



# CITY OF PORTLAND ENVIRONMENTAL SERVICES



## Columbia Boulevard Wastewater Treatment Plant

5001 N Columbia Boulevard, Portland, Oregon 97203 ■ Ted Wheeler, Mayor ■ Michael Jordan, Director

To: Brett Hulstrom  
Bureau of Development Services

From: Muriel Gueissaz-Teufel  
Bureau of Environmental Services

Date: August 25, 2020

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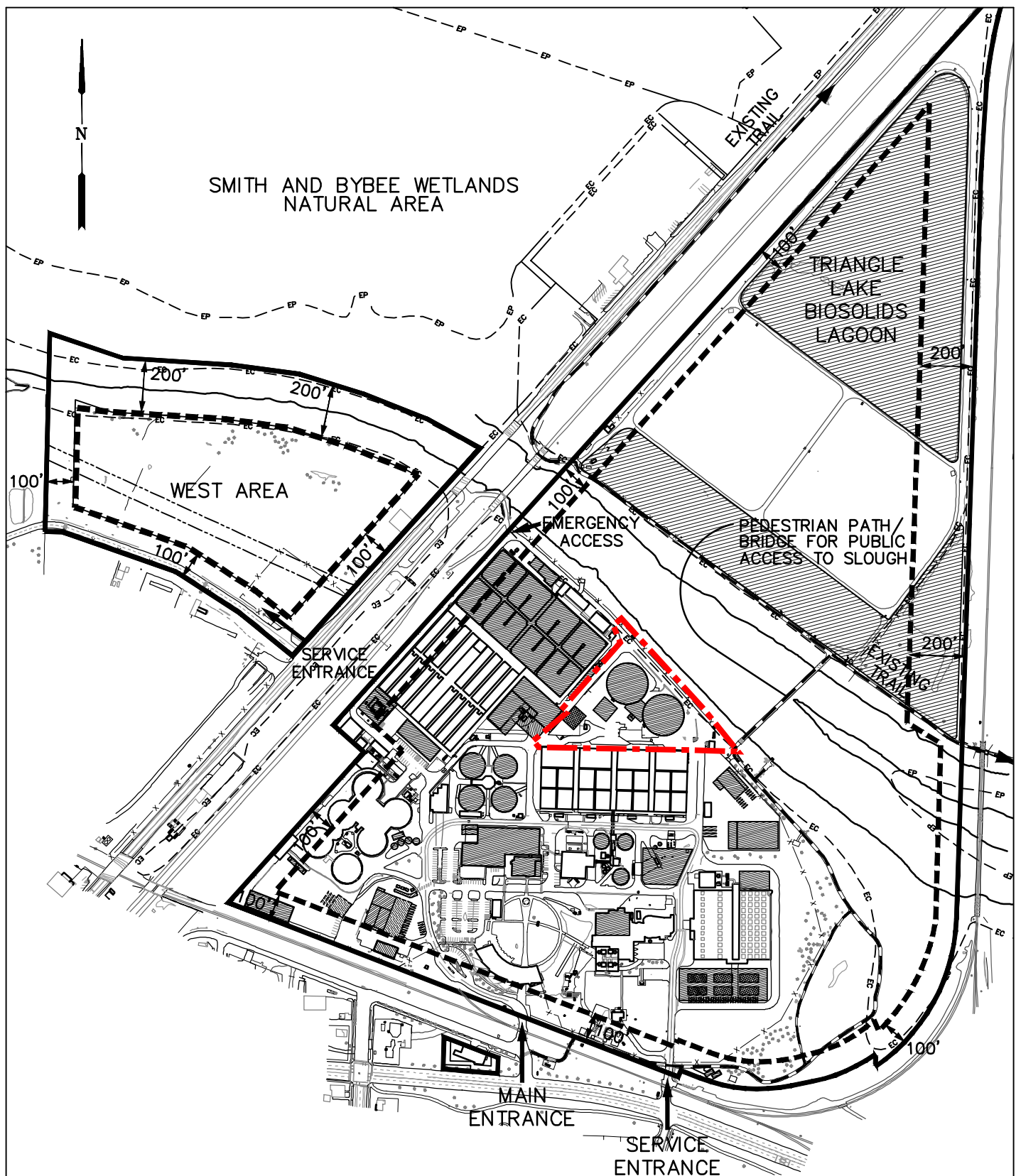
Dear Brett,

As part of the Secondary Treatment Enhancement Program (STEP) at the Columbia Boulevard Wastewater Treatment Facility (CBWTP), BES intends to start grading and excavation prior to further development of the site. The grading type work shall include excavation for utility relocations, installing secant piles, de-watering, jet grouting, deep soil mixing, excavation, and general site grading. The limits of the work and details are provided in the figure below and in the attached drawings and specifications.

