

SENSITIVE AREA PRE-SCREENING SITE ASSESSMENT

Clean Water Services File Number

21-002337

1. **Jurisdiction:** Sherwood

2. **Property Information** (example: 15234AB01400)

Tax lot ID(s): 2S128B000700, 2S128B001050, 2S128B001051

~~-----700-2S-1-28-B---1050-2S-1-28-B-1051-2S-1-28-B-----~~

OR Site Address: 13470 SW Galbreath Dr

City, State, Zip: Sherwood, OR, 97140

Nearest cross street: SW CIPOLE RD

3. **Owner Information**

Name: Robert Gray

Company: RA GRAY CONSTRUCTION

Address: PO Box 1000

City, State, Zip: Sherwood, OR, 97140

Phone/fax: 5036924675

Email: ajmichaud@ragrayconst.com

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: AJ MICHAUD

Company: RA GRAY CONSTRUCTION

Address: PO Box 1000

City, State, Zip: Sherwood, OR, 97140

Phone/fax: 5036924675

Email: ajmichaud@ragrayconst.com

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 AJ MICHAUD

Print/type title PM

Signature ONLINE SUBMITTAL

Date 8/3/2021

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 9/14/21

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

**FIRE CODE / LAND USE / BUILDING REVIEW
APPLICATION**

□

North Oregon Center
11945 SW 70th Avenue
Tigard, OR 97223
Phone: 503-649-8577

South Oregon Center
8445 SW Elligsen Rd
Wilsonville, OR 97070
Phone: 503-649-8577

REV 6-30-20

Project Information

Applicant Name: **AS MICHAUD GRAY CONSTRUCTION**
 Address: **PO BOX 000 SHE 007 OR 0**
 Phone: **-69 -46 5**
 Email: **a.michaud@grayconstruction.com**
 Site Address: **GALBREATH DR**
 City: **SHERWOOD**
 Map & Tax Lot #: **251286000700**
 Business Name: **BARBER CABINETS GRAGE**
 Land Use/Building Jurisdiction: **SHERWOOD**
 Land Use/ Building Permit #: **U 2022-013**
 Choose from: Beaverton, Tigard, Newberg, Tualatin, North Plains, West Linn, Wilsonville, Sherwood, Rivergrove, Durham, King City, Washington County, Clackamas County, Multnomah County, Yamhill County

Permit/Review Type (check one):

- Land Use / Building Review - Service Provider Permit
- Emergency Radio Responder Coverage Install/Test
- LPG Tank (Greater than 2,000 gallons)
- Flammable or Combustible Liquid Tank Installation (Greater than 1,000 gallons)
 - * Exception: Underground Storage Tanks (UST) are deferred to DEQ for regulation.
- Explosives Blasting (Blasting plan is required)
- Exterior Toxic, Pyrophoric or Corrosive Gas Installation (in excess of 810 cu.ft.)
- Tents or Temporary Membrane Structures (in excess of 10,000 square feet)
- Temporary Haunted House or similar
- OLCC Cannabis Extraction License Review
- Ceremonial Fire or Bonfire (For gathering, ceremony or other assembly)

Project Description

**NEW 30,000 SF BUILDING
 W/ SITE PARKING LOT +
 LOADING DOCKS**

For Fire Marshal's Office Use Only

TVFR Permit #: _____
 Permit Type: _____
 Submittal Date: _____
 Assigned To: _____
 Due Date: _____
 Fees Due: _____
 Fees Paid: _____

**Approval/Inspection Conditions
(For Fire Marshal's Office Use Only)**

Section for application approval only

This section used when site inspection is required

Signature of Applicant or Designee: _____ Date: _____
 Conditions: _____

Inspection Comments:

