

**Ed Fournier**

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**From:** Foster, Jeremy L. <Jeremy.Foster@tvfr.com>  
**Sent:** Wednesday, July 13, 2022 8:58 AM  
**To:** Ed Fournier  
**Subject:** FW: Comcast generator replacement project, 1750 NW 173rd, Beaverton

Good morning Ed-

I have reviewed your project and have determined that the scope of the project does not alter fire department access and/ or water supplies to this site. Therefore, a Service Provider Permit (SPP) from TVF&R is not required. Please forward this e-mail to COB Planning. I discussed this project with the COB Building Official this morning and she stated that they would review and permit the multi generator install. Let me know if you have any questions.

Thank you,

**Jeremy Foster | Deputy Fire Marshal**  
Tualatin Valley Fire & Rescue  
Direct: 503-259-1414  
[www.tvfr.com](http://www.tvfr.com)

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**From:** Ed Fournier <[ed@landservicesnw.com](mailto:ed@landservicesnw.com)>  
**Sent:** Tuesday, July 12, 2022 8:37 AM  
**To:** Foster, Jeremy L. <[Jeremy.Foster@tvfr.com](mailto:Jeremy.Foster@tvfr.com)>  
**Subject:** FW: Comcast generator replacement project, 1750 NW 173rd, Beaverton

**\*\*\*The sender is from outside TVF&R – Do not click on links or attachments unless you are sure they are safe\*\*\***

Mr. Foster – received this e-mail returned last night as not deliverable. Apparently, I messed up your e-mail address. Thank you.

**Ed Fournier**  
**503/260-0350 mobile**

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**From:** Ed Fournier <[ed@landservicesnw.com](mailto:ed@landservicesnw.com)>  
**Sent:** Thursday, July 7, 2022 4:20 PM  
**To:** [Jeremy.Foster@TVFD.com](mailto:Jeremy.Foster@TVFD.com)  
**Subject:** Comcast generator replacement project, 1750 NW 173rd, Beaverton

Mr. Foster – thank you for your time on the phone. As you requested, here is a drawing set that includes a site plan. The replacement back-up power generators are to be placed in an unused gravel area west of the existing generators that was formerly used for satellite dishes. No impact to any on site access, parking, etc. Once the replacement back-up power generators are in place, the existing units will be removed. An air photo of the Comcast facility is below.

Please let me know of any questions to reply to this TVFD service provider request. Thank you.

**Ed Fournier**  
**Land Services Northwest, LLC**  
**541/728-3328 office**  
**503/260-0350 mobile**



Engineering Department
12725 SW Millikan Way | PO Box 4755 | Beaverton, OR 97076
p: 503-526-2269

www.BeavertonOregon.gov

Remit Form to: MailboxEngineering@BeavertonOregon.gov

Water Service Provider Letter (SPL)

yellow highlight mandatory info

PRE-APPLICATION DATE: 01/26/2022

APPLICANT:

SITE INFORMATION:

Tax Map(s): Lot Number(s):
1N131AB 01400

Contact: Ed Fournier as Agent for Comcast
Company: PO Box 302
Address: Denver, CO 80217
Phone: (503) 260-0350

Size: 1.44 AC
Address: PO Box 173838
Nearest cross-street (or directions to site):
South of NW 169th Place and
Just north of Five Oaks Middle School

OWNER(S):
Contact: Comcast (Willamette Cable TV)
Company: PO Box 173838
Address: Denver, CO 80217
Phone:
Email:

PROPOSED PROJECT NAME: Comcast Beaverton - back up power generator replacement project

PROPOSED DEVELOPMENT ACTION (ex. Design Review, Land Division, Conditional Use, etc.):
Replace two back-up power generators with three new units and planning for a 4th. No change to water use proposed.

EXISTING USE: Comcast data center PROPOSED USE: no change

RESIDENTIAL: INDUSTRIAL/COMMERCIAL: CONDITIONAL USE:
Single Fam. N Multi-Fam. N Type of Use: commercial No. of Students/Employees/Etc.:
No. of Units: 3 generators Gross Floor Area no change SQ. FT. Gross Floor Area no change SQ. FT.