This permit package includes the following items for your review:

- Building permit application
- Drawings
- Specifications
  - 31 10 00 Site Clearing
  - 31 23 13 Subgrade Preparation
  - 31 23 16 Excavation
  - 31 23 19.01 Dewatering
  - 31 23 19.02 Shaft Construction Dewatering
  - 31 23 23 Fill and Backfill
  - 31 41 00 Shoring
- Reference Files
  - Facilities Seismic Deformation and Site-Specific Seismic Response Analyses
  - Geotechnical Data Report
  - Process Facilities Geotech Recommendations Report
  - Updated Subsurface Investigation Summary Report





# KEY

SITE BOUNDARY

DEVELOPMENT SETBACK

DESIGNED BY

MGT

DRAWN BY

JPR

CHECKED BY

DATE APPR



## CITY OF PORTLAND ENVIRONMENTAL SERVICES

### 2017 CBWTP MASTER PLAN

REQUIRED SETBACKS  
CBWTP PLANNED DEVELOPMENT

SCALE:

1:500

DATE:

7/17

FIGURE:

7-2

BARNEY & WORTH, INC.

FILE NAME:

Master Plan 2017 7-2, 7/24/17 at 16:47



CITY OF PORTLAND

BES Source  
Control Manual

# SOURCE CONTROL

## SUBMETER APPLICATION

### CONSTRUCTION AND GROUNDWATER DISCHARGE

(for official use only)

Date Application Received (Month/Day/Year) : \_\_\_\_\_

Receiving Sewer Type: ☐ Sanitary/Combined ☐ Storm

Meter Type: ☐ Odometer ☐ Digital

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_

Date of Request: \_\_\_\_\_ Building Permit Application Number: \_\_\_\_\_

### PROJECT INFORMATION

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_ City/State/Zip : \_\_\_\_\_

Contact Name: \_\_\_\_\_

Company Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Anticipated Construction Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Will ongoing dewatering activities occur onsite once construction is complete?

☐ Yes (Complete Section 1 and 2 Below)

☐ No (Complete Section 1 Only)

### BILLING INFORMATION

Have you opened a sewer account with Portland Utilities?

☐ Yes Account No: \_\_\_\_\_

☐ No Contact City (503-823-7856) to set up an account.

#### Section 1—Contact Information During Construction

Contact Person: \_\_\_\_\_

Company Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

#### Section 2—Contact Information Post-Construction

Contact Person: \_\_\_\_\_

Company Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

### METER INFORMATION

City Code 17.36.050 – ALL meters shall register in cubic feet

Meter Serial Number

Meter Dials

Stationary Zeros

Install Read

No. 1 : \_\_\_\_\_

1: \_\_\_\_\_

1: \_\_\_\_\_

1: \_\_\_\_\_

No. 2 : \_\_\_\_\_

2: \_\_\_\_\_

2: \_\_\_\_\_

2: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_



CITY OF PORTLAND

## Source Control Manual

# SOURCE CONTROL DEWATERING FORM

**All building permit applications for new construction, additions, or improvement that will perform below-grade excavation or discharge groundwater, or perform ground-disturbing activities during the winter months (Oct-May) must complete and submit this form with the documents requested within this form.**

*(for official use only)*

Date Received: \_\_\_\_\_

Received By: \_\_\_\_\_

Approved Date: \_\_\_\_\_

Approved Receiving System: \_\_\_\_\_

Date of Request: \_\_\_\_\_ Building Permit Application Number: \_\_\_\_\_

## SITE AND CONTACT INFORMATION

Property Site Address: \_\_\_\_\_

Name of Responsible Party: \_\_\_\_\_

Responsible Party Phone (area code required): \_\_\_\_\_

Responsible Party Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Name of Contractor: \_\_\_\_\_