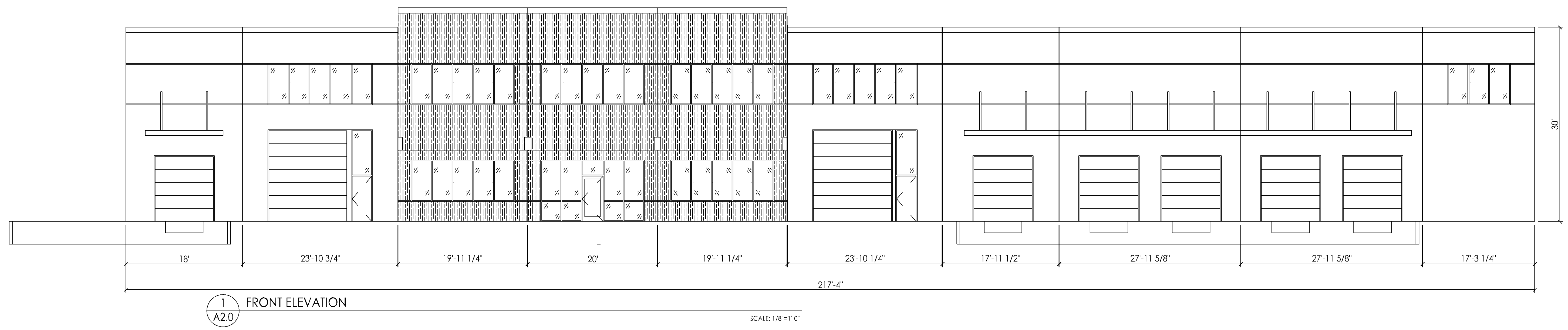
See Attached Conditions: Yes No

Site Inspection Required: Yes No

Final TVFR Approval Signature & Emp ID

Date

REVISIONS	BY

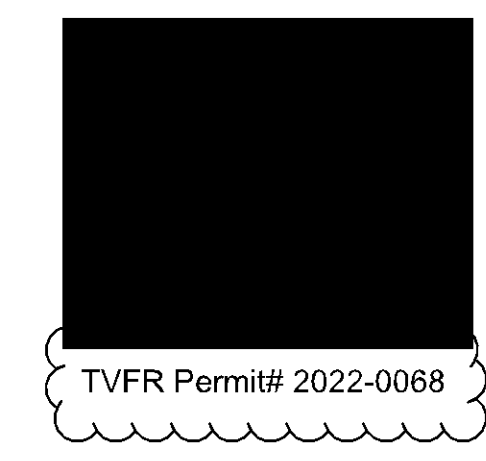
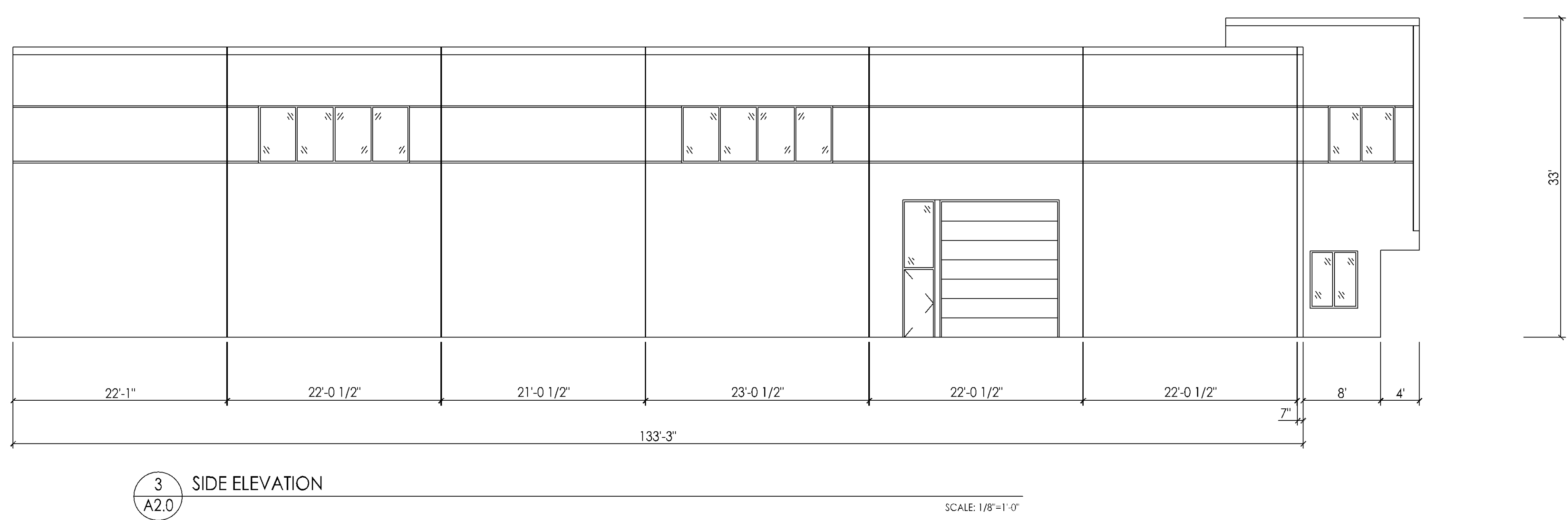
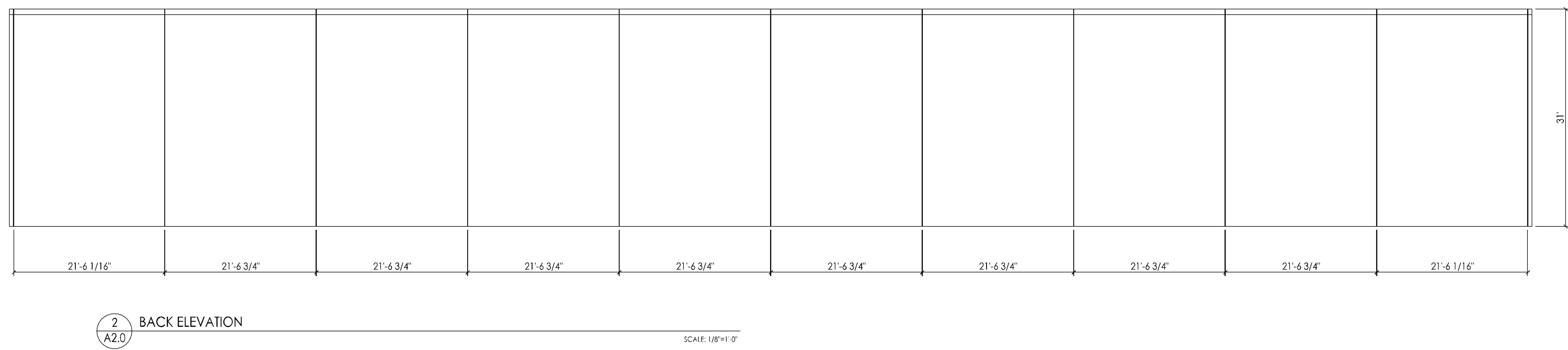


