodprod		
[]	Relocation				[]	Combined Use (res. & com		
[]	Demolition	1			[]	Replacement		
[]	Manufacti	ured/Mo	bil Home					
В.	OTHER DE	VELOPI	LMENT ACTI	VITIES:				
[]	Fill	0	Mining	[]	Drilling	g []	Pipelining	
[]	Grading							
[]	Excavation	(except	for STRUCTUF	RAL DEVE	LOPMEN	T checked a	bove)	
[]	Watercour	se Altera	ntion (includin	g dredgir	ng and cha	annel modif	ication)	
[]	Drainage II	mproven	nents (includir	ng culver	t work)			
[]	Road, Stre	et, or Bri	dge Construct	ion				
[]	Subdivision	ո (includi	ng new expan	ision)				
[]	Individual '	Water or	Sewer Systen	n				
[]	Other (plea	ase speci	fy)					
							·	
			 					
								

Development Site/Property Information:

Please provide physical description of the site/property, along with pertinent ownership (surface and mineral rights) data as applicable. Attach appropriate maps from the WV Flood Tool showing location of proposed development. Use additional copies of this page if development spans multiple property boundaries. Designate each property by number (i.e. Property 1 of 1, Property 2 of 7, etc.)

Site/Property Infor	mation:		
Legal Description:			
Physical Address/9	11 Addross		
Decimal Latitude/L	ongitude:		
DMS Latitude/Long	itude:		
District:	Map:		Parcel:
Land Book Descript	ion:		= 12
Deed Book Referen	ce:		
Tax Map Reference:			
Existing Buildings/	Use of Property:		
8,	•		
Floodplain Location	Data: (to be completed	by Floodplain Man	ager or designee)
Community:	Number:	Panel:	Suffix:
Location (Lat/Long)):	Approximate	e Elevation:
		Estimated B	FF.
	in the fleedurer?		opment in the floodplain?
Is the development	in the hoodway:		
Is the development	No	Yes	No Zone:
0 0	7	Yes	No Zone:

Property Owner Data:

Please provide data on current site/property landowner(s), both surface and mineral rights (as applicable). Use additional copies of this page as needed. Designate each page in relation to each property listed above.

Property Designation: of			
Decorate Octobra Data			
Property Owner Data: Name of Primary Owner (PO):			
PO Address:			
City:	State:	Zip:	
PO Primary Phone:			F. 7000
PO Secondary Phone:			
PO Primary Email:			4.4.4.5
Surface Rights Owner Data:			
Name of Primary Owner (PO):			
PO Address:			
City:	State:	Zip:	
PO Primary Phone:	4-1-1		
PO Secondary Phone:			
PO Primary Email:	1 40 C. 20 C. 1 5		
Mineral Rights Owner Data: (As Applic	able)		
Name of Primary Owner (PO):			
PO Address:	La Shelling Fals		
City:	State:	Zip:	
PO Primary Phone:			
PO Secondary Phone:			Edition 1
PO Primary Email:			

Contractor Data:

Property Designation:

of_

Please provide all pertinent data for contractors and sub---contractors that may be participating in this project. Use additional copies of this page as needed. Designate each page in relation to each property listed above.

Contractor/Sub-Contractor (C/SC	.) information:		
C/SC Company Name:			
C/SC WV License Number:			
C/SC FEIN:	C/SC DUNS	:	
Local C/SC Point of Contact (POC)):		
Local C/SC POC Title:			
C/SC Mailing Address:			
City:	State:	Zip-Code:	
Local C/SC Office Phone:			
Local C/SC POC Phone:			
Local C/SC POC E-Mail:			
Engineer Firm Information:			
Engineer Firm Information: Engineer Firm Name:			
Engineer Firm Information: Engineer Firm Name: Engineer WV License Number:	Engineer F	irm DUNS:	
Engineer Firm Information: Engineer Firm Name: Engineer WV License Number: Engineer Firm FEIN:		irm DUNS:	
Local C/SC POC E-Mail: Engineer Firm Information: Engineer Firm Name: Engineer WV License Number: Engineer Firm FEIN: Engineer Firm Primary Point of C	Contact (POC):	irm DUNS:	
Engineer Firm Information: Engineer Firm Name: Engineer WV License Number: Engineer Firm FEIN: Engineer Firm Primary Point of C	Contact (POC):	irm DUNS:	
Engineer Firm Information: Engineer Firm Name: Engineer WV License Number: Engineer Firm FEIN: Engineer Firm Primary Point of C Engineer Firm Primary POC Title Engineer Firm Mailing Address:	Contact (POC):	irm DUNS: Zip-Code:	
Engineer Firm Information: Engineer Firm Name: Engineer WV License Number: Engineer Firm FEIN: Engineer Firm Primary Point of C Engineer Firm Primary POC Title Engineer Firm Mailing Address: City:	Contact (POC):		
Engineer Firm Information: Engineer Firm Name: Engineer WV License Number: Engineer Firm FEIN: Engineer Firm Primary Point of C	Contact (POC): : State:		

