



**Oregon Water Resources Department**  
 725 Summer Street NE, Suite A  
 Salem, Oregon 97301-1266  
 (503) 986-0900  
 www.wrd.state.or.us

# District Permanent Water Right Transfer Claim of Beneficial Use

## 1. APPLICANT INFORMATION

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District: \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_

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

E-Mail address: \_\_\_\_\_

Transfer Number: T - \_\_\_\_\_

## 2. WATER RIGHT(S)

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Pursuant to OAR Chapter 690, Division 385, the district is submitting to the Water Resources Department this claim of beneficial use, with the appropriate fee, for the following water right(s):

PERMIT NUMBER	CERTIFICATE NUMBER	DECREE (name, volume, and page)	PRIMARY (P) OR SUPP (S)
-			<input type="checkbox"/> P <input type="checkbox"/> S
-			<input type="checkbox"/> P <input type="checkbox"/> S
-			<input type="checkbox"/> P <input type="checkbox"/> S
-			<input type="checkbox"/> P <input type="checkbox"/> S

## 3. AUTHORIZED POINT(S) OF DIVERSION (POD) / APPROPRIATION (POA)

The authorized point(s) of diversion / appropriation for the water right modified by the transfer are as follows:

PERMIT NUMBER	DECREE or CERTIFICATE	POD / POA #	SOURCE	LOCATION – MEASURED DISTANCES
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**6. SIGNATURES**

The district certifies that it has inspected the place of use listed in Table I, and confirms the change in place of use has been completed consistent with the terms and conditions of the final order approving the transfer.

\_\_\_\_\_  
Signature of District Manager  
or District Board Chairperson

\_\_\_\_\_  
Date

\_\_\_\_\_  
Type or Print Name of District Manager  
or District Board Chairperson