|  |  |  |
| --- | --- | --- |
| **Surface Water**  **Allocation of Conserved Water**  **60-Day Notice of Use or Disposition**  **for Applicant’s Portion**  **of Conserved Water For CW** |  | **Oregon Water Resources Department**  725 Summer Street NE, Suite A  Salem, Oregon 97301-1266  (503) 986-0900 |

# Applicant Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| applicant/business name\* | | | phone no. | additional contact no. |
| address | | | | fax no. |
| city | state | zip | e-mail | |

*\* Applicant must be the same person(s)/entity as listed in the Finalization Order.*

The Applicant provides this notice 60 days prior to changes being made to the utilization of the Applicant’s Portion of Conserved Water.

List the portion of the conserved water allocated to the Applicant as listed in the Finalization Order recorded at Special Order Volume      , Page      .

|  |  |
| --- | --- |
| **Applicant’s Portion of Conserved Water** | |
| Maximum Rate (CFS) | Maximum Duty (Volume)/AF |
|  |  |

N/A All or part of the Applicant’s portion of the conserved water is to be:

Leased (*If water is to be temporarily leased instream, a separate Instream Lease Application and appropriate fee must be submitted)*;

Reserved instream for future out-of-stream use (temporary);

Dedicated instream (permanent);

Used out-of-stream.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Applicant’s Conserved Water** | | | | | | **Applicant’s Conserved Water Remaining** | |
| Certificate | Priority | Type of Use | Rate  (CFS) | Volume (AF) | CFS | | Volume |
|  |  |  |  |  |  | |  |
|  |  |  |  |  |  | |  |
| **Totals** | | |  |  |  | |  |

Pursuant to ORS 537.490 and OAR 690-019-0090, the applicant is providing this notice 60 days prior to the following changes being made:

Place of use *(must be within the area identified in the Finalization Order (OAR 690-018-0050(4)(h)).*

Point of diversion;

Type of use, from       to       . The season of use is to be:       to      ;

Revert from use at place of use previously identified to being managed instream within the reach identified in the Finalization Order.

Describe the point of diversion that will be used to deliver water to the new place of use:

| **Twp** | **Rng** | **Mer** | **Sec** | **Q-Q** | **Measured Distances** |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
|  |  | WM |  |  |  |

Name and address of the person using the water:

Description of the type of beneficial use of the water:

Description of the place of use:

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Applicant’s Conserved Water Out-of-Stream Use Location** | | | | | | | | | | | |
| **Priority Date** | **Twp** | | **Rng** | | **Sec** | **¼** | **¼** | **Tax Lot** | **Gvt Lot or DLC** | **Acres** | **Type of Use** |
| 1/1/1865 | 2 | S | 9 | E | 15 | NE | NW | 100 | Example | 153.0 | Irrigation |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| **Total** | | | | | | | | | |  |

N/A The terms of any agreement between the Applicant and the person using the conserved water. Attach a copy of the agreement, or explain the terms of the agreement:

N/A A map depicting the lands identified above that meets the standards in OAR 690-310-0050 *(required if out-of-stream use table completed).*

N/A Land Use Information Form with approval and signature. Land use form not required if any of the following apply:

Water is to be diverted, conveyed, and/or used only on federal lands.

All of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within   
an irrigation district or an exclusive farm use zone.

N/A The water right has been sold. The contact information for the new owner is:

Dated:

      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Printed Applicant Name) (Applicant’s signature)

      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Printed Applicant Name) (Applicant’s signature)