Contractor Phone: \_\_\_\_\_ Contractor Email Address: \_\_\_\_\_

## DISCHARGE INFORMATION

- |  | YES                      | NO                       |
|--|--------------------------|--------------------------|
| 1 Will there be temporary dewatering and discharges of groundwater?<br>(Includes mixed groundwater and stormwater)<br><br>If <b>YES</b> , applicant must complete a submeter application and batch discharge application. Submit those applications with this form.  | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 Will there be permanent dewatering and discharges of groundwater?<br><br>If <b>YES</b> , applicant must complete a submeter application and long-term dewatering application, submit a recorded O&M Plan, if applicable, and include with this form.   | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 Will there be stormwater-only dewatering discharges during construction?<br>(applicable only if questions 1 and 2 are answered <b>NO</b> )<br><br>If <b>YES</b> , fill out the batch discharge application and include it with this form.<br>If <b>NO</b> , sign this form and submit with building plans. | <input type="checkbox"/> | <input type="checkbox"/> |

**Project Discharge Rate:** *(If the rate will change based on the depth of the excavation, list those depths with the projected rates.):*

**Maximum Discharge Rate (gpm):** \_\_\_\_\_

**Duration of Discharge (dates from and to):** From \_\_\_\_\_ To \_\_\_\_\_

If site conditions change and a discharge offsite is needed, you must call (503) 823-5320 or (503) 823-7180.



# SOURCE CONTROL

## DEWATERING FORM

Intended Receiving System for the Discharge? (check the following relevant box)

- ☐ City Storm      ☐ City Sanitary      ☐ City Combined      ☐ Private Storm
- ☐ Private Infiltration      ☐ Private UIC (Drywell) – City UIC prohibited
- ☐ Other : \_\_\_\_\_

If proposing discharge to a private system, please ensure that the Department of Environmental Quality (DEQ) has been notified.

BES may require correspondence from DEQ stating they have been informed of the proposed discharge.

### STATEMENT

By signing this form I acknowledge I am the responsible party for the above address and acknowledge that discharges off this site to a City conveyance system are regulated under City Code Chapters 17.39, 17.38, 17.36 and 17.34. By answering no to all three discharge questions, I certify there will be no channelized or pumped stormwater associated with construction activities or groundwater entering a City conveyance system on a permanent or temporary basis. I am also aware that sewer volume charges or system development charges may apply per chapter 17.36 for this discharge. If it is found there is an offsite discharge of either groundwater or stormwater as defined in this statement and the discharge has not been authorized, I am aware that penalties can be assessed per City Code Chapters 17.39 and 17.34. If site conditions change, and a discharge to a City system is needed, I will contact the City by calling 503-823-7122 or 503-823-7180 to obtain authorization to discharge.

Signature:  \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date Signed: \_\_\_\_\_



CITY OF PORTLAND

## Source Control Manual

**This form is required for requests to discharge temporary groundwater or channelized / impounded or pumped stormwater associated with construction activities into a city conveyance system.**

# SOURCE CONTROL

## BATCH DISCHARGE APPLICATION

*(for official use only)*

Batch Discharge Number: \_\_\_\_\_

Fee Required: ☐ Yes ☐ No

Fee Paid: ☐ Yes Check No. \_\_\_\_\_ ☐ No

Date of Request: \_\_\_\_\_ Building Permit Application Number: \_\_\_\_\_

### REQUEST BY

Contact Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

City/State/Zip : \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

### DISCHARGE GENERATOR

Facility Name: \_\_\_\_\_

Facility Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Facility Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Description of Wastewater (if applicable, attach analytical data report): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Proposed Date(s) of Discharge: \_\_\_\_\_

Discharge Volume: \_\_\_\_\_ gallons per day Requested Rate of Discharge: \_\_\_\_\_ gallons per minute

Building Permit/ City Project Number: \_\_\_\_\_

City of Portland Project Manager (if applicable) : \_\_\_\_\_

Proposed Point of Disposal (attach diagram): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_



