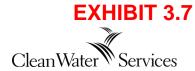
Received Planning Division 05/01/2024



SENSITIVE AREA PRE-SCREENING SITE ASSESSMENT

C	Elean Water Services File Number
. Jurisdiction:	
Property Information (example: 1S234AB01400) Tax lot ID(s):	Company:
OR Cite Address.	
OR Site Address: City, State, Zip:	
Nearest cross street:	··
4. Development Activity (check all that apply) Addition to single family residence (rooms, deck, garage) Lot line adjustment	4. Applicant Information Name: Company: Address: City, State, Zip: Phone/fax: Email:
5. Will the project involve any off-site work? Yes No	
Location and description of off-site work:	
7. Additional comments or information that may be needed to	understand your project:
services have authority to enter the project site at all reasonable time information related to the project site. I certify that I am familiar with knowledge and belief, this information is true, complete, and accurately print/type name	
Signature ONLINE SUBMITTAL	Date
ISSUANCE OF A SERVICE PROVIDER LETTER. If Sensitive Are Resources Assessment Report may also be required. □ Based on review of the submitted materials and best available informatives. This Sensitive Area Pre-Screening Site Assessment does NOT eling they are subsequently discovered. This document will serve as your \$1.02.1, as amended by Resolution and Order 19-22. All required per local, State and federal law. □ Based on review of the submitted materials and best available informatives are your substitute on the provider provider that the submitted materials and best available informative and protect additional water quality sensitive areas if they are provider Letter as required by Resolution and Order 19-5, Section 3. approvals must be obtained and completed under applicable local, set as the submitted provider that the provider Letter as required by Resolution and Order 19-5, Section 3.	itive Area Pre-Screening Site Assessment does NOT eliminate the need to are subsequently discovered. This document will serve as your Service 02.1, as amended by Resolution and Order 19-22. All required permits and state and federal law.
OR SERVICE PROVIDER LETTER IS REQUIRED.	or the lot was platted after 9/9/95 ORS 92.040(2). NO SITE ASSESSMENT
Reviewed by <i>Mila Gonzalez Lima</i> Once Complete, email to: SPLReview@clear	Date
Once Complete email to: SPLReview@clear	waterservices.org • Fax: (503) 681-4439
Un maii to: SPL keview, Clean vvater Services, 2	550 SW Hillsboro Highway, Hillsboro, Oregon 97123

