CITY OF PORTLAND Stormwater Management Manual

OPERATIONS & MAINTENANCE FORM

☐ This O&M Form supercedes document number

(for official county use only)

STANDARD FORM FOR PRIVATE STORMWATER FACILITIES

2023-047012

Permit # 22-197446-000-00-RS Permit # 22-197446-000-00-RS Permit Submittal Date 10/24/2022 Address (Mailing) 12714 Boones For City / State / Zip Lake Oswego, Old Address (Mailing) 12714 Boones In Theo Cirstean Address (Mailing) Lake Oswego, Old Phone (area code required) (971) 676 (1971) 676		\$101.00 39670202300470120040048 07/28/2023 11:30:31 AM AIN Pgs=4 Stn=3 ATTC
Permit # 22-197446-000-00-RS Permit Submittal Date 10/24/2022 Address (Mailing) 12714 Boones Fe City/State / Zip Lake Oswego, Ol SITE INFORMATION (include all parcels) R# (6 Digits) 104704 Name Theo Cirstean Address (Mailing) 12714 Boones Ferry Rd. City/State/Zip Lake Oswego, OR 97035 Preparation Date: 5/11/2023 Site Legal Description: ACTO PK AC , LOT 24 A & 32 A TL 3600 as refree Local Action Property Management Company Tenant Maintenance Praction These operation and main in accordance with Portlan and associated administral The requirements are base the City of Portland Storms the date of permit submitt For the Simplified Approach, please attach the for each facility type from the Manual, Section 3.3.		OWNER INFORMATION (ALL LEGAL OWNERS) Theo Cirstean
Permit Submittal Date 10/24/2022 Address (Mailing) 12714 Boones For City / State / Zip Lake Oswego, Oity / State / Zip Lake O		
City / State / Zip Lake Oswego, Ol SITE INFORMATION (include all parcels) O&M PREPARER INFORMATION Name Theo Cirstean Address (Mailing) 12714 Boones Is 12714 Boones Ferry Rd. City / State / Zip Lake Oswego, Ol City / State / Zip Lake Oswego, Ol Phone (area code required) (971) 678 Email theolinu@icloud.com Site Legal Description: ACTO PK AC , LOT 24 A & 32 A TL 3600 as refree 20 Responsible Party for Maintenance (check one) Homeowners Association Property Owner Property Management Company Tenant Other (describe) (not Contractor or Consultant) Contact Information for Responsible Party Contact Organization Manual, Section 3.3.		
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☐ Homeowners Association ☐ Property Owner ☐ These operation and main in accordance with Portland and associated administration of Contractor or Consultant) ☐ Contact Information for Responsible Party ☐ Contact Name ☐ Theo Cirstean ☐ Contact Organization ☐ Contact Organization ☐ Manual, Section 3.3. ☐ Contact Organization ☐ Property Owner ☐ These operation and main in accordance with Portland and associated administration in accordance with Portland and associated administrat	te Legal Description: ACTO PK AC , LOT 24	32A TL3600 as refrence în 2019-051010
the City of Portland Storms the date of permit submitt Contact Information for Responsible Party Contact Name Theo Cirstean For the Simplified Approach, please attach the for each facility type from the Manual, Section 3.3.	Homeowners Association Property Management Company	in accordance with Portland City Code Chapter 17.38 and associated administrative rules.
1 September 1981 Sept	(not Contractor or Consultant) ntact Information for Responsible Part ntact Name Theo Cirstean	The requirements are based on the current version of the City of Portland Stormwater Management Manual of the date of permit submittal. For the Simplified Approach and Presumptive Approach, please attach the Standard O&M Plan for each facility type from the Stormwater Management Manual Scotian 2.2
approved, site specific O&	one (area code required) (971) 678-6930	For the Performance Approach, please attach an approved, site specific O&M Plan per the Stormwater Management Manual, Section 3.3.