Adjacent and/or Affected Landowners Data

Please provide data for all adjacent and/or affected surface owners (both up and down stream) whose property may be impacted by proposed development as demonstrated by a floodplain study or survey. Use additional copies of this page as needed.

Adjacent Property Owner Data: Upstream
Name of Primary Owner (PO): Paula A. Timothy L. Ash
Physical Address: 3537 WV Rt. 23 N
City: Saler State: WV Zip: 26426
PO Primary Phone:
PO Secondary Phone:
PO Primary Email:
Adjacent Property Owner Data: Upstream
Name of Primary Owner (PO): bornes S. 3 Ellen Joan Sullivan Sr.
Physical Address: 54 Riverview Circle
City: Crawford State: Zip: 26343
PO Primary Phone:
PO Secondary Phone:
PO Primary Email:
Adjacent Property Owner Data: Downstream
Name of Primary Owner (PO): McClellan Dist. Vol. Fire Dept.
Physical Address: 24 Pike Fork Rd.
City: Center doint State: WV Zip: 26339
PO Primary Phone:
PO Secondary Phone:
PO Secondary Phone: PO Primary Email:
PO Primary Email: Adjacent Property Owner Data: Downstream Name of Primary Owner (PO): Robert M. Haug: Dawn C. Friello
PO Primary Email: Adjacent Property Owner Data: Downstream Name of Primary Owner (PO): Robert M. Haug: Dawn C. Friello Physical Address: 24 Chewront Ave.
Po Primary Email: Adjacent Property Owner Data: Downstream Name of Primary Owner (PO): Robert M. Haug: Dawn C. Friello
PO Primary Email: Adjacent Property Owner Data: Downstream Name of Primary Owner (PO): Robert M. Haug. Dawn C. Free lo Physical Address: 34 Chewrort Ave.
PO Primary Email: Adjacent Property Owner Data: Downstream Name of Primary Owner (PO): Robert M. Hang: Dawn C. Friello Physical Address: 24 Chewront Ave. City: West Union State: WV Zip: 26456

Site Plan

A Site Plan is an accurate and detailed map of the proposed development for this project. It shows the size, shape, location and special features of the project property, and the size and location of any development planned to the property, especially as that development will impact the floodplain and/or floodway. Site plans show what currently exists on the project property, and any changes or improvements you are proposing to make. A certified and licensed engineering firm should complete site plans.

A SITE PLAN MUST CONTAIN THE FOLLOWING INFORMATION:

- 1. Legal description of the parcel, north arrow and scale
- 2. All property lines and their dimensions
- 3. Names of adjacent roads, location of driveways
- 4. Location of sloughs, tributaries, streams, rivers, wetlands, ponds, and lakes, with setbacks indicated, and including FEMA floodplain data based on most updated FIRM.
- 5. Location, size, shape of all buildings, existing and proposed, with elevation of lowest floor indicated.
- 6. Location and dimensions of existing or proposed on-site sewage systems.
- 7. Location of all propane tanks, fuel tanks or other liquid storage tanks whether above ground or below ground level.
- 8. Location and dimensions of any proposed pipeline placement(s) into floodplain/floodway.
- 9. Location and dimensions of any roadway development into floodplain/floodway. (Includes initial development access roads)
- 10. Location and dimensions of any bridge and/or culvert development into floodplain/floodway.
- 11. Location and dimensions of any storage yard or facility into the floodplain/floodway.
- 12. Location of any existing utilities and/or proposed utility placement and/or displacement.
- 13. Location, dimensions and depth of any existing or proposed fill on site.
- 14. A survey showing the **existing ground elevations** of at least location on the building site. **ELEVATION NOTE**: All vertical datum will reference either NGVD 29 or NAVD 88. Assumed datum will not be acceptable unless the property is located in an area where vertical datum has not been published. For those areas where vertical datum has not been established, a site plan with contours, elevations using assumed datum, high water marks and existing water levels of sloughs, rivers, lakes or streams and proposed lowest floor elevation.