75% DESIGN DOCUMENTS AUGUST 18, 2023

DRAWN BY
CHECKED BY

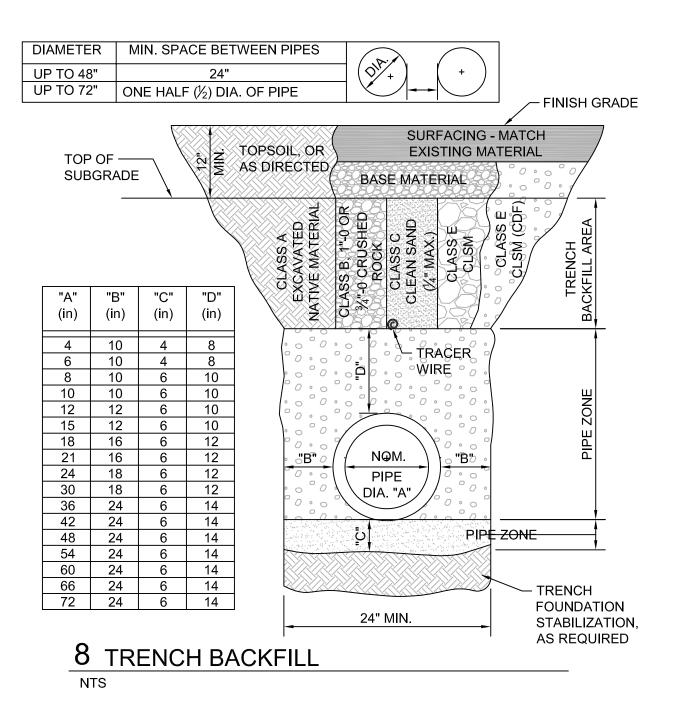
UTILITY PLAN

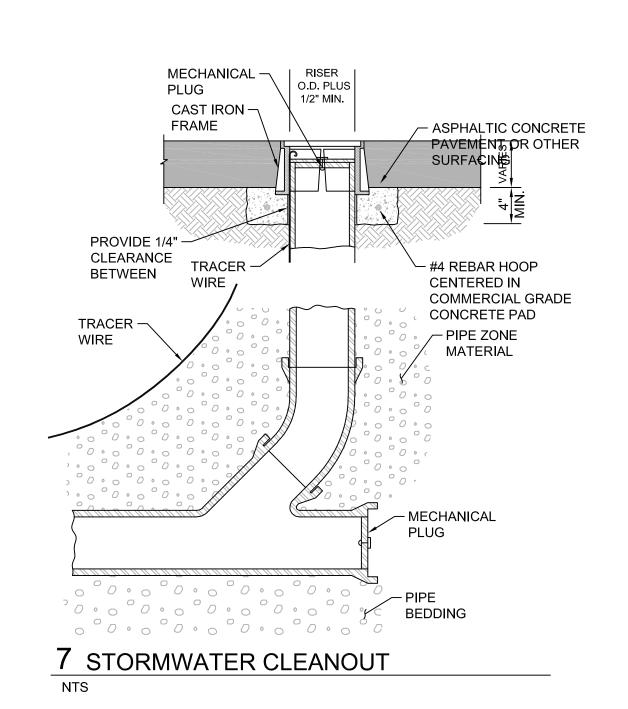


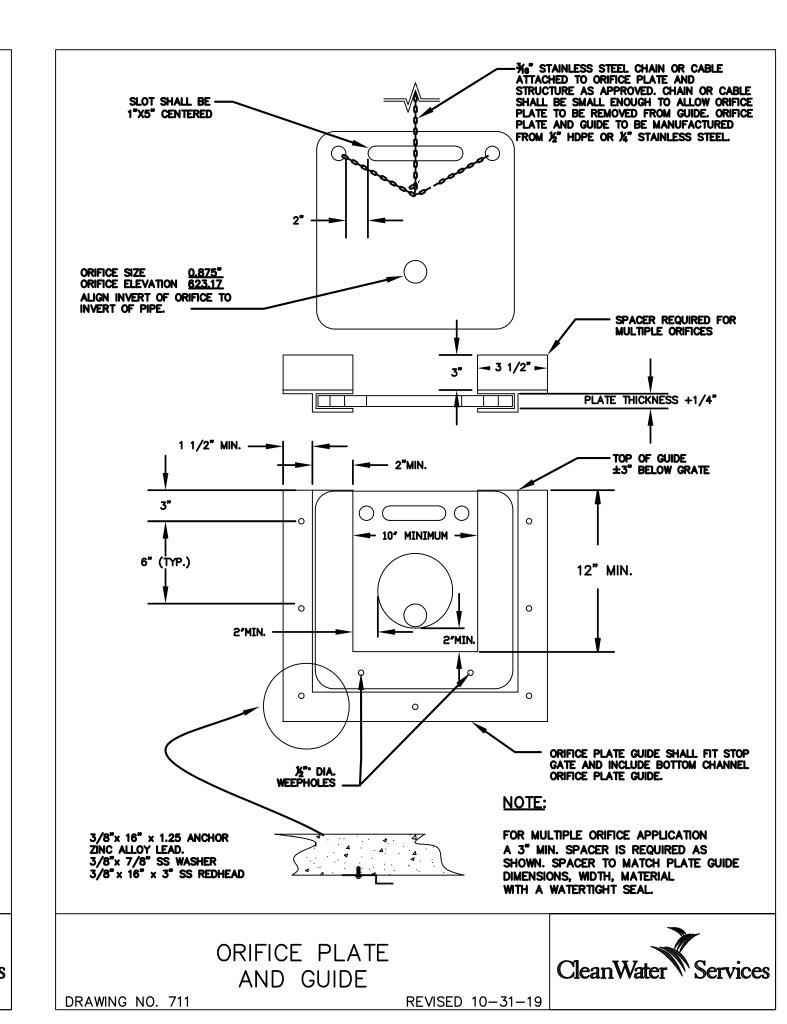
75% DESIGN DOCUMENTS **AUGUST 18, 2023**