Multnomah County Official Records

E Murray, Deputy Clerk

OPERATIONS & MAINTENANCE FORM

STANDARD FORM FOR PRIVATE STORMWATER FACILITIES

SIGNATURE AND ACKNOWLEDGEMENT

By signing below, the owner accepts and agrees to the terms and conditions contained in this O&M Form and in any document signed by the owner and recorded with this O&M Form. The owner further acknowledges that this form and associated documents have been prepared on their behalf and that they are responsible for the quality and completeness of the O&M Plan. Any failure to comply with the terms of these plans may result in enforcement actions by BES requiring the property owner to restore the stormwater facilities to a functional state as approved under original requirements.

The owner also accepts that the City requires property owners to submit to BES and record, with the appropriate County, complete and accurate O&Ms enforceable under City Code 17.38. Property owners must consult with the City prior to making changes to the O&M Plan to determine if a new permit or O&M submittal is required. Substantial changes to the O&M require City approval prior to recording with the County. Examples include changes to the facility type, discharge point, or total drainage area. A revised O&M must state that it supersedes a previous O&M (with cited county document number; See Page 1).

The contract of the contract o	_ /	1000
Property Owner or Authorized Representative (1) Signature	1475 8	Property Owner or Authorized Representative (2) Signature
NOTARY SIGNATURE AND STAMP		
INDIVIDUAL Acknowledgement	OR	CORPORATE Acknowledgement
This acknowledgement is intended for property owned by individuals or trusts.		This acknowledgement is intended for corporation, government agencies, school districts, or other formal entities
STATE of OREGON county of: Multnuman		STATE of OREGON county of:
This instrument was acknowledged before me on: (date) JUI4 28, 2023		This instrument was acknowledged before me on: (date)
By: (owner 1) THEO CIRSTEAN		By: (representative)
By: (owner2) Juditha Cirstcan		As: (Title)
Notary Signature Olleander Mout		Of: (Corporation)
My Commission Expires Splember 14,2024		Notary Signature
Notary Seal:		My Commission Expires
		Notary Seal:

MY COMMISSION EXPIRES SEPTEMBER 14, 2028

OPERATIONS & MAINTENANCE FORM

STANDARD FORM FOR PRIVATE STORMWATER FACILITIES

SITE PLAN

Provide a site plan sketch in the area provided below, or attach a scaled site plan to this submittal that includes all of the information required as described in SWMM Section 3.3, O&M Requirements and Submittals.

STEP 1 - COMPLETE THE FOLLOWING TABLE

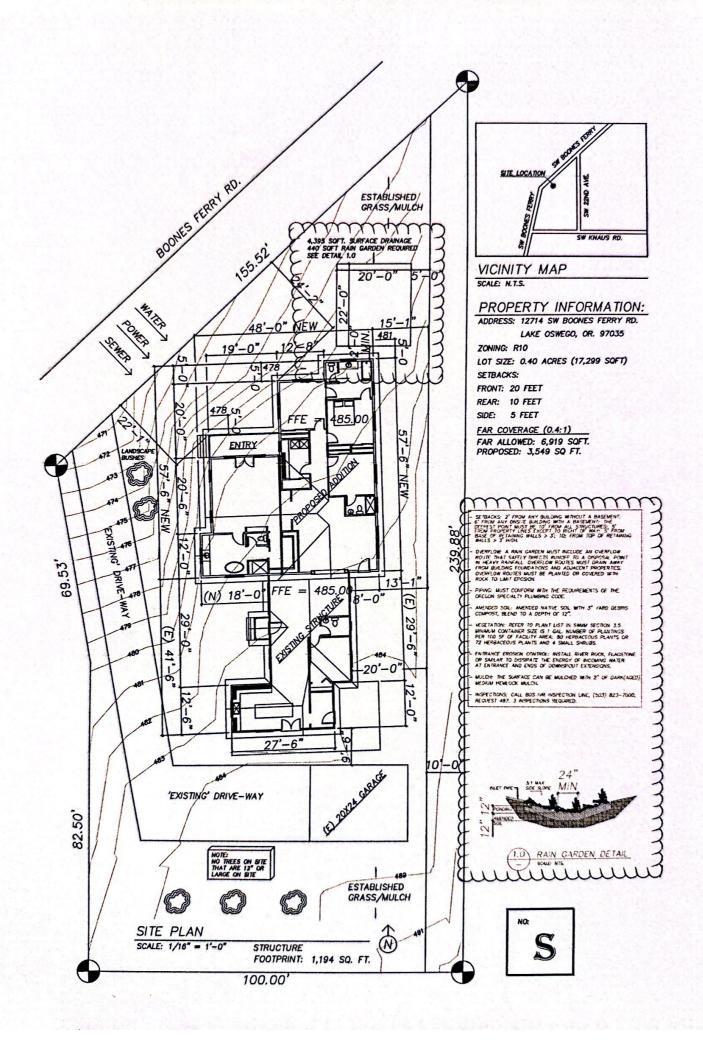
Stormwater Facility Type (Chapter 3)	Stormwater Facility Size (sf)	Drainage is from Roof or Lot?	Impervious Area Treated (sf)	Discharge Point
Rain Garden	440 sf	Roof	4395 sf	Ground
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Totals	440 sf		4395 sf	1800 D 25 400

