



November 6, 1997

BOHANNAN HUSTON

Courtyard One

7500 JEFFERSON NE

Albuquerque

NEW MEXICO 87109

voice 505.823.1000

fax 505.821.0892

Fred Aguirre, P.E.
City Hydrologist
City of Albuquerque
Hydrology Division/PWD
P.O. Box 1293
Albuquerque, NM 87103

Re: St. Joseph Medical Center Heliport, Grading and Drainage Plan (Zone Atlas Map J-15-Z)

Dear Fred:

This letter transmits to you the Grading and Drainage Plan for the proposed St. Joseph Medical Center heliport. This plan is being submitted for rough grading permit and work order approval.

If we can provide any additional information or answer any questions about the plan, please call.

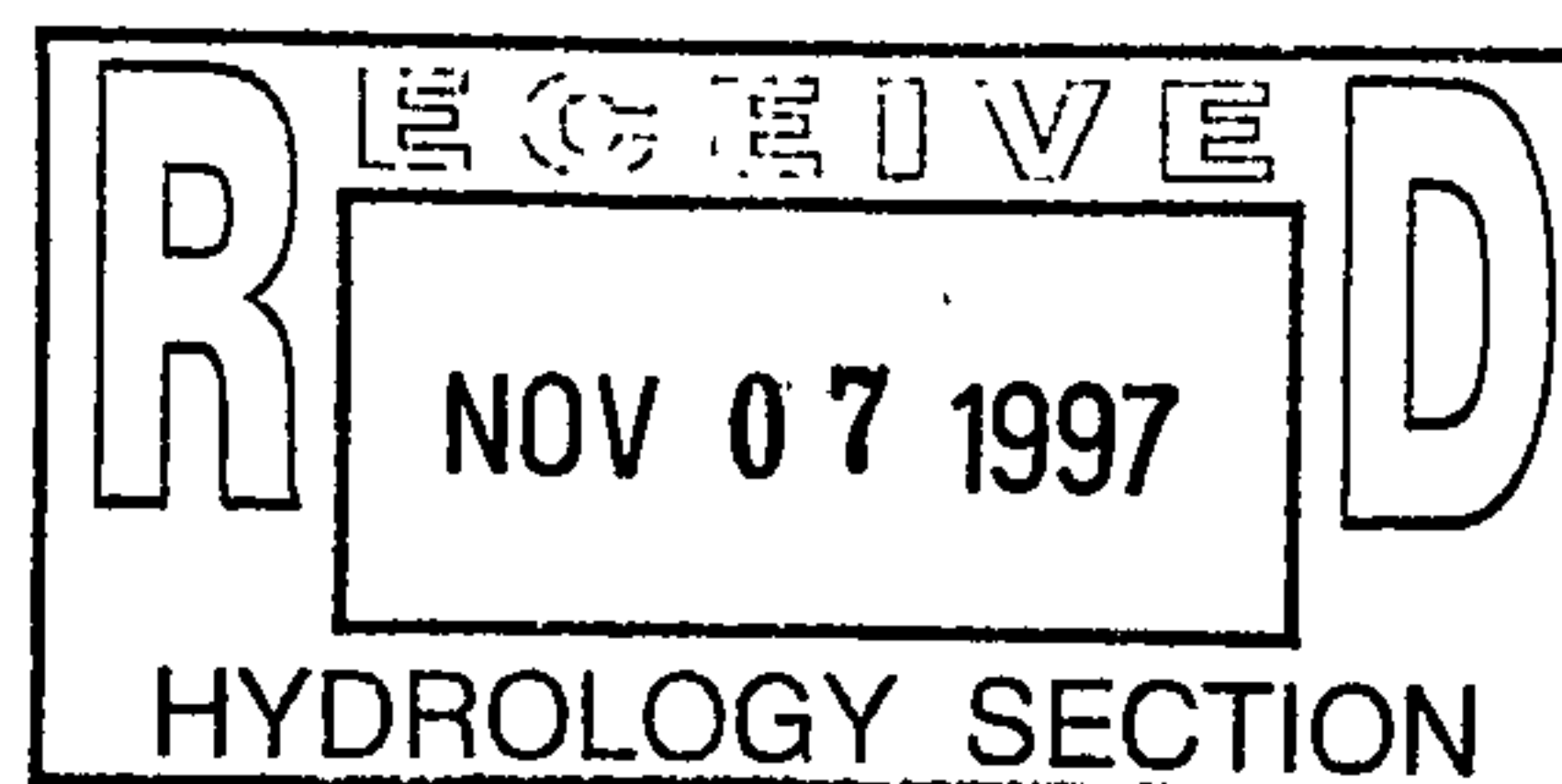
Sincerely,
Bohannon Huston

James R. Topmiller, P.E.
Vice President and Group Manager