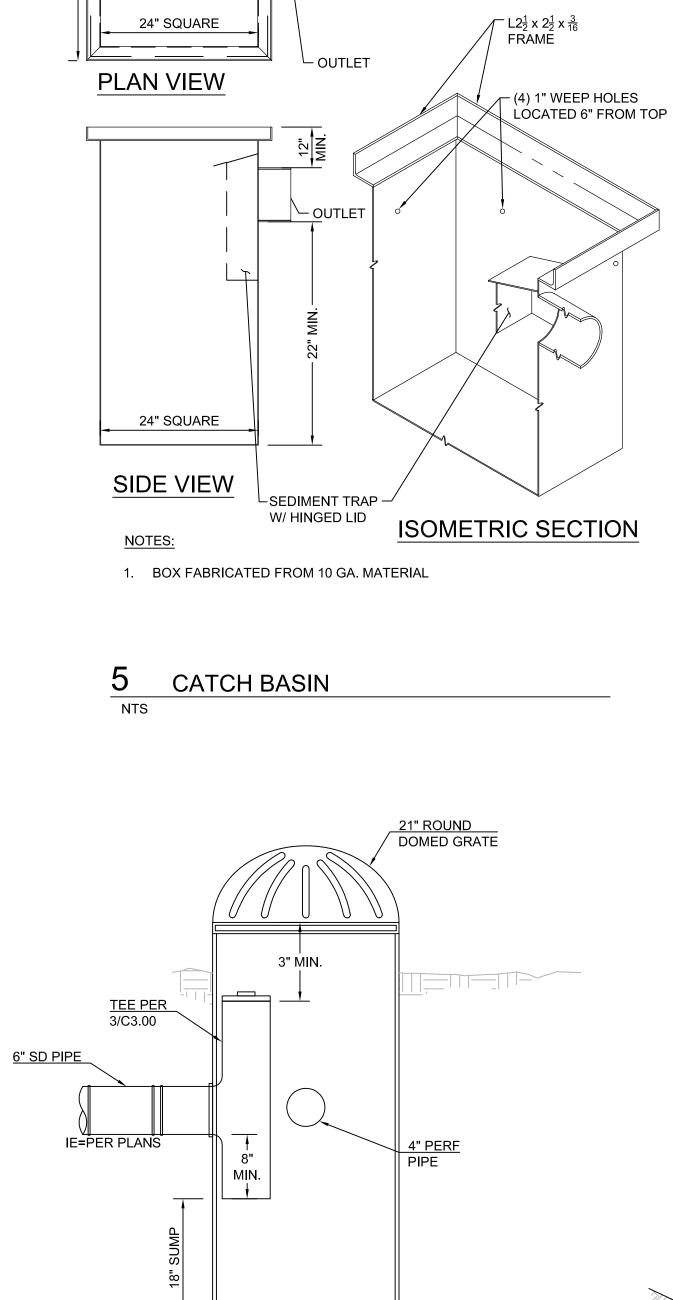
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CIVIL DETAILS