Maintaining the stormwater management facility or facilities listed above and shown on the following (or attached) site plan is a required condition of the City's approval for the identified property. Property owners are required to operate and maintain facilities in accordance with the O&M Plan on file with the City of Portland. This requirement is binding on all current and future owners of the property. Failure to comply with the O&M Plan can trigger an enforcement action, including penalties. The O&M Plan may be modified by written consent of the current owners and the written approval of the Bureau of Environmental Services.

STEP 2 - REQUIRED SITE PLAN (insert or draw here, or attach separate sheet)	
	☑ I Have Attached a Site Plan

2020 CITY OF PORTLAND STORMWATER MANAGEMENT MANUAL

PAGE 3 OF 3



talMULTNOMAH COUNTY CLERK

1401828 3 ATTC 07/28/2023 11:31:14 AM

971-678-6930

AGR	101.00
MAIN # OF PAGES RECORDED 4 MULTIPLE TITLES (ETC.)	0.00
HOUSING FEE	1.00 0.00
SURVEYOR FEE	0.00
OFFICIAL RECORD NUMBER 2023-047012 RECORDING DATE AND TIME 07/28/2023 11:30:31 AM ************************************	******
Total	\$101.00
CASH CHANGE Total Received	120.00 -19.00 101.00
Amount Due Thank You Retain this receipt for your	0.00 records

CITY OF PORTLAND Stormwater Management Manual

SIMPLIFIED APPROACH FORM

PROIECT INFORMATION WORKSHEET

or a high

No

□ No

Project/Permit Number: 22-197446-000-00-RS	SITE CHARACTERISTICS
Land Use Case Number: Contact Name: THEO CIRSTEAN	S.1 Do slopes exceed 20% anywhere within the project area? ☐ Yes ☐ No
Phone: (971) 678-6930	S.2 Are there springs, seeps, or a hig
Email: THEOLINU@ICLOUD.COM	groundwater table within the project area? ☐ Yes • No
Site Address/R Number(s) for all parcels: 12714 BOONES FERRY RD	S.3 Geotech Report? Tyes IN
LAKE OSWEGO, OR 97035	S.4 Infiltration Test? Yes N
Project Description: ADD ADDITION TO EXISTING HOUSE	See back of form for required certifications.
Existing impervious area: $\frac{996}{}$	
Total NEW impervious area: $\frac{2085}{f^2}$	

SIMPLE PIT INFILTRATION TEST PROCEDURE

The person performing this test does not need a professional credential.