ENVIRONMENTAL SERVICES  
CITY OF PORTLAND  
working for clean rivers



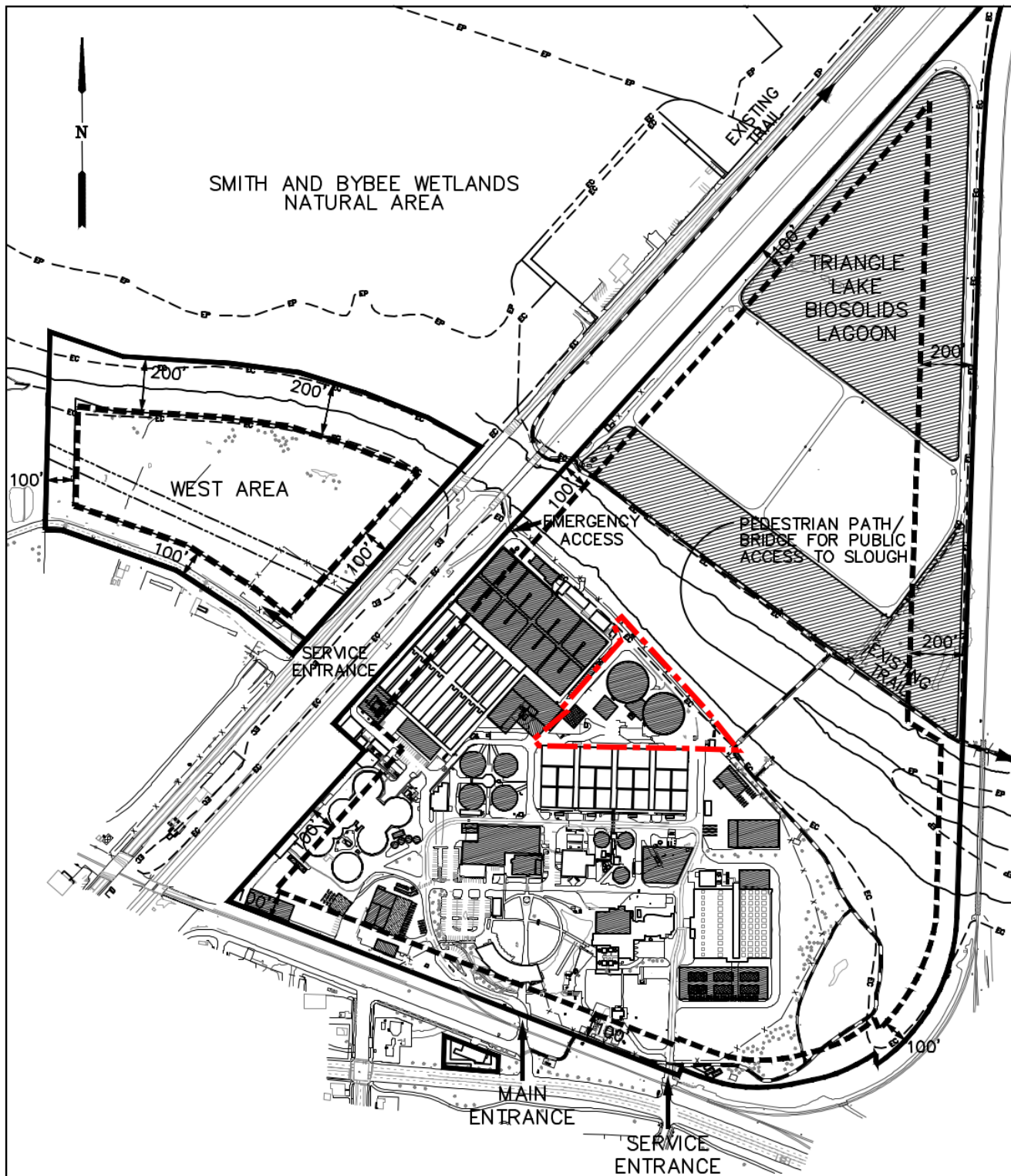
## Excavation Application Permit for GMP1

This brief memo is in response to the Excavation application permit for the CBWTP STEP project. For GMP1 checklist comment from J. Richling on 10/14/20.

The comment states: "LU 18-142442 CU MS AD, Condition F. Projects within the Waste-Related Use setbacks depicted on Exhibit C.10 (100ft from the south, east and west property lines) must not move closer to any campus perimeter or site boundary. The affected plan sheets must be revised to depict the site property lines and the Waste-Related Use setback, particularly along the southern boundary and in the NW corner of the site to facilitate staff review for compliance with this condition. This may impact the location of several proposed staging areas."

