

## SENSITIVE AREA PRE-SCREENING SITE ASSESSMENT

Clean Water Services File Number			
1.	Jurisdiction:		
	<b>Property Information</b> (example: 1S234AB01400)	_	. Owner Information
	Tax lot ID(s):		Name:
			Company:Address:
OR Site Address:			City, State, Zip:
<u>ON</u>	City, State, Zip:		Phone/fax:
	Nearest cross street:		Email:
4	<b>Development Activity</b> (check <b>all</b> that apply)	4	. Applicant Information
•	Addition to single family residence (rooms, deck, garage)		Name:
	☐ Lot line adjustment ☐ Minor land partition		Company:
	☐ Residential condominium ☐ Commercial condominium		Address:
	☐ Residential subdivision ☐ Commercial subdivision		City, State, Zip: Phone/fax:
	☐ Single lot commercial ☐ Multi lot commercial		
	Other		Email:
6.	Will the project involve any off-site work? $\ \square$ Yes $\ \square$ No $\ \square$	] Unkr	
	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 tin information related to the project site. I certify that I am familiar w knowledge and belief, this information is true, complete, and accurate	nes for	e information contained in this document, and to the best of my
	Print/type name		Print/type title
	Signature ONLINE SUBMITTAL		Date
FC	OR DISTRICT USE ONLY		
	Sensitive areas potentially exist on site or within 200' of the site. <b>TH ISSUANCE OF A SERVICE PROVIDER LETTER.</b> If Sensitive Are		
	Resources Assessment Report may also be required.  Based on review of the submitted materials and best available inforsite. This Sensitive Area Pre-Screening Site Assessment does NOT eli		
_	they are subsequently discovered. This document will serve as your		
	3.02.1, as amended by Resolution and Order 19-22. All required pe		
	local, State and federal law.		
П	Based on review of the submitted materials and best available information existing or potentially sensitive area(s) found near the site. This Sensitive area(s) found near the site.		
	evaluate and protect additional water quality sensitive areas if they		
	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
П	approvals must be obtained and completed under applicable local, : THIS SERVICE PROVIDER LETTER IS NOT VALID UNLESS		
			lot was platted after 9/9/95 ORS 92.040(2). <b>NO SITE ASSESSMENT</b>
D^			Date
ĸе	viewed by Mila Gonzalez Lima  Once Complete email to: SPLReview@clean	nwate	
	OR mail to: SPL Review. Clean Water Services. 2	2550 S	W Hillshoro Highway Hillshoro Oregon 97123

