

# BOOSTER STATION DESIGN CRITERIA



## PART 1: PROJECT CONTACT INFORMATION

Date: 7/14/2015

Project Name: River Ridge Apartments

Information here in provided by: 4B Engineering

The project owner is a: 

<input checked="" type="checkbox"/> Private Co.	<input type="checkbox"/> Public Agency	<input type="checkbox"/> Private Co.
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Project Site Address: Tualatin, OR.

ACAD site plan drawing available at this time? 

<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
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Final Project Owner and/or Operator: Home Owner's Association

Governing Water Authority: ?

Does Authority have a booster station standard? 

<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
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Does this project require "Buy America" materials? 

<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
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## PART 2: DESIGN DATA

1. Force main length: ? ft. (actual length along proposed alignment)

2. Force main diameter (inside): ? in. inside dia.

3. Force main material (PVC, DI, etc.): ?

4. Force Main is: 

<input checked="" type="checkbox"/> New	<input type="checkbox"/> New	<input type="checkbox"/> Existing
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What are you pumping into? (i.e., pressure system, reservoir, etc.) Pressure Main

5. Where is the water coming from? (i.e., flooded suction, pressure suction, etc.) ?

7. What is the inlet size? 2 in

8. Is this station supplying water to a fire protection system? 

<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
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If yes, is it required to meet NFPA 20? 

<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
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9. Is there a surge analysis available for the piping system? No

10. Peak pumping rate: 270 g.p.m. @ 100 ft. TDH (Feed Head of 10 ft.)

11. Standby generator requirement: 

<input checked="" type="checkbox"/> None	<input type="checkbox"/> Permanent	<input type="checkbox"/> Portable	<input type="checkbox"/> None	<input type="checkbox"/> Don't Know
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12. Standby generator fuel: 

<input type="checkbox"/>	<input type="checkbox"/> Diesel	<input type="checkbox"/> Natural Gas	<input type="checkbox"/> Propane
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13. Available power supply: 

<input checked="" type="checkbox"/> 208V	<input type="checkbox"/> 208V	<input type="checkbox"/> 240V	<input type="checkbox"/> 480V
<input checked="" type="checkbox"/> 3-phase	<input type="checkbox"/> Single-phase	<input type="checkbox"/> 3-phase	