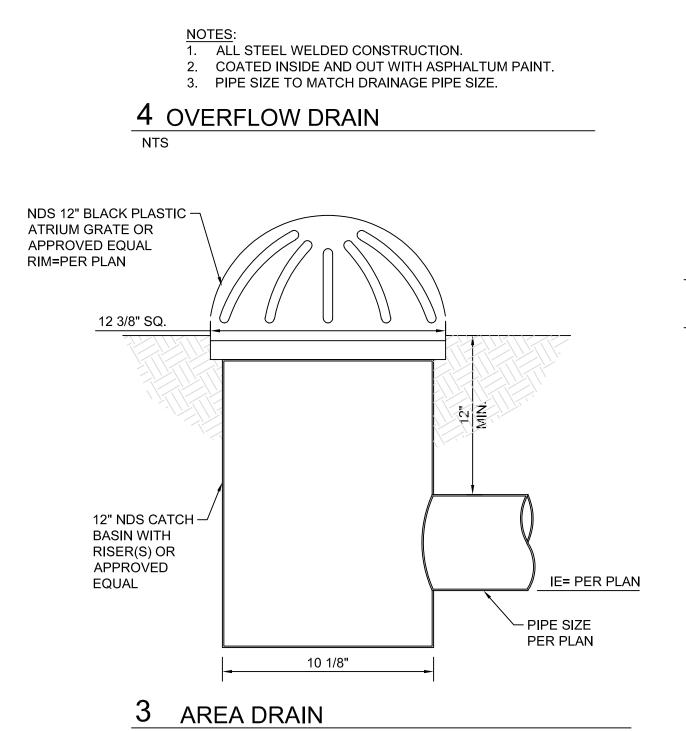




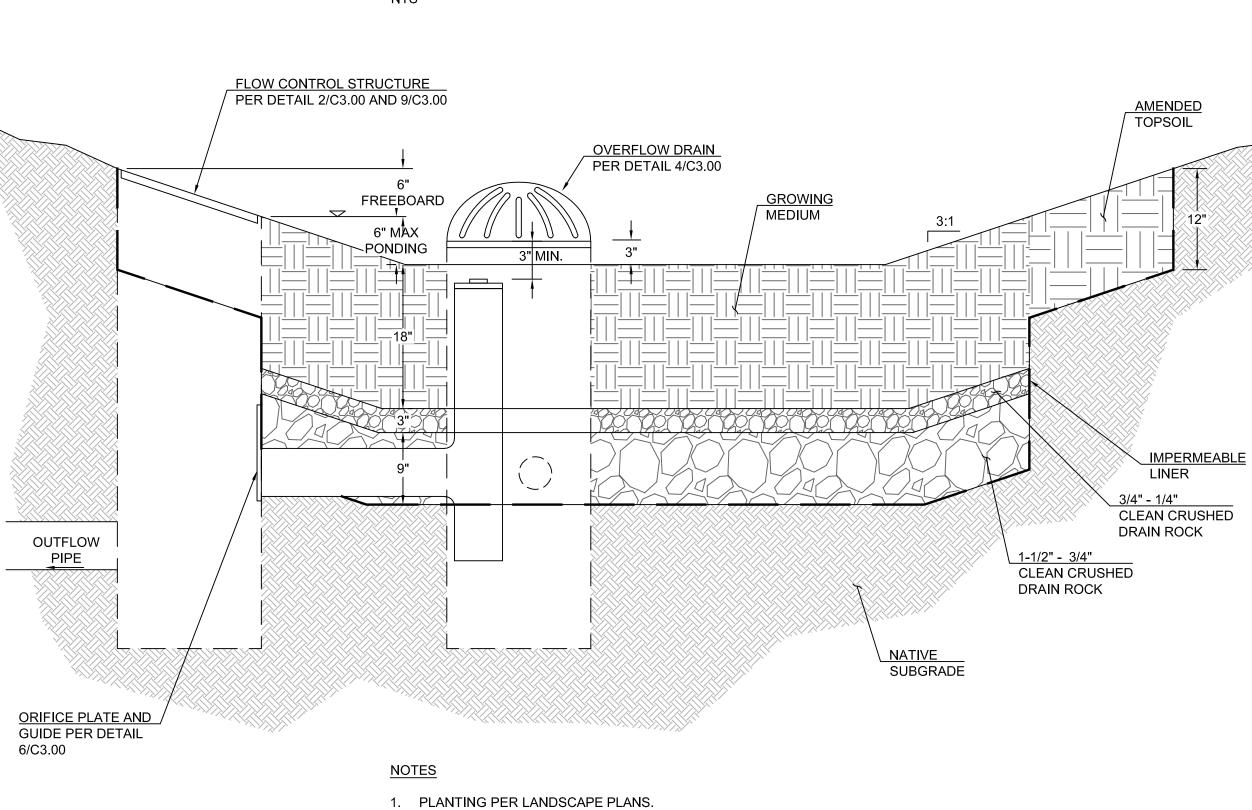
GRATING

BIKE PROOF, HEAVY DUTY -TRAFFIC GRATE SUPPORTS

AASHTO H25 LOADS



ROUND



2. TREATMENT AREA SHALL HAVE HIGH DENSITY JUTE OR COCONUT

MATTING OVER 18" MINIMUM OF GROWING MEDIUM, OR BASE

4. ATTACH IMPERMEABLE LINER TO CONCRETE 2" BELOW TOP OF SOIL.

FLOW-THROUGH STORMWATER BASIN

IMPERMEABLE LINER SHALL BE 30 MIL MINIMUM. PROVIDE WATERTIGHT

PENETRATION THROUGH IMPERMEABLE LINER FOR OUTFLOW FROM

STABILIZATION METHOD AS APPROVED BY THE DISTRICT.