Average Daily Demand (gallons/day): Peak Daily Demand (gallons/day): Peak Hour (gallons/day):

FIRE FLOW REQUIRED: (gpm): IRRIGATION FLOW REQUIRED: (gpm):

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

\*\*\*Both agency signatures required

TWWD [X] 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: [Signature] TITLE: Development Services Engineer DATE: 05/25/2022

COB [X] 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 TITLE: Senior Water Engineer DATE: 05/25/2022

# SENSITIVE AREA PRE-SCREENING SITE ASSESSMENT

Clean Water Services File Number

1. **Jurisdiction:** \_\_\_\_\_

2. **Property Information** (example: 1S234AB01400)

Tax lot ID(s): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**OR Site Address:** \_\_\_\_\_

City, State, Zip: \_\_\_\_\_  
 Nearest cross street: \_\_\_\_\_

3. **Owner Information**

Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Phone/fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

4. **Development Activity** (check **all** that apply)

- Addition to single family residence (rooms, deck, garage)
- Lot line adjustment       Minor land partition
- Residential condominium    Commercial condominium
- Residential subdivision      Commercial subdivision
- Single lot commercial        Multi lot commercial
- Other \_\_\_\_\_

4. **Applicant Information**

Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Phone/fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

6. **Will the project involve any off-site work?**  Yes  No  Unknown

Location and description of off-site work: \_\_\_\_\_

7. **Additional comments or information that may be needed to understand your project:** \_\_\_\_\_

**This application does NOT replace Grading and Erosion Control Permits, Connection Permits, Building Permits, Site Development Permits, DEQ 1200-C Permit or other permits as issued by the Department of Environmental Quality, Department of State Lands and/or Department of the Army COE. All required permits and approvals must be obtained and completed under applicable local, state, and federal law.**

By signing this form, the Owner or Owner's authorized agent or representative, acknowledges and agrees that employees of Clean Water Services have authority to enter the project site at all reasonable times for the purpose of inspecting project site conditions and gathering information related to the project site. I certify that I am familiar with the information contained in this document, and to the best of my knowledge and belief, this information is true, complete, and accurate.

Print/type name \_\_\_\_\_

Print/type title \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

## FOR DISTRICT USE ONLY

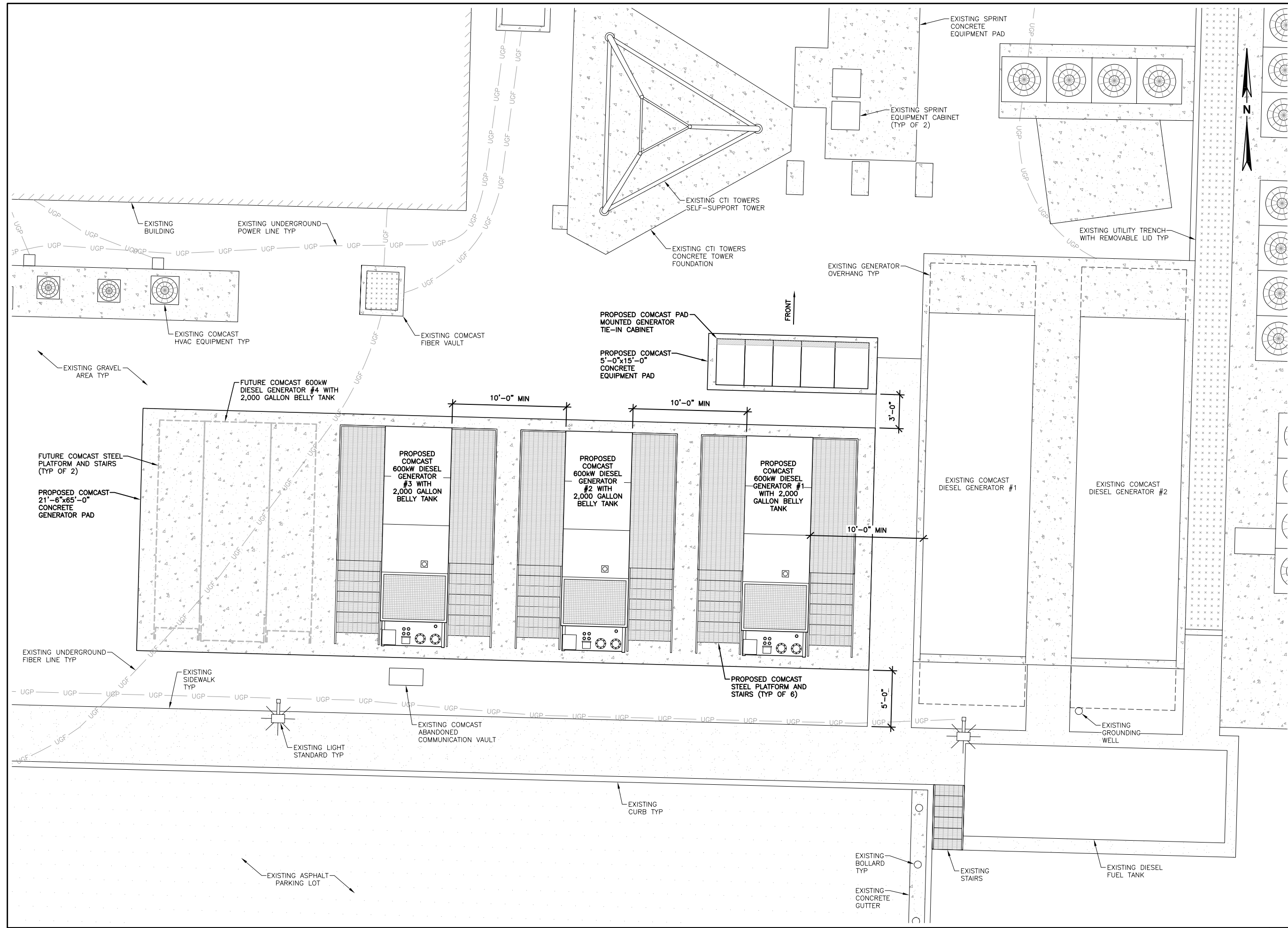
- Sensitive areas potentially exist on site or within 200' of the site. **THE APPLICANT MUST PERFORM A SITE ASSESSMENT PRIOR TO ISSUANCE OF A SERVICE PROVIDER LETTER.** If Sensitive Areas exist on the site or within 200 feet on adjacent properties, a Natural Resources Assessment Report may also be required.
- Based on review of the submitted materials and best available information sensitive areas do not appear to exist on site or within 200' of the site. This Sensitive Area Pre-Screening Site Assessment does NOT eliminate the need to evaluate and protect water quality sensitive areas if they are subsequently discovered. This document will serve as your Service Provider Letter as required by Resolution and Order 19-5, Section 3.02.1, as amended by Resolution and Order 19-22. All required permits and approvals must be obtained and completed under applicable local, State and federal law.
- Based on review of the submitted materials and best available information the above referenced project will not significantly impact the existing or potentially sensitive area(s) found near the site. This Sensitive Area Pre-Screening Site Assessment does NOT eliminate the need to evaluate and protect additional water quality sensitive areas if they are subsequently discovered. This document will serve as your Service Provider Letter as required by Resolution and Order 19-5, Section 3.02.1, as amended by Resolution and Order 19-22. All required permits and approvals must be obtained and completed under applicable local, state and federal law.
- THIS SERVICE PROVIDER LETTER IS NOT VALID UNLESS \_\_\_\_\_ CWS APPROVED SITE PLAN(S) ARE ATTACHED.**
- The proposed activity does not meet the definition of development or the lot was platted after 9/9/95 ORS 92.040(2). **NO SITE ASSESSMENT OR SERVICE PROVIDER LETTER IS REQUIRED.**

