

SENSITIVE AREA PRE-SCREENING SITE ASSESSMENT

Clean Water Services File Number 20-003029

1. **Jurisdiction:** Tualatin

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

Tax lot ID(s): _____
2S113DC01200

OR Site Address: 18040 SW Lower Boones Ferry Road

City, State, Zip: Tigard, OR, 97224

Nearest cross street: SW Childs Road

3. **Owner Information**

Name: Evan Schaye

Company: Providence St. Joseph Health

Address: 4400 NE Halsey Street, Building #2, Suite 150

City, State, Zip: Portland, OR, 97213

Phone/fax: (503) 515-6791

Email: evan.schaye@providence.org

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 Installation of a 12x60 trailer and canopy

4. **Applicant Information**

Name: Evan Schaye

Company: Providence St. Joseph Health

Address: 4400 NE Halsey Street, Building #2, Suite 150

City, State, Zip: Portland, OR, 97213

Phone/fax: (503) 515-6791

Email: evan.schaye@providence.org

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 Evan Schaye

Print/type title _____

Signature ONLINE SUBMITTAL

Date 11/10/2020

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 

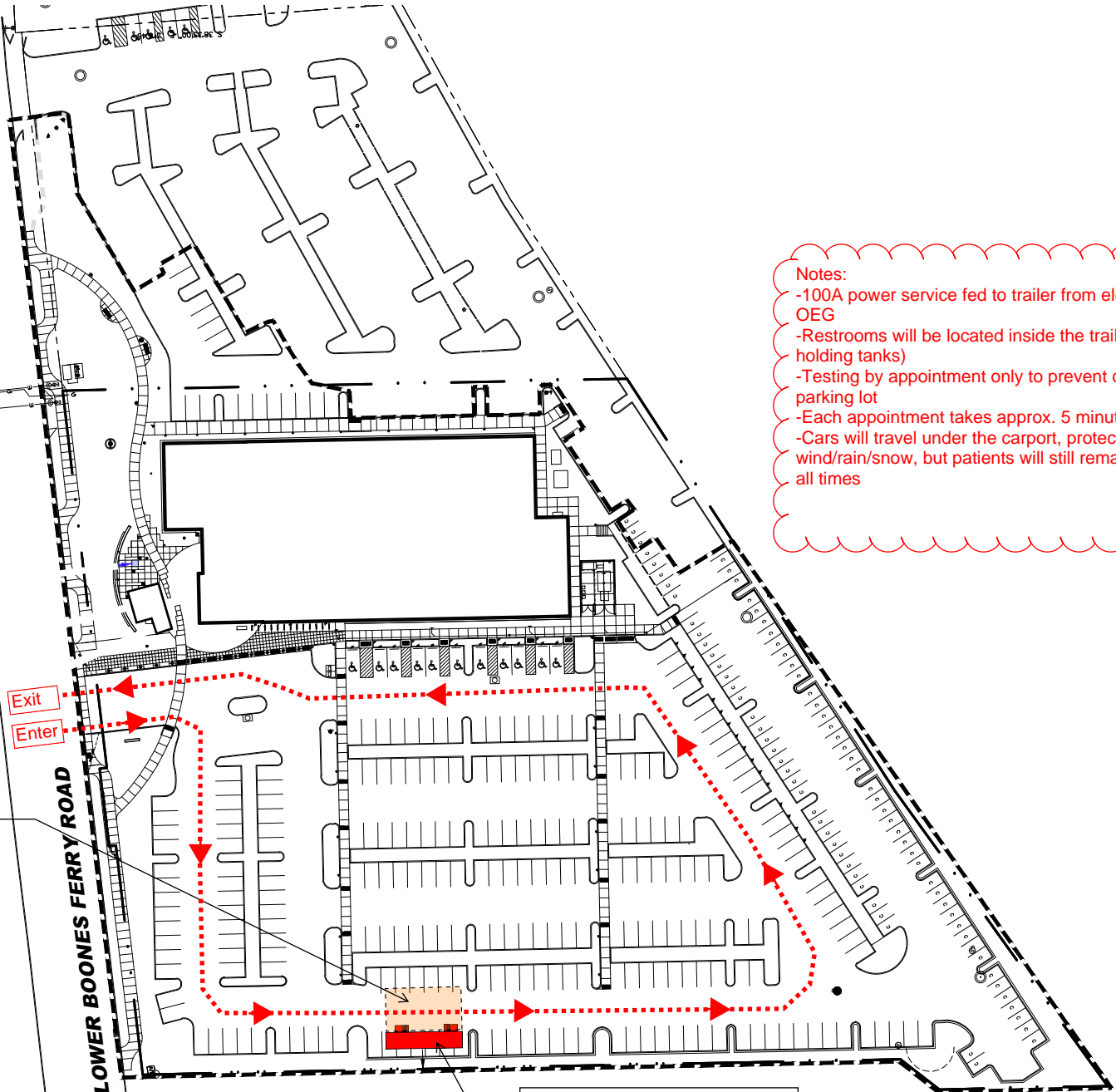
Date 11/18/2020

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

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

Drive-through canopy by Alaska Structures. Engineering and drawings are currently in production - to be submitted as soon as available. Delivery and installation approximately 6 weeks from 11/10/2020

- Notes:
- 100A power service fed to trailer from electrical room by OEG
 - Restrooms will be located inside the trailer (with septic holding tanks)
 - Testing by appointment only to prevent queuing in parking lot
 - Each appointment takes approx. 5 minutes
 - Cars will travel under the carport, protected from wind/rain/snow, but patients will still remain in their cars at all times



New 12x60 trailer

**PROVIDENCE HEALTH & SERVICES
BRIDGEPORT HEALTH CENTER
COVID ASSESSMENT CARE TENTS
TIGARD, OREGON**

SITE PLAN

SCALE: 1" = 100'-0"

MARCH 31, 2020