CONSTRUCT ROCK SPLASH PAD AT OUTFALL.

OVERFLOW DRAIN.

NTS

WALL SECTION AND INTERIOR DIMENSIONS

FRAME: GRATE PER STD. DWG 400

STORM SEWER OUT.

AND GRATE.

DRAWING NO. 710

PLATE AND —
GUIDE (SEE
DRAWING NO. 730

ONE SIZE LARGER THAN THE ORIFICE OPENING.

IN ACCORDANCE WITH STD. DWG 390

MAXIMUM WATER SURFACE ELEVATION

REVISED 10-31-19

1. CONNECTING PIPE AND TEE SHALL BE 4", 6", OR 8" AWWA C-900 OR ASTM 3034 PVC, AND

MAXIMUM ORIFICE OPENING SHALL BE 6" DIAMETER.
 STRUCTURES SHALL CONFORM TO STANDARD DRAWING NO. 390 DITCH INLET.
 FRAME AND GRATE SHALL CONFORM TO STANDARD DRAWING NO. 400, DITCH INLET FRAME

5. PLATE AND GUIDE SHALL BE SECURED FLUSH AGAINST WALL OF STRUCTURE AS APPROVED. MAINTENANCE ACCESS REQUIRED TO WITHIN 10' OF CENTER OF BOTH STRUCTURES.

7. ALTERNATE STRUCTURES TO BE APPROVED, IN WRITING, BY DISTRICT OR CITY.

OUTFLOW CONTROL

STRUCTURE

2 FLOW CONTROL STRUCTURE

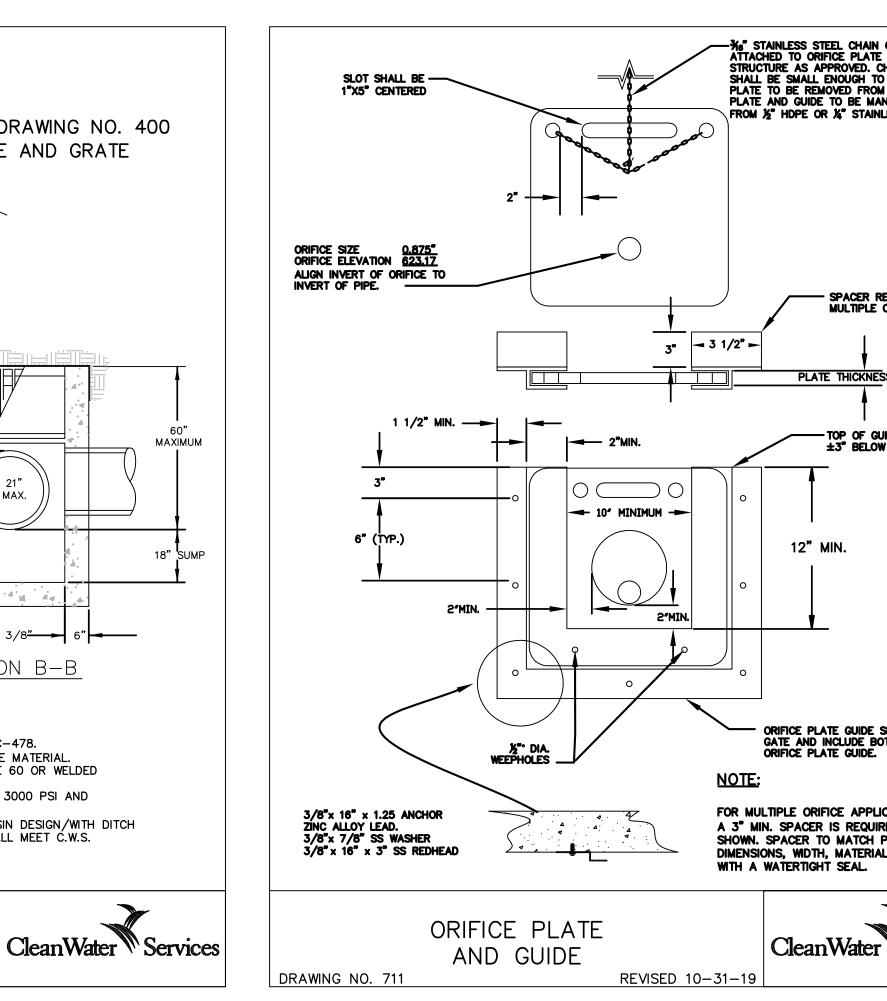
ANCHOR TO WALL WITH
STAINLESS STEEL RISER
CLAMP OR 2" MIN. STAINLESS
STEEL BAND AND STAINLESS
STEEL ANCHORS. MINIMUM OF