In response, we have shared and updated Exhibit 7-2 from the 2018 BES CBWTP Master Plan depicting the Waste-Related Use Setbacks. The figure has been marked up to show that GMP 1 work is well within the Waste-Related Use Setbacks.





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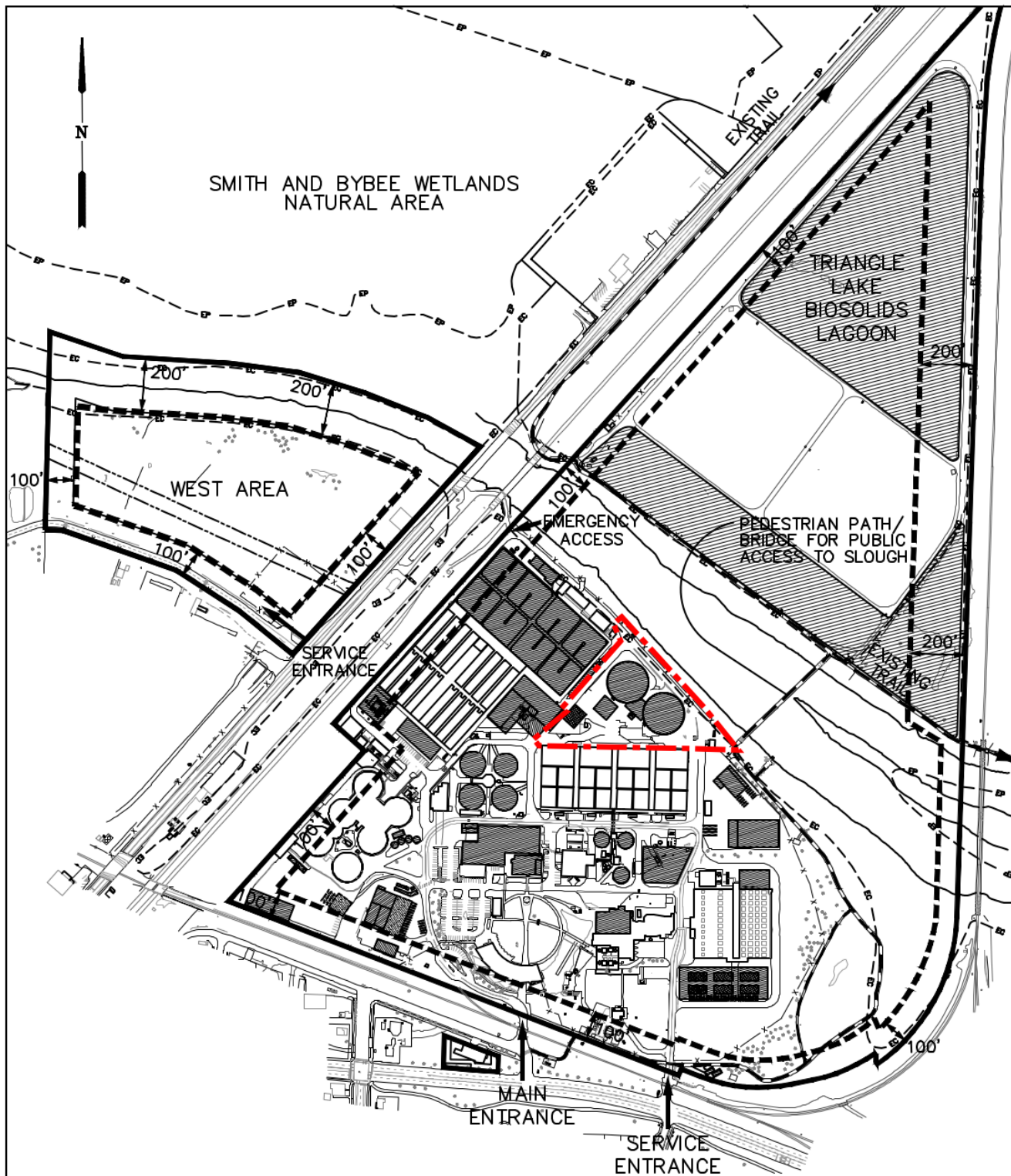


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