Barker
cabinets

SHEET CONTENT
ELEVATIONS

PO BOX 1000
SHERWOOD, OR 97140
PH: 503-692-4675
FAX: 503-692-9292
CONSTRUCTION CCB# 198759

DATE 4/19/22
DRAWN AJM
JOB 2107
SHEET A2.0



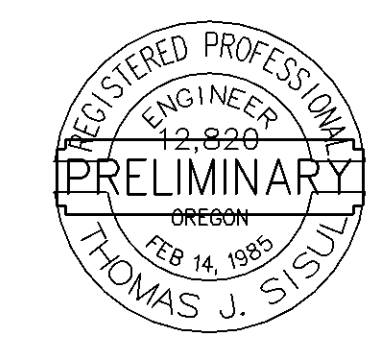
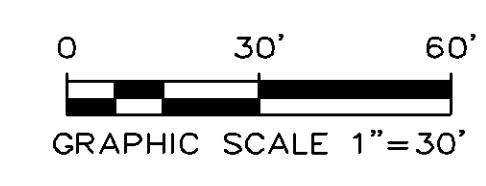
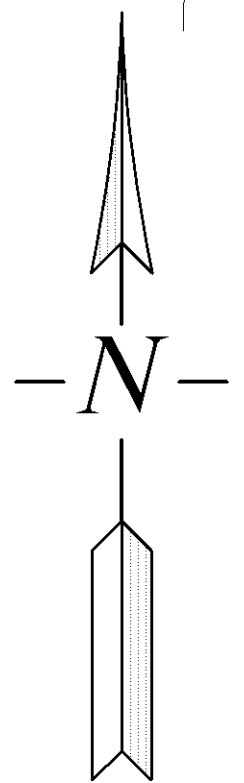
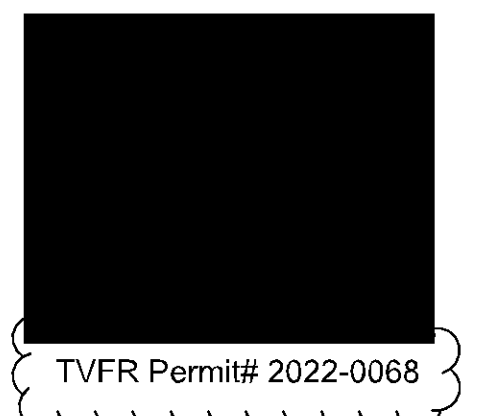
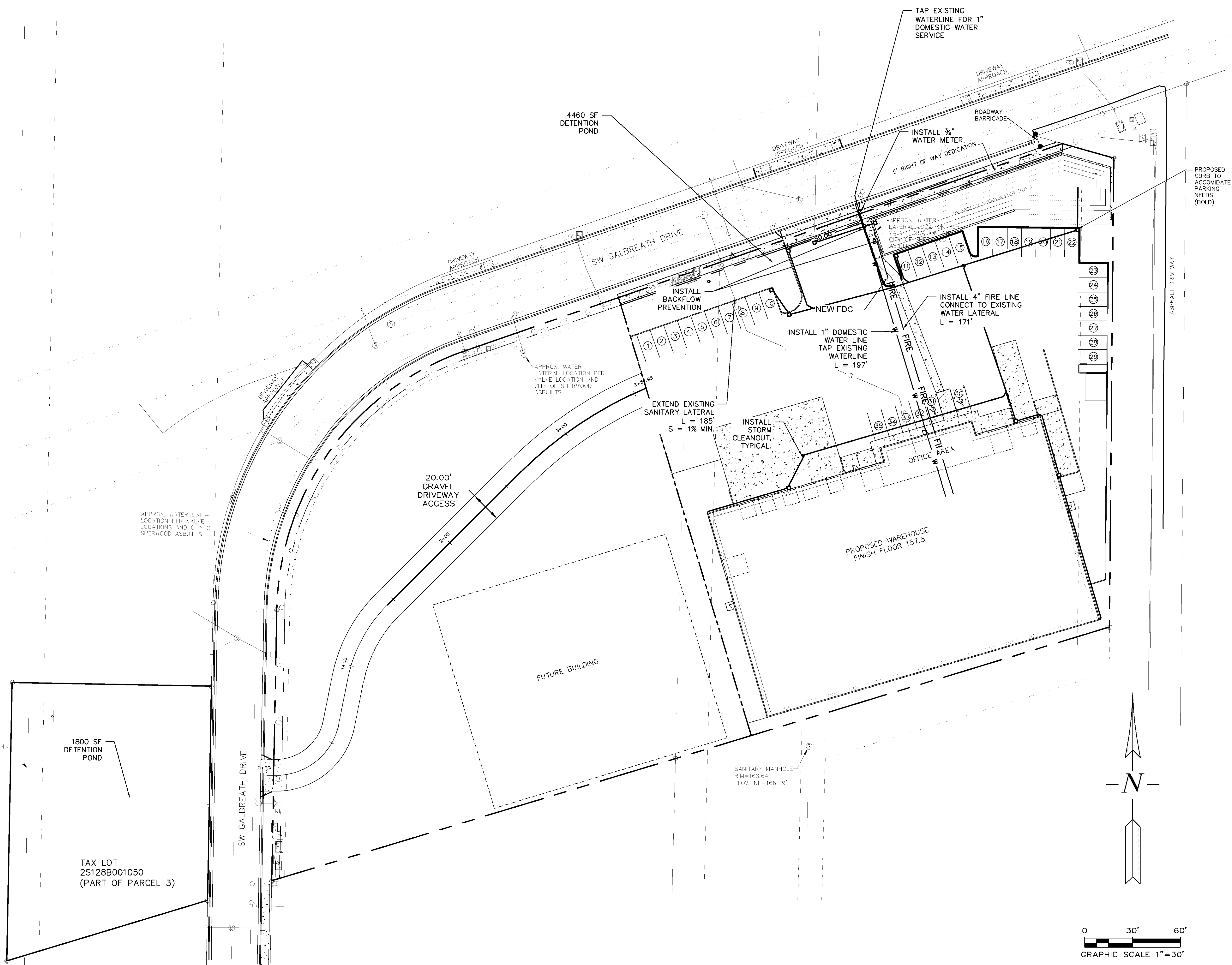
REVISIONS	BY
	JJM