CleanWater \ Services

3/8" x 16" x 1.25" —

ANCHOR ZINC ALLOY LEAD
3/8" x 7/8" SS WASHER
3/8" x 16" x 3" SS REDHEAD

CLAMP DETAIL



SEE STD. DRAWING NO. 400

FOR FRAME AND GRATE

44 4 44

6" 27 3/8" 6" 6"

SECTION B-B

— FLOW INVERT

POURED IN PLACE
5" WITH

REINFORCEMENT

SECTION A-A

1. ALL PRE CAST SECTIONS SHALL CONFORM TO REQUIREMENTS OF ASTM C-478.

INSTALL STRUCTURE ON MINIMUM OF 8" OF 3/4" - 0" COMPACTED BASE MATERIAL. PRE CAST REINFORCEMENT SHALL BE REBAR MEETING ASTM A615 GRADE 60 OR WELDED

INLET TOP ARE AN ACCEPTABLE ALTERNATE. ALL GRATE MATERIALS SHALL MEET C.W.S.

PRE-CAST STRUCTURE'S CONFORMING TO O.D.O.T. TYPE G-2 CATCH BASIN DESIGN/WITH DITCH

REVISED 10-31-19

4. ALL POURED IN PLACE CONCRETE SHALL HAVE A 28 DAY STRENGTH OF 3000 PSI AND

FINISH GRADE

NOTES:

DRAWING NO. 390

WIRE MEETING ASTM A497

STANDARDS AS SHOWN ON DETAIL #400

DITCH INLET

9 DITCH INLET

SLUMP OF 2" TO 4".

NTS

6 ORIFICE PLATE AND GUIDE NTS

Received Planning Division 05/01/2024

From: Foster, Jeremy L. <Jeremy.Foster@tvfr.com>
Sent: Tuesday, September 19, 2023 9:53 AM

To: Brynne Healy

Subject: RE: Online Form Submittal: Service provider permit for Beaverton

Good morning Brynne-

I reviewed this project this morning and determined that the proposal does not require a permit from TVF&R. Existing water supplies are adequate, and all firefighting will be conducted in the public street. Please submit this e-mail to the COB with your land use application.

Thank you,

Jeremy Foster | Deputy Fire Marshal

Tualatin Valley Fire & Rescue Direct: 503-259-1414 www.tvfr.com

From: noreply@civicplus.com <noreply@civicplus.com>

Sent: Tuesday, September 12, 2023 9:53 AM

To: Ernst, Brian C. <Brian.Ernst@tvfr.com>; Foster, Jeremy L. <Jeremy.Foster@tvfr.com>; Weisgerber,

Gregory A. < Gregory. Weisgerber@tvfr.com >

Subject: Online Form Submittal: Service provider permit for Beaverton

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

Service provider permit for Beaverton

Instructions

- 1. Complete & submit the TVF&R Permit Application
- 2. Complete & submit the <u>Fire Department Access and Water Supply Permit</u>
 <u>Checklist</u>
- 3. Attach one plan sheet, labeled FS-1, that clearly shows all access and water supply requirements of the Fire Department Access and Water Supply

Permit Checklist. If more plan sheets are necessary, label them FS-2, FS-3, etc. Please keep plan sheets to a minimum.

Once approved, an electronically stamped plan will be returned to you. The approved plan and permit application will then need to be submitted with your land use application to the <u>city of Beaverton Planning Department</u>. If you have further questions, please contact Jeremy Foster at 503-259-1414 or Brian Ernst at 503-259-1422.

