District Temporary Water Right Transfer



Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 www.oregon.gov/OWRD

Please type or print legibly in dark ink. If your application is incomplete or inaccurate, we will return it to you. If any requested information does not apply to your application, insert "N/A" to indicate "Not Applicable." As you complete this form, please refer to notes and guidance included on the application. A summary of review criteria and procedures that are generally applicable to these applications is available at:

https://www.oregon.gov/owrd/WRDFormsPDF/CriteriaforDistrictTEMPTransferApplications.pdf

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ADDRESS							FAX NO.	
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AGENT/BUSINESS NAME					PHONE NO.		ADDITIONAL CONTACT NO.	
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3. CONSULTATION WITH STATE AGENCIES, LOCAL GOVERNMENTS, AND TRIBAL GOVERNMENTS Is this transfer application for a change in point of diversion in response to an emergency? ☐ Yes ☐ No Has the district conferred with the Oregon Department of Fish and Wildlife, Division of State Lands, and affected local governments (e.g., county, city, municipal corporation), and tribal governments about the proposed point of diversion change? ☐ Yes ☐ No If "Yes", for any of the above, list the agency or government name and the name and phone number of the appropriate contact person: Agency/ Gov't Name: Contact Name: Phone: Agency/ Gov't Name: ______ Contact Name: _____ Phone: _____ Gov't Name: Contact Name: Phone: Agency/ Gov't Name: _______Phone: ______ Agency/ Gov't Name: ______Phone: _____ 4. CONSENT FOR A CHANGE IN TYPE OF USE OF A WATER RIGHT TO STORE WATER Is this transfer application for a change in type of use of a water right to store water? ☐ Yes ☐ No Has the district received written consent to the change from the operator of the reservoir if different than the district, or from the appropriate federal agency if the water right to store water is issued in the name of a federal governmental agency? Yes No

If "Yes", for any of the above, label and attach a dated and signed copy of the written consent.

5. ATTACHMENTS

Check each of the following attachments included with this application. The application will be returned if all required attachments are not included.

Supplemental Form A –	Supplemental Water Right Statement					
Description of Proposed Change(s) to a Water Right A separate Supplemental Form A is enclosed for each water right to be affected by this transfer. Map Temporary Transfer A map meeting the requirements of OAR 690-385-3300 must be included but need not be prepared by a Certified Water Right Examiner. Consent to Transfer A Copy of the written consent, if applicable, for a change in type of use of a water right to store water.	 □ A written statement, if applicable, identifying supplemental water rights that will not be transferred, but remain unexercised at the authorized place of use during the irrigation season. Water Well Reports/Well Logs: □ The application is for a change from surface water to ground water and copies of all water well reports are attached. □ Water well reports are not available and attached is a description of construction details including well depth, static water level, and information necessary to establish the ground water body developed or proposed to be developed. □ The application is for a surface water transfer and water well reports are not required. Fees: □ Amount enclosed: \$ See the Department's Fee Calculator at https://apps.wrd.state.or.us/apps/wr/wr_transfer_c 					
	alculator/permanent district transfer.aspx					
6. SIGNATURES						
such authorization is on file with the district; an (3) The district has notified each affected user that at any time to the extent necessary too avoid in water on lands from which the water right is tra	s provided written authorization for the transfer and d the Department may condition or reject the transfer jury to an existing water right, and that the use of					
On behalf of the district, I affirm that the information	contained in this application is true and accurate.					
District Manager signature name	(print) date					
OR						
Authorized District Representative signature name	(print) date					

Before submitting your application to the Department, be sure you have:

- Answered each question completely.
- Included all the required attachments.
- Included a check payable to the Oregon Water Resources Department for the appropriate amount.