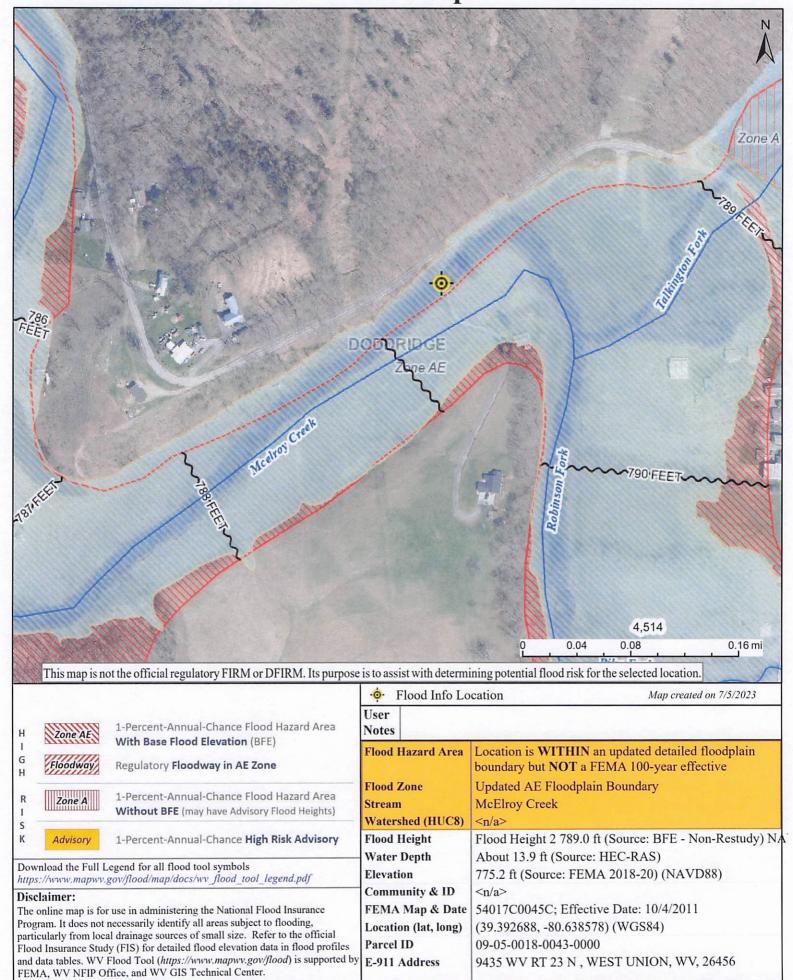
Applicant

Please read print name, sign and date below:

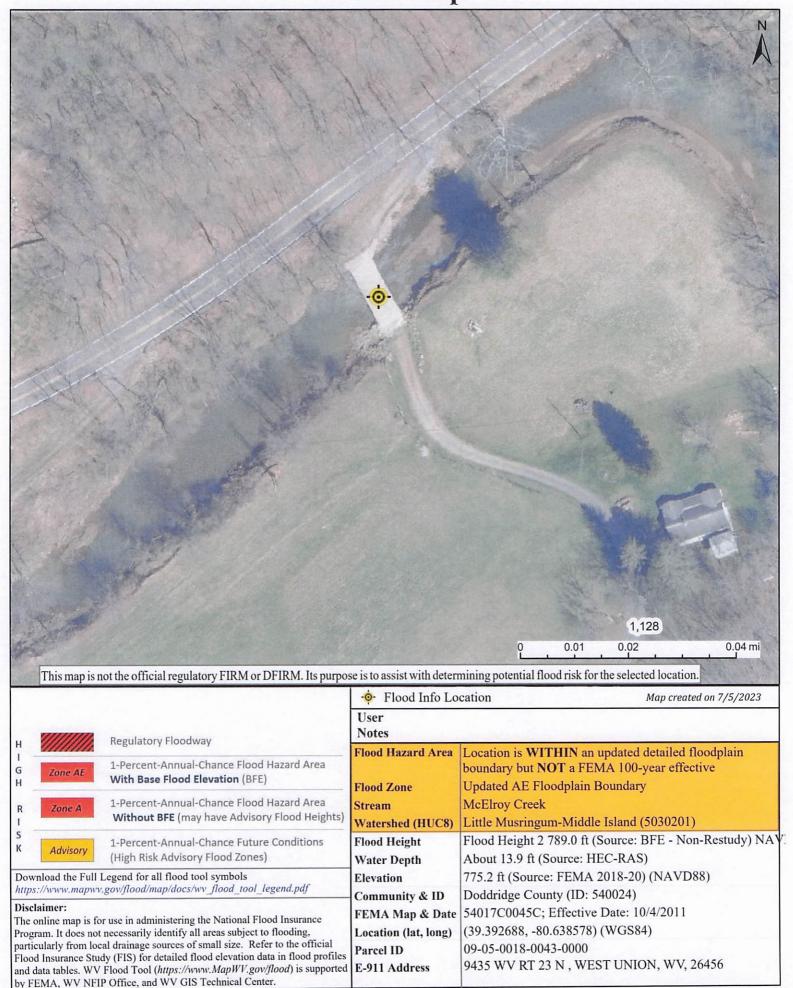
- I certify that I am authorized to submit this application for the primary project developer.
- I certify that the information included in this application is to the best of my knowledge true and complete.
- I certify that all required Federal, State, and local permits required by law and/or ordinance for the above described development of this project have will be properly attained, are current and valid, and must be presented prior to a Doddridge County Floodplain Permit being issued.
- I understand that if in the course of the development project additional permits become
 required that were not needed during the initial proposal, the primary developer must notify the
 Doddridge County Floodplain Manager within 48 hours of such need, and that a "Stop Work"
 order may be issued for all project work directly impacting the floodplain or floodway, until such
 time the required additional permits are acquired.
- I understand that once the floodplain permit is submitted, the application will be entered into
 official public record at the next regularly scheduled Doddridge County Commission meeting
 after the date of submittal.
- I understand that from the date of submittal of the fully completed permit application, the
 Doddridge County Floodplain Manager has ninety (90) days to make a determination to either
 grant or deny said permit application. During this approval period, the Doddridge County
 Floodplain Manager may, at his or her discretion, conduct a review and/or additional study of
 provided documentation by means of an independent engineering firm. All costs associated with
 said review and/or study must be reimbursed to the County before issuance of approved permit.
- I understand that during the approval period, the Doddridge County Floodplain Manager of designee may at his or her discretion conduct site visits and document conditions of proposed development pursuant to the permit application.
- I understand that once the Floodplain Permit is granted, the permit will be entered into official public record. Appeals to the permit may be made no later than twenty (20) days after said issuance. If a valid appeal is submitted, as determined by the Doddridge County Floodplain Manager, a "Stop Work" order will be issued for all project development directly involving the floodplain or floodway. A public hearing by the Doddridge County Appeals Board will be scheduled no less than ten (10) days after the next regularly scheduled Doddridge County Commission meeting.
- I understand that all decisions of the Doddridge County Appeals Board shall be final.
- I understand issuance of a Floodplain Permit authorizes me to proceed with construction as proposed.
- In signing this application, the primary developer hereby grants the Doddridge County Floodplain Manager or designee the right to enter onto the above---described location to inspect the development work proposed, in progress, and/or completed.
- I understand that if I do not follow exactly the site—plan submitted and approved by this permit
 that a "Stop Work" order may be issued by the Doddridge County Floodplain Manager and that
 I must stop all construction immediately until discrepancies of actual work vs. proposed work is
 resolved.

Applicant Signature: TMN	Date: 500/4 2003
Applicant Printed Name: Tim Dixon	

WV Flood Map



WV Flood Map



INVOICE

The Herald Record LLC 177 MAIN STREET WEST UNION, WV 26456 **United States**

> Phone:304-873-1600 Fax: 304-666-1017 Mobile: 304-266-2247 TheHeraldRecord.com

Doddridge County OFFICE OF EMERGENCY MANAGEMENT

101 Church Street

West Union, West Virginia 26456

United States

Invoice Number: 4151

Invoice Date: July 21, 2023

Payment Due: July 21, 2023

\$98.00

Amount Due (USD): \$98.00

Amount Due (USD):