Name	Brynne Healy
Email	brynne@vegacivil.com
City	Beaverton
1) Submit Permit Application	TVFR Universal Permit Application Pointer Rd Park.pdf
2) Submit Permit Checklist	Pointer Rd Park - Project Permit Checklist.pdf
3) Submit Plan Sheet (s)	2023-09-12 - Pointer Rd FP-1.pdf
4) Additional Documentation (Optional)	Field not completed.
5) Additional Documentation (Optional)	Field not completed.

Email not displaying correctly? View it in your browser.

Received Planning Division

05/01/2024



WASHINGTON COUNTY

Dept. of Land Use & Transportation Planning and Development Services Current Planning 155 N. 1st Avenue, #350-13 Hillsboro, OR 97124 Ph. (503) 846-8761 Fax (503) 846-2908 http://www.co.washington.or.us

Request For Statement Of Service Availability (Service Provider Letter)

	1		
■ WATER DISTRICT: West Slupe W.D	OWNER(S): NAME:		rks & Recreation District
CITY OF:	ADDRESS:	15707 SW Walke	
CLEAN WATER SERVICES (Sanitary Sewer)	PHONE:	Beaverton, OR 9 503-614-4002	7006
Additionally, you'll need our separate, individual request forms titled:	Property Des	c.: Tax Map(s): 1S101DC	Lot Number(s): 03301, 04001
Clean Water Services (Surface Water Mgmt.)Tri-Met	Site Size: 1.	93 AC	
♦ School		7385 SW Canyor	
Sheriff / Police	Nearest cross SW Pointer	s street (or directions	s to site):
Tualatin Hills Park & Recreation District	3W F Officer	ING	
PROPOSED PROJECT NAME: Pointer Rd Park			
PROPOSED DEVELOPMENT ACTION: (DEVELOPMENT REVIEW, S	SUBDIVISION, MINOR	PARTITION, SPECIAL USE)	
Land Use Review: a new neighborhood access public pa			d one ADA parking spot
EXISTING USE: Residential/Vacant Land			orhood Public Park
EXISTING USE: Nesidential/ Vacant Land	PROPOSE	1101911b	on our ability and
F RESIDENTIAL: IF INDUSTRIAL/C		NO. SQ. FT.	
	FLOOD ADEA)	NO STUDEN	TS/EMPLOYEES/MEMBERS:
***************************************		***************************************	
	VICE PROBLE TO THE	OVIDER***** SITE (ADEQUATE D ABOVE.	OR INADEQUATE).
*****ATTENTION SER PLEASE INDICATE THE LEVEL OF SERVICE AVAILAR RETURN THIS COMPLETED FORM TO THE APPLICA (Do NOT return this form to Washington County. To their Land Development Application submittal). SERVICE LEVEL IS ADEQUATE TO SERVE THE PROPOSE Please indicate what improvements, or revisions to the proposal are what it is properly was cost ir on water main on Succession.	ED PROJECT. needed for you to	OVIDER***** SITE (ADEQUATE D ABOVE. will submit the composite additional she controlled adequate services and expenses the controlled adequate services and expenses the controlled adequate.	ets if necessary.) rvice to this project.
*****ATTENTION SER PLEASE INDICATE THE LEVEL OF SERVICE AVAILA RETURN THIS COMPLETED FORM TO THE APPLICA (Do NOT return this form to Washington County. T their Land Development Application submittal). SERVICE LEVEL IS ADEQUATE TO SERVE THE PROPOS Please indicate what improvements, or revisions to the proposal are that is a service to this property was cost in more water was a service. SIGNATURE: POSITION: Please indicate why the service level is inadequate.	ED PROJECT. needed for you to	OVIDER***** SITE (ADEQUATE D ABOVE. will submit the composite additional she controlled adequate services and expenses the controlled adequate services and expenses and expenses the controlled adequate services are controlled and expenses and expenses and expenses are controlled adequate services	ets if necessary.) rvice to this project.

PRE-APPLICATION DATE:

APPLICANT:

COMPANY:

CONTACT:

ADDRESS:

PHONE:

Service Provider: PLEASE RETURN THIS FORM TO:

Brynne Healy

503-662-1901

Vega Civil Engineering

1300 SE Stark St #201

Portland, OR 97214