



Public Works Department  
12725 SW Millikan Way | PO Box 4755 | Beaverton, OR 97076  
p: 503-526-2269  
[www.BeavertonOregon.gov](http://www.BeavertonOregon.gov)

### Water Service Provider Letter (SPL)

**PLEASE RETURN THIS FORM TO:**

PRE-APPLICATION DATE: 12/02/2020

**SITE INFORMATION:**

Tax Map(s): 1S109AD1600 Lot Number(s): \_\_\_\_\_

Size: 0.77 acres

Address: 2855 SW Cedar Hills Blvd

Nearest cross-street (or directions to site):  
SW Jenkins Road  
SW Cedar Hills Boulevard

**APPLICANT:**

Contact: Greg Wadzinski

Company: DOWL

Address: 720 SW Washington Street, Ste 750  
Portland, OR 97219

Phone: (971) 280-8661

Email: gwadzinski@dowl.com

**OWNER(S):**

Contact: Seth GaRey

Company: Center Developments Oreg 5 LLC

Address: 1701 SE Columbia River Drive  
Vancouver, WA 98661

Phone: (360) 823-2779

Email: sgarey@cejohn.com

PROPOSED PROJECT NAME: CHC US Bank Site Redevelopment

PROPOSED DEVELOPMENT ACTION (ex. Design Review, Land Division, Conditional Use, etc.):  
Type 2 Design Review, Parking Determination, Loading Determination

EXISTING USE: Vacant building (previously a bank) PROPOSED USE: Commercial Shopping served by public loop system

RESIDENTIAL: \_\_\_\_\_ INDUSTRIAL/COMMERCIAL:  CONDITIONAL USE: \_\_\_\_\_  
Single Fam. N Multi-Fam. N Type of Use: Commercial retail No. of Students/Employees/Etc.: \_\_\_\_\_  
No. of Units: N/A Gross Floor Area 14,273 SQ. FT. Gross Floor Area \_\_\_\_\_ SQ FT.

Average Daily Demand (gallons/day): 14,000 Peak Daily Demand (gallons/day): 28,000 Peak Hour (gallons/day): 40,000

FIRE FLOW REQUIRED: (gpm): 2,250 IRRIGATION FLOW REQUIRED: (gpm): 40

**\*\*\*FOR INTERNAL USE ONLY – DO NOT WRITE BELOW THIS LINE\*\*\***

**\*\*\*Both agency signatures required**

**TVWD**  ADEQUATE  INADEQUATE SERVICE LEVEL TO SERVE THE PROPOSED PROJECT. Describe why service level is inadequate and needed improvements or modification required to provide adequate services. (Use additional sheets to explain if necessary)

----- N/A -----

**SIGNATURE:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**COB**  ADEQUATE  INADEQUATE SERVICE LEVEL TO SERVE THE PROPOSED PROJECT. Describe why service level is inadequate and needed improvements or modification required to provide adequate services. (Use additional sheets to explain if necessary)

**SIGNATURE:** Brion Barnett Digitally signed by Brion Barnett  
DN: cn=Brion Barnett, o=Beaverton Oregon.gov, ou=City of Beaverton, cn=Brion Barnett **TITLE:** Senior Water Engineer **DATE:** 03/01/2022