



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 Design
 Considerations For Surface Water
 Management. (Clean Water Services)**

CWS (Clean Water Services)
 2550 SW Hillsboro Hwy
 Hillsboro, OR 97123-9379
 503-681-3600

OTHER _____

PRE-APPLICATION DATE: _____

**Service Provider: PLEASE RETURN THIS FORM TO:
 APPLICANT:**

COMPANY: _____
 CONTACT: _____
 ADDRESS: _____

 PHONE: _____

OWNER(S):

NAME: _____
 ADDRESS: _____

PHONE: _____

Property Desc.: Tax Map(s): _____ Lot Number(s): _____

Site Size: _____

Site Address: _____
 Nearest cross street (or directions to site): _____

PROPOSED PROJECT NAME: _____

PROPOSED DEVELOPMENT ACTION: (DEVELOPMENT REVIEW, SUBDIVISION, MINOR PARTITION, SPECIAL USE)

EXISTING USE: _____ PROPOSED USE: _____

IF RESIDENTIAL:

NO. OF DWELLING UNITS: _____
 SINGLE FAM. _____ MULTI-FAM. _____

IF INDUSTRIAL/COMMERCIAL:

TYPE OF USE: _____
 NO. OF SQ. FT. (GROSS FLOOR AREA) _____

IF INSTITUTIONAL:

NO. SQ. FT. _____
 NO. STUDENTS/EMPLOYEES/MEMBERS: _____

*******ATTENTION SERVICE PROVIDER*******

**PLEASE INDICATE THE LEVEL OF SERVICE AVAILABLE TO THE SITE (ADEQUATE OR INADEQUATE).
 RETURN THIS COMPLETED FORM TO THE APPLICANT AS LISTED ABOVE.**

(Do NOT return this form to Washington County. The applicant will submit the completed form with their Land Development Application submittal).

ATTACH THE FOLLOWING INFORMATION TO THIS APPLICATION:

1. Topographical map (minimum scale 1"= 200', contour interval no closer than 5 feet)
2. Development layout (streets, lots, parking areas, building configuration, pathways, creeks, wetland, landscape areas)
3. Vicinity map (minimum scale 1" – ¼ mile)

TO BE COMPLETED BY GOVERNING JURISDICTION. DEVELOPMENT ACTION SUBMITTAL MUST CONSIDER:

Water Quality Facility required Y N
Hydraulic and hydrological analysis required Y N

Water Quantity Facility required Y N
Vegetated corridor required Y N

COMMENTS/EXPLANATION:

SIGNATURE: _____ POSITION: _____ DATE: _____