Reviewed by \_\_\_\_\_

Date \_\_\_\_\_

Once complete, email to: [SPLReview@cleanwaterservices.org](mailto:SPLReview@cleanwaterservices.org) • Fax: (503) 681-4439

OR mail to: SPL Review, Clean Water Services, 2550 SW Hillsboro Highway, Hillsboro, Oregon 97123



DO NOT SCALE DRAWINGS. CONTRACTOR MUST VERIFY ALL DRAWINGS AND ADVISE CONSULTANTS OF ANY ERRORS OR OMISSIONS. NO VARIATIONS OR MODIFICATIONS TO WORK SHOWN SHALL BE IMPLEMENTED WITHOUT PRIOR WRITTEN APPROVAL. ALL PREVIOUS ISSUES OF THIS DRAWING ARE SUPERSEDED BY THE LATEST REVISION. ALL DRAWINGS AND SPECIFICATIONS REMAIN THE PROPERTY OF LYNX CONSULTING, INC. NEITHER LYNX CONSULTING, INC. NOR THE ARCHITECT WILL BE PROVIDING CONSTRUCTION REVIEW OF THIS PROJECT.

REV	DATE	DESCRIPTION
-	-	-
-	-	-
-	-	-
1	-	PCD'S ISSUED FOR REVIEW

PROJECT:

**COMCAST BEAVERTON**  
 1750 NW 173RD AVE  
 BEAVERTON, OR 97006

SHEET TITLE:

**PROPOSED COMPOUND PLAN**

PROJECT NUMBER: -	DATE: 12/16/21
DRAFTER: BEW	PROFESSIONAL OF RECORD BEW
REVISION NO: 1	SHEET NO: A-2

22"x34" SCALE: 1/4" = 1'-0"  
 11"x17" SCALE: 1/8" = 1'-0"