GALBRETH INDUSTRIAL
RA GRAY CONSTRUCTION

WATER AND SANITARY PLAN

SISUL ENGINEERING
375 PORTLAND AVENUE
GLADSTONE, OREGON 97027
(503) 857-0188
11.11.E-20-067 Galbreth Industrial.dwg

DATE NOV 2021
SCALE AS SHOWN
DRAWN JJM
JOB SGL20-067
SHEET **C4**
OF SHEETS



EXPIRES: 6/30/

KINDER-MORGAN GAS PIPELINE

1800 SF DETENTION POND

TAX LOT 2S128B001050 (PART OF PARCEL 3)

4460 SF DETENTION POND

20.00' GRAVEL DRIVEWAY ACCESS

FUTURE BUILDING

PROPOSED WAREHOUSE FINISH FLOOR 157.5

SANITARY MANHOLE RIM=168.64' FLOWLINE=166.09'

OFFICE AREA

INSTALL STORM CLEANOUT, TYPICAL

EXTEND EXISTING SANITARY LATERAL L = 185' S = 1% MIN.

INSTALL 1" DOMESTIC WATER LINE TAP EXISTING WATERLINE L = 197'

INSTALL 4" FIRE LINE CONNECT TO EXISTING WATER LATERAL L = 171'

APPROX. WATER LATERAL LOCATION PER VALVE LOCATION AND CITY OF SHERWOOD ASBUILTS

APPROX. WATER LATERAL LOCATION PER VALVE LOCATION AND CITY OF SHERWOOD ASBUILTS

INSTALL 3/4" WATER METER

TAP EXISTING WATERLINE FOR 1" DOMESTIC WATER SERVICE

PROPOSED CURB TO ACCOMMODATE PARKING NEEDS (BOLD)

ROADWAY BARRICADE

DRIVEWAY APPROACH

SW GALBREATH DRIVE

SW GALBREATH DRIVE

ASPHALT DRIVEWAY