Test instructions:

- 1. Conduct the test in and/or near the location of the proposed infiltration facility.
- Excavate a 2' by 2' pit to a depth of: 2' below grade for facilities less than 2' deep or 3' below grade for facilities greater than 2' deep. Check for standing water or hardpan soil preventing excavation. If either is present, document conditions on this form and do not proceed with the test.
- Fill the pit with at least 12 inches of water and record the initial water depth and the time when the test starts. Check the water depth at regular intervals until all of the water has been absorbed or for 1 hour, whichever occurs first. Record the time and final water depth at the end of the test.
- Repeat the process two more times for a total of three rounds. Conduct the tests in succession to accurately characterize the soil's infiltration rates at different levels of saturation. The third test provides the best measure of the infiltration rate when saturated.
- Record infiltration test data in the table below and certify the results. Uncertified test results will not be accepted.

Required Infiltration Testing

Date of Test: 01/25/2023 Depth of Excavation (ft): $\underline{}$ Depth of Proposed Facility: _ TEST 1 TEST 2 TEST 3 A. Time (of day) 14:10 15:17 16:17 B. Duration (minutes; 1 hour maximum) 1 HR 1 HR 1 HR C. Initial Water Depth (inches) 12,25 13,33 12,5 6,33 8,125 D. Final Water Depth (inches) 8,25 E. Infiltration Rate* (inches/hour) 5,92 5,2 4,25

Test Pit Location (site plan sketch) Key information to include: 1) Site or parcel; 2) Adjacent road(s) or cross street(s); 3) Test pit location with dimensions 3) Test pit location 2'L x 2'W x 2'H 2) Site 2) Road Boones ferry rd

^{*}Infiltration Rate = Initial Depth (in) - Final Depth (in) / Duration of Test (hours). hours = minutes/60

SIMPLIFIED APPROACH FORM

PROPOSED STORMWATER FACILITIES

Proposed Stormwater Facilities

Please note: Each individual tax lot is required to manage the stormwater runoff it generates on the same lot to the maximum extent feasible (for new construction or redevelopment). The following table includes accepted Simplified Approach facilities as described in Chapters 2 & 3 of the 2020 Stormwater Management Manual. Copies of the manual are available online at www.portlandoregon.gov/bes/SWMM.

STORMWATER FACILITY TYPE	AREA DRAINING TO FACILITY (SF)	FACILITY SIZING FORMULA	FACILITY SIZE (surface area of facility)
Ecoroof		Area x 1 (1:1 ratio)	
Pervious Pavement		Area x 1 (1:1 ratio)	
Rain garden	4395 sqft	Area x 0.10	440 sqft
Basin		Area x 0.09	
Planter		Area x 0.06	
Filter Strip		See sizing table in SWMM Section 3.3.2.1	
Driveway Center Strip		Min. width is 3 ft; max. length is 50 ft if slope is 10-15% (max. slope is 15%).	
Drywell		See Maximum Catchment Area Managed by a Single Drywell Table below	
Soakage Trench		25 ft² of soakage trench for every 500 ft² of impervious area. (Depth = 1.5 ft; width & length vary)	
Surface Sand Filter		Area x 0.06	
TOTAL IMPERVIOUS AREA (Managed, new, and redeveloped)	4395 sqft	Total impervious area must equal the total NEW AND REDEVELOPED impervious area being proposed.	

Maximum Catchment Area Managed by a Single Drywell (ft²)

MATERIAL Ring Diameter	PLASTIC 24 inches	CONCRETE 28 inches	CONCRETE 48 inches
2 ft deep	500 ft ²	NA	NA
5 ft deep	NA	1,000 ft ²	2,500 ft ²
10 ft deep	NA	2,500 ft ²	4,500 ft ²
15 ft deep	NA	3,500 ft ²	5,000 ft ²

No more than 2 plastic drywells allowed per catchment area.

Required	Certifications
SIMPLE PIT	TEST

THEO CIRSTEAN

Name of Tester

Signature of Tester

01/25/2023

Date

PERSON RESPONSIBLE FOR APPLICATION ACCURACY

THEO CIRSTEAN

Contact Name-Printed

(971) 678-6930

Signature

Date 2/22/2023