Community Development and Planning Group

JRT/hjh

Enclosure

cc: Mel Lyerla, St. Joseph Healthcare System



DRAINAGE INFORMATION SHEET

PROJECT TITLE: ST. JOSEPH MEDICAL CENTER HELIPORT ZONE ATLAS/DRNG. FILE # J-15-2 *New 14A*DRB #: 86-722 EPC #: _____ WORK ORDER #: _____LEGAL DESCRIPTION: HELIPORT AT ST. JOSEPH'S MEDICAL CENTERCITY ADDRESS: ELM STREET & FRUIT AVENUEENGINEERING FIRM: BOHANNAN-HUSTON INC.ADDRESS: 7500 JEFFERSON NE, ALB. NM 87109OWNER: ST. JOSEPH HEALTHCARE SYSTEMADDRESS: 601 GRANDE AVE., N.E.ARCHITECT: FMSMADDRESS: 809 COPPER, N.W.

SURVEYOR: _____

ADDRESS: _____

CONTRACTOR: _____

ADDRESS: _____

CONTACT: JAMES TOPMILLERPHONE: (505) 823-1000CONTACT: MEL LYERLAPHONE: 727-7414CONTACT: MARK WADEPHONE: 766-6610

CONTACT: _____

PHONE: _____

CONTACT: _____

PHONE: _____

TYPE OF SUBMITTAL:

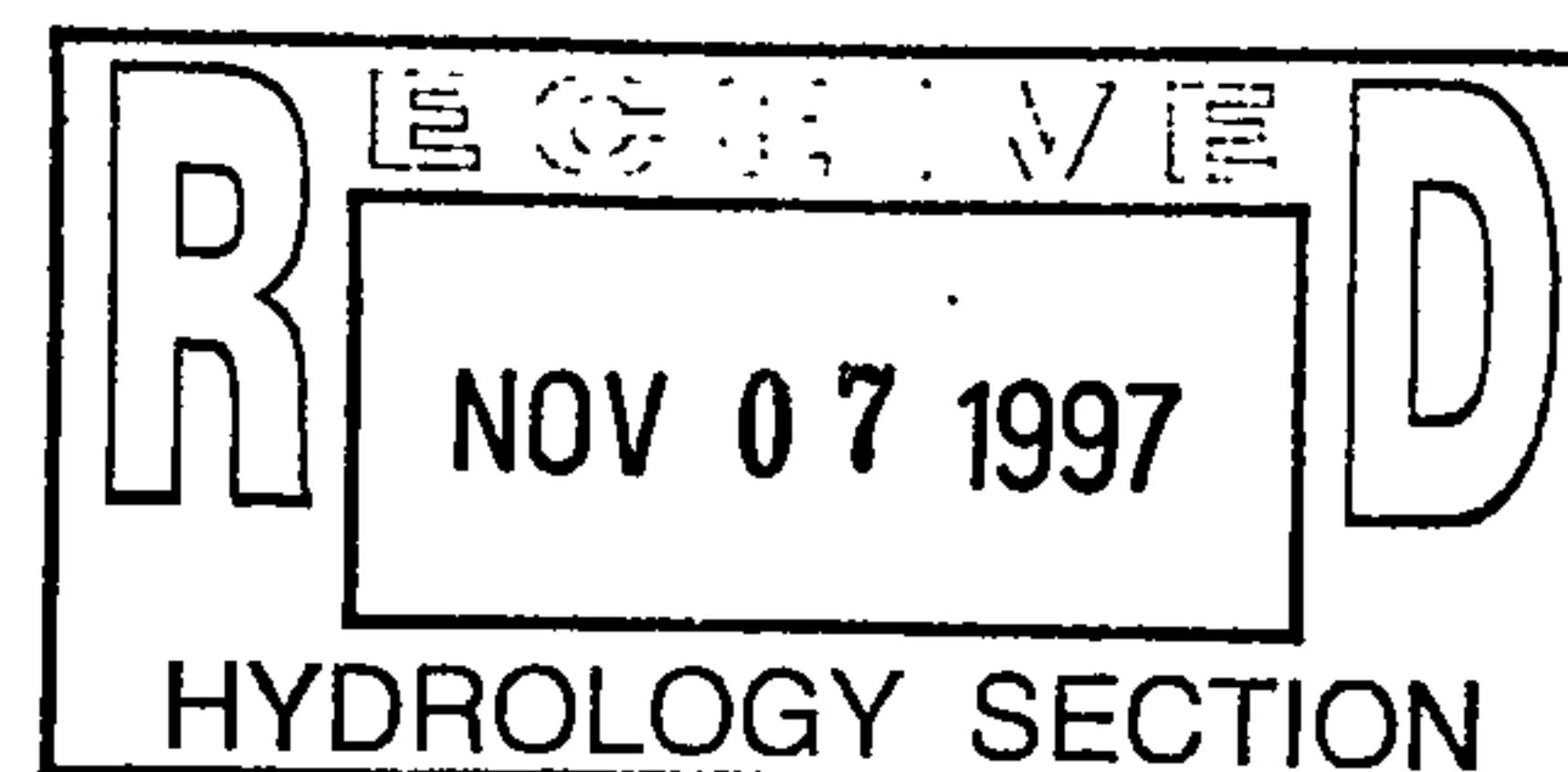
- ☐ DRAINAGE REPORT
☐ DRAINAGE PLAN
☒ FINAL GRADING & DRAINAGE PLAN
☐ GRADING PLAN
☐ EROSION CONTROL PLAN
☐ ENGINEER'S CERTIFICATION
☐ OTHER

PRE-DESIGN MEETING:

- ☒ YES
☒ NO
☐ COPY PROVIDED

CHECK TYPE OF APPROVAL SOUGHT:

- ☐ SKETCH PLAT APPROVAL
☐ PRELIMINARY PLAT APPROVAL
☐ S. DEV. PLAN FOR SUB'D. APPROVAL
☐ S. DEV. PLAN FOR BLDG. PERMIT APPROVAL
☐ SECTOR PLAN APPROVAL
☐ FINAL PLAT APPROVAL
☐ FOUNDATION PERMIT APPROVAL
☐ BUILDING PERMIT APPROVAL
☐ CERTIFICATE OF OCCUPANCY APPROVAL
☒ GRADING PERMIT APPROVAL
☒ PAVING PERMIT APPROVAL
☐ S.A.D. DRAINAGE REPORT
☐ DRAINAGE REQUIREMENTS
☐ OTHER _____ (SPECIFY)

DATE SUBMITTED: 11-7-97BY: Cheryl A. Byrd



City of Albuquerque

P.O. BOX 1293 ALBUQUERQUE, NEW MEXICO 87103

December 4, 1997

James Topmiller
Bohannon-Huston Inc.
7500 Jefferson NE
Albuquerque, New Mexico 87109

RE: DRAINAGE PLAN FOR ST. JOSEPHS MEDICAL CENTER HELIPORT (J15-D14A)
ENGINEER'S STAMP DATED 11/5/97

Dear Mr. Topmiller:

Based on the information provided on your November 7, 1997 submittal, the above referenced site is approved for Grading/Paving Permit.

Please be advised that Engineer Certification per the DPM checklist will be required after the construction is completed.

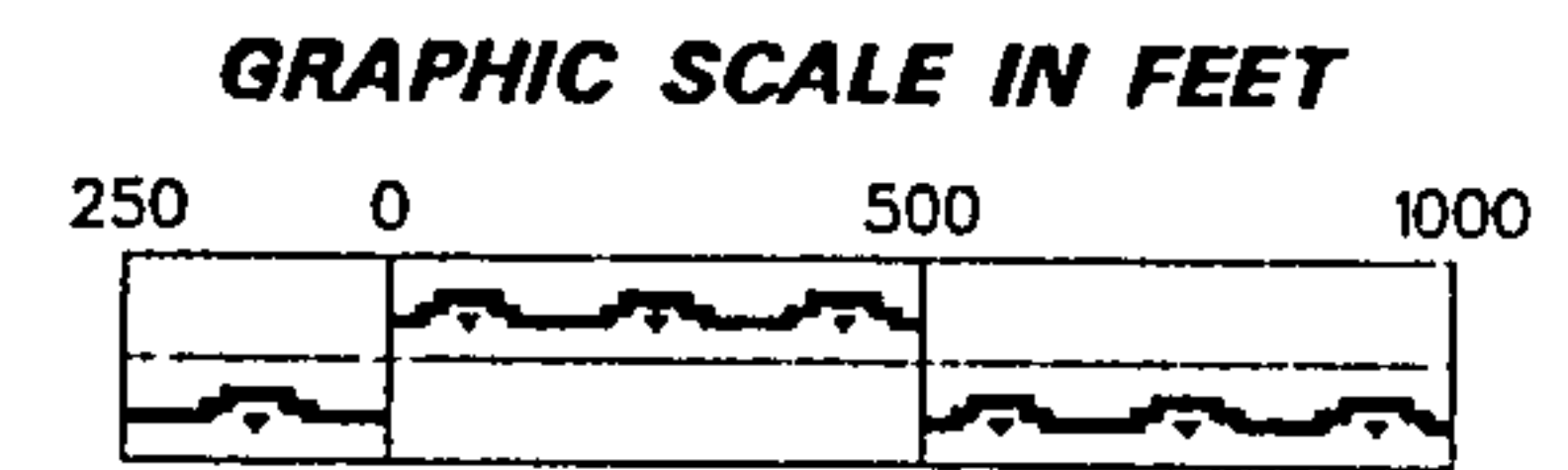
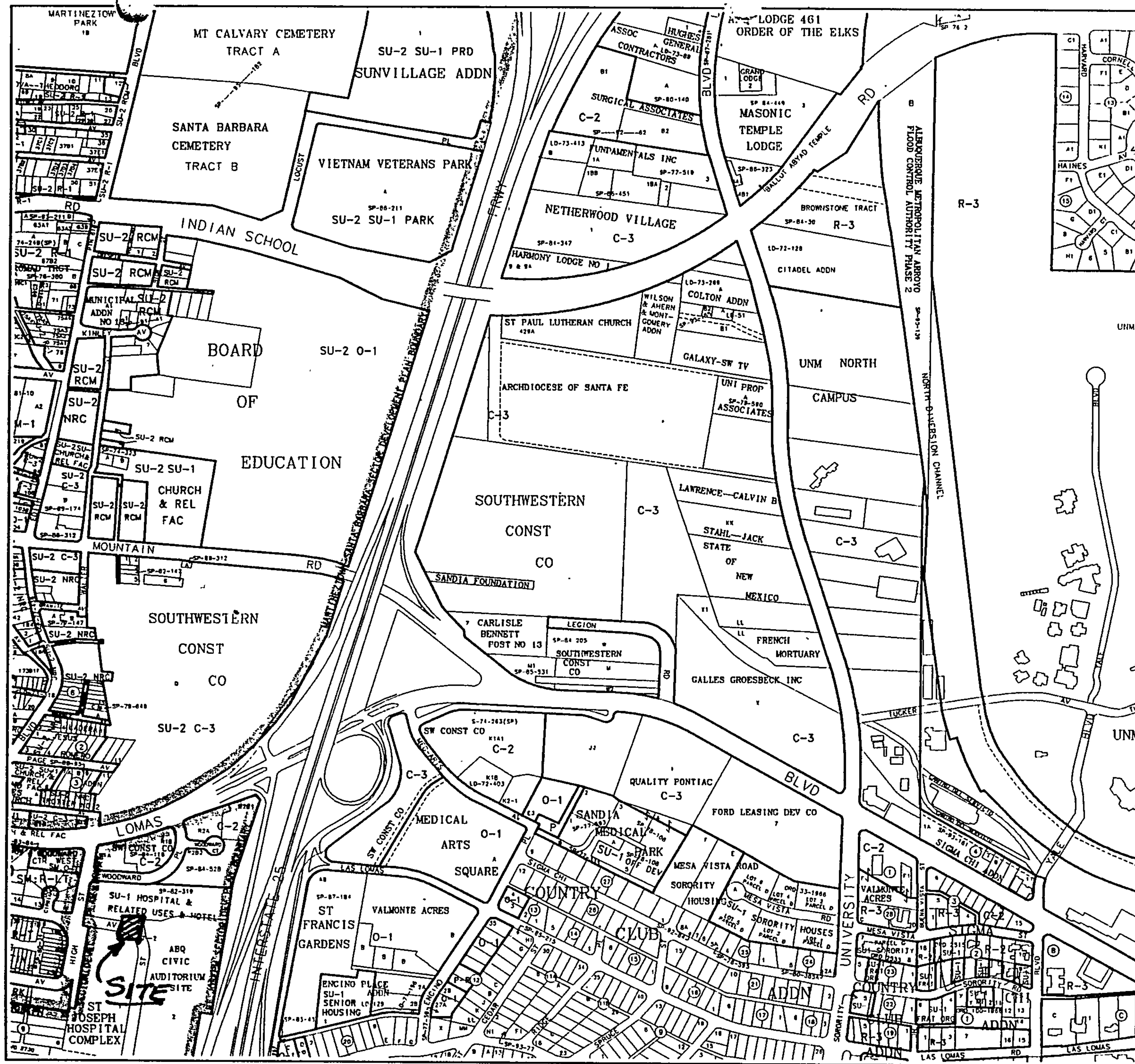
If I can be of further assistance, please feel free to contact me at 924-3986.

C: Andrew Garcia

File

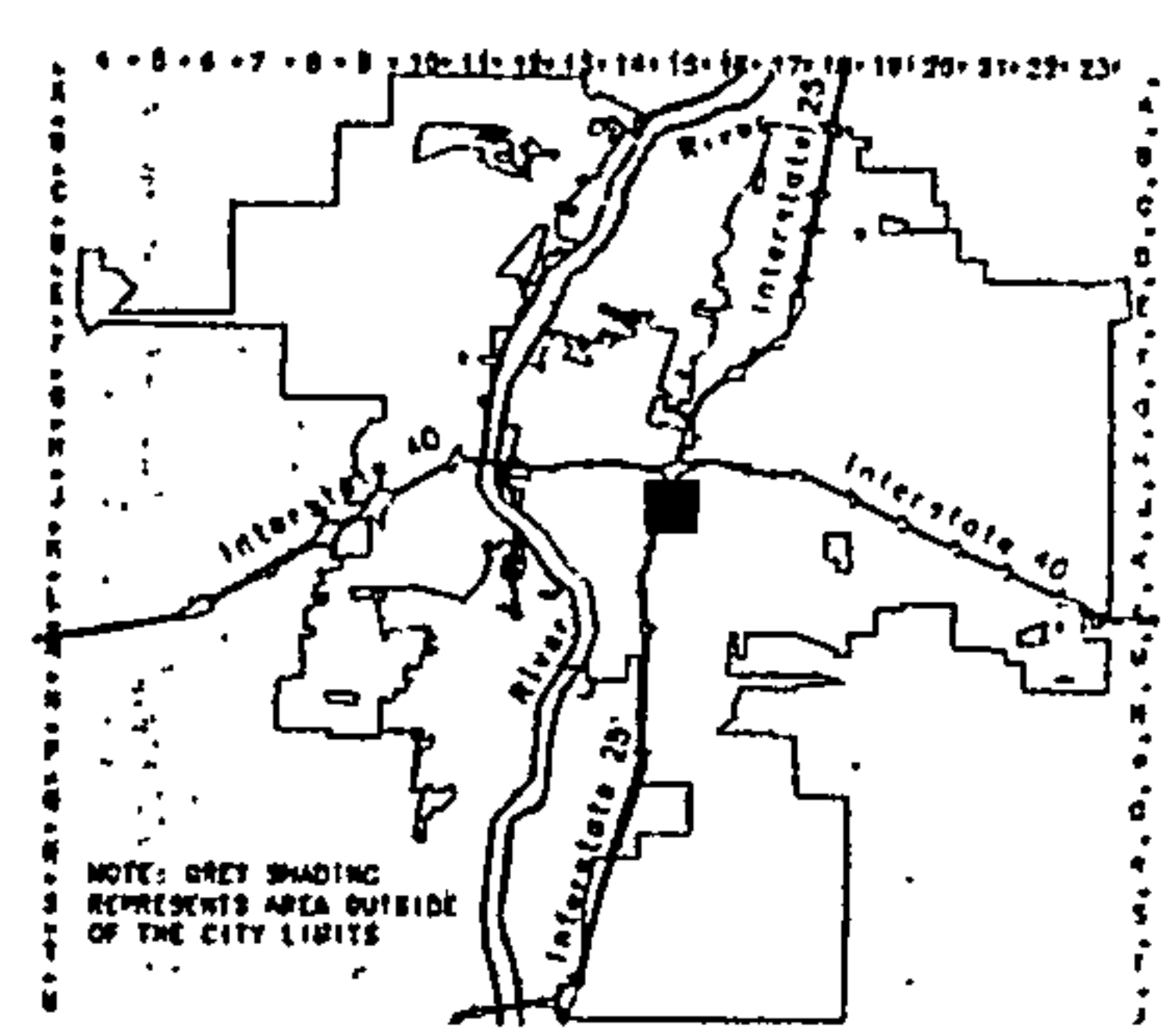
Sincerely

Bernie J. Montoya CE
Associate Engineer



Albuquerque Geographic Information System
PLANNING DEPARTMENT
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Map Amended through April 19, 1996



LEGAL DESCRIPTION

SECTION 16

UNIFORM PROPERTY CODE
 1-015-068

J-15-Z

CLIENT/COURIER TRANSMITTAL

TO: FRED AGUIRRE, PE
COA
HYDROLOGY DIVISION

Requested By: CHERYL BYRD
 Date: 11-7-97

Time Due: ☒ This A.M. ☐ This P.M.
☐ Rush ☐ By Tomorrow

Job No.: 96293A101

Job Name: ST. JOSEPH MEDICAL CENTER
HELIPORT

DELIVERY VIA

☒ Courier ☐ Federal Express
☐ Mail ☐ UPS
☐ Other _____

PICKUP

Item: _____

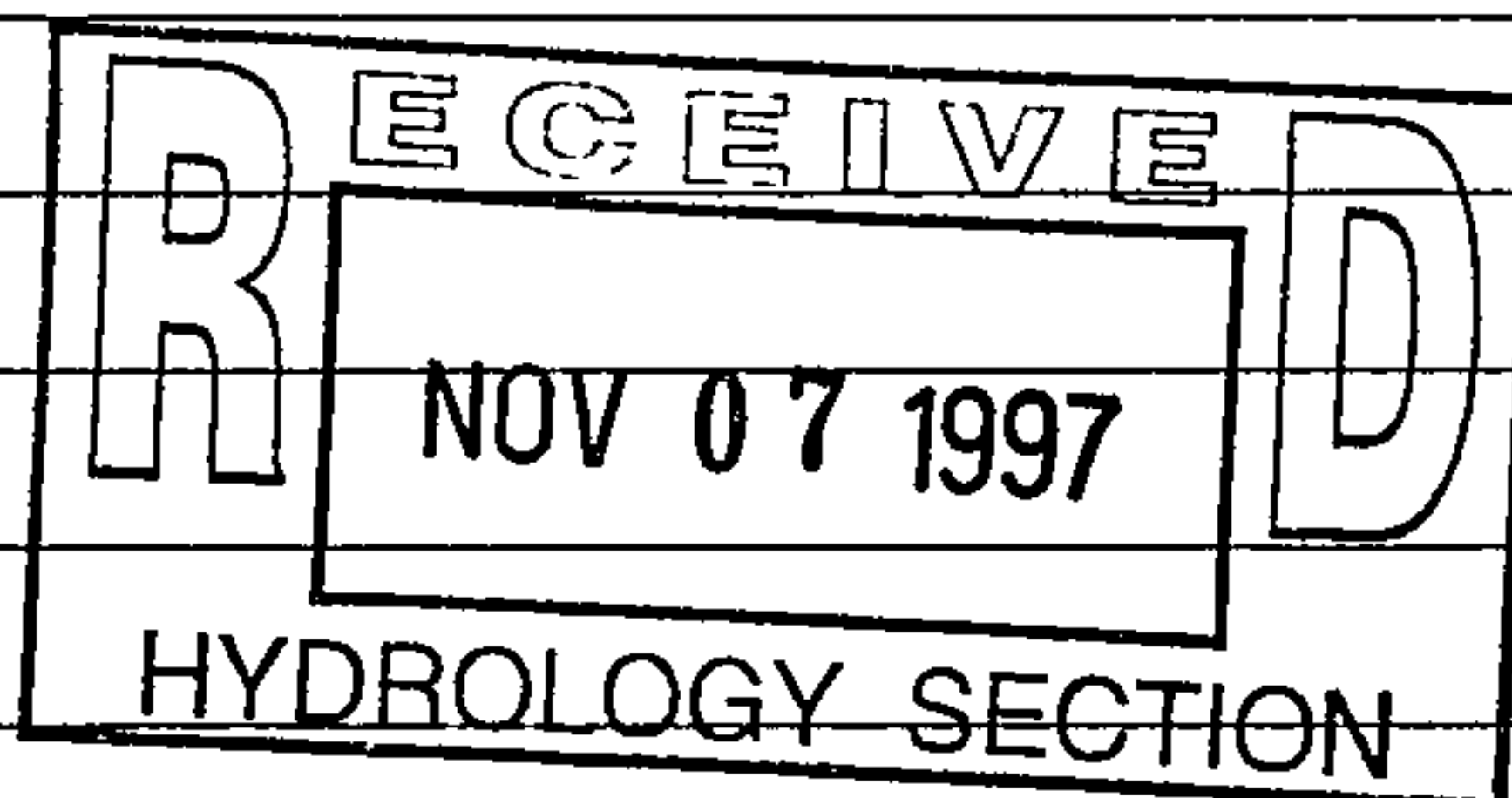
ITEM NO.

QUANTITY

DESCRIPTION

<u>1</u>	<u>1</u>	<u>DRAINAGE INFORMATION SHEET</u>
<u>2</u>	<u>1</u>	<u>TRANSMITTAL LETTER</u>
<u>3</u>	<u>1</u>	<u>ZONE ATLAS MAP</u>
<u>4</u>	<u>1</u>	<u>BLUELINE - GRADING/DRAINAGE PLAN</u>

COMMENTS/INSTRUCTIONS



Received By: [Signature]

Date: 11/7/97

Time: _____



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