Items	Quantity	Price	Amount
CLASS II FLOODPLAIN PERMIT # 23-634 RUN DATES: 7/12/23 & 7/19/13	1	\$49.00	\$49.00
CLASS II FLOODPLAIN PERMIT # 23-633	1	\$49.00	\$49.00
		Total:	\$98.00

Doddridge County Floodplain Permits (Week of July 10, 2023)

Please take notice that on the (5th) of (July), 2023, (Tim Dixon) filed an application for a Floodplain Permit (#23-634) to develop land located at or about (9435 Route 23 North); Coordinates: 39.392688, -80.638578. The Application is on file with the Floodplain Manager of the County and may be inspected or copied during regular business hours in accordance with WV Code Chapter 29B Freedom of Information, Article 1 Public Records and county policy and procedures. Any interested persons who desire to comment shall present the same in writing by (August 7, 2023) (20 calendar days after the announcement at the regularly scheduled Doddridge County Commission Meeting) delivered to the Floodplain Manager of the County at 105 Court Street, Suite #3, West Union, WV 26456. This project isfor the installation of Bin Blocks to mitigate croston damage to a low water bridge

George Eidel,CFM, OEM Doddridge County Floodplain Manager

STATE of WEST VIRGINIA; COUNTY OF DODDRIDGE, TO WIT:

I, Tamela B. Beamer, Editor of THE HER-ALD RECORD, a certified weekly newspaper published regularly in Doddridge County, West Virginia, Do Hereby Certify Upon Oath that the accompanying Legal Notice entitled:

Doddridge County Floodplain Permit #23-634

was published in said paper for <u>2</u> successive weeks beginning with the issue of <u>July 12</u>, 2023 and ending with the issue of <u>July 19</u>, 2023 that contains <u>252</u> word space at <u>.115</u> cents per word and amounts to the sum of \$28.00 FOR THE FIRST PUBLICATION.

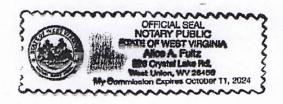
SECOND PUBLICATION IS 75% OF THE FIRST PUBLICATION and each other publication thereafter \$\(\frac{21.00}{20.00} \) for the TOTAL OF: \$\(\frac{49.00}{20.00} \).

Lamela B. Bornes

SWORN TO AND SUBSCRIBED BEFORE ME THIS THE ___19th_day of __July__, 2023

NOTARY PUBLIC

alice le Duoz



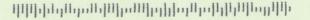


First-Class Mail Postage & Fees Paid USPS Permit No. G-10

United States Postal Service • Sender: Please print your name, address, and ZIP+4® in this box•

Doddridge County Office of Emergency Management/Floodplain Manager 101 Church Street, Suite 102 West Union, WV 26456

23-634



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

obert Manag & Dawn C. Friello 84 euvront Avenue West Union, WV 26456



2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent Addressee (Printed Name C. Date of Delivery

D. Is delivery address different from item 12/ If YES, enter delivery address below: No

3. Service Type ☐ Adult Signature

☐ Adult Signature Restricted Delivery Certified Mail® ☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Insured Mail Restricted Delivery

☐ Collect on Delivery Restricted Delivery ☐ Insured Mail

(over \$500)

☐ Signature Confirmation™

☐ Signature Confirmation

Restricted Delivery

Delivery

☐ Priority Mail Express®

☐ Registered Mail Restricted

☐ Registered Mail™

USPS TRACKING#

First-Class Mail Postage & Fees Paid USPS Permit No. G-10

9590 9402 7059 1225 4206 76

United States Postal Service Sender: Please print your name, address, and ZIP+4® in this box

Doddridge County Office of Emergency Management/Floodplain Manager 101 Church Street, Suite 102 West Union, WV 26456

23-634

San Low 20 SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits. Autiala Addusasad to

ames S. & Ellen Joan Sullivan, Sr. 54 Riverview Circle Crawford, WV 26343



9590 9402 7059 1225 4206 76

2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

	Signature			
6	Alla	0	1	
3.	Received by	(Printe	ed Na	1

☑ Addressee C. Date of Delivery

☐ Agent

Fillen Sullidal D. Is delivery address different from item 1? If YES, enter delivery address below:

7-7-2023 ☐ Yes □ No

3. Service Type ☐ Adult Signature

☐ Collect on Delivery

☐ Insured Mail

(over \$500)

☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery

☐ Insured Mail Restricted Delivery

☐ Collect on Delivery Restricted Delivery

☐ Registered Mail Restricted Delivery ☐ Signature Confirmation™ ☐ Signature Confirmation

☐ Priority Mail Express®

☐ Registered Mail™

Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt



First-Class Mail Postage & Fees Paid USPS Permit No. G-10

United States Postal Service Sender: Please print your name, address, and ZIP+4® in this box

Doddridge County Office of Emergency Management/Floodplain Manager 101 Church Street, Suite 102 West Union, WV 26456

23-634

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece. or on the front if space permits.
- Article Addressed to:

McClellan Dist. Vol. Fire Dept. 24 Pike Fork Road Center Point, WV 26339



9590 9402 7059 1225 4206 69

2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature **Agent** ☐ Addressee B. Received by (Printed Name) C. Date of Delivery

If YES, enter delivery address below:

☐ Yes D. Is delivery address different from item 1?

- 3. Service Type
- ☐ Adult Signature ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail® ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™ ☐ Registered Mail Restricted

III No

- Delivery
- ☐ Signature Confirmation™
- □ Signature Confirmation Restricted Delivery

USPS TRACKING#





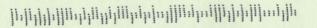
First-Class Mail Postage & Fees Paid USPS Permit No. G-10

9590 9402 7059 1225 4206 38

United States Postal Service Sender: Please print your name, address, and ZIP+4[®] in this box

Doddridge County Office of Emergency Management/Floodplain Manager 101 Church Street, Suite 102 West Union, WV 26456

23-634



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.
- 1 Article Addressed to

Paula A. & Timothy L. Ash 3537 WV Rt. 23N Salem, WV 26426



9590 9402 7059 1225 4206 38

2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

7 imothy L, HSH
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type

Adult Signature

☐ Adult Signature Restricted Delivery
 ☐ Certified Mail®

□ Certified Mail Restricted Delivery
 □ Collect on Delivery
 □ Collect on Delivery Restricted Delivery

☐ Insured Mail

☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®

☐ Registered Mail™
☐ Registered Mail Restricted

Delivery
☐ Signature Confirmation™

 ☐ Signature Confirmation[™]
 ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only For delivery information, visit our website at www.usps.com®. 40 П Certified Mail Fee 77 Extra Services & Fees (check box, add Return Receipt (hardcopy) 1000 Return Receipt (electronic) Postmer Certified Mail Restricted Delivery Here Adult Signature Required Adult Signature Restricted Delivery 1970 Postage Pog 56-9998 Total Postage and Fees 7027 +M. Haug = Dawn C. Frello

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Rev

See Reverse for Instructions

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only For delivery information, visit our website at www.usps.com®. 40 П Certified Mail Fee П xtra Services & Fees (check box, add Return Receipt (hardcopy) 0001 Return Receipt (electronic) Certified Mail Restricted Delivery Here Adult Signature Required Adult Signature Restricted Delivery \$

Postage

7027

Total Postage and Fees

Sent To Clellan Distribution of Policy No. Rd

Street and Ant. No., or Policy No. Rd

Poly, State, ZIP+48

Poly State, ZIP

See Reverse for Instructions

PS Form 3800, April 2015 PSN 7530-02-000-9047

S

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT 4733 Domestic Mail Only For delivery information, visit our website at www.usps.com®. -0 722 Certifled Mail Fee Extra Services & Fees (check box, add Return Receipt (hardcopy) TOOO Return Receipt (electronic) ostmar Certified Mail Restricted Delivery Here Adult Signature Required Adult Signature Restricted Delivery \$ 1970 Postage Total Postage and Fees 7027 1005. 5 Ellen-ban Sullivan, Sr. Sent To

See Reverse for Instructions

PS Form 3800, April 2015 PSN 7530-02-000-9047

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only For delivery information, visit our website at www.te

П

L

1970

7027

For delivery information, visit our website at www.usps.com®. Certified Mail Fee xtra Services & Fees (check box, add Return Receipt (hardcopy) Return Receipt (electronic) Certified Mail Restricted Delivery Adult Signature Required Adult Signature Restricted Delivery \$ Postage ₹6456-998° Total Postage and Fees JaA . Fimothy L. Ash 23-634 PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions