



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

Application for District Temporary Water Right Transfer

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 www.wrd.state.or.us/OWRD/PUBS/forms.shtml.

Application for the _____ irrigation season.
 year

1. APPLICANT INFORMATION

District: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-Mail address: _____

2. PROPOSED CHANGE(S) TO WATER RIGHT(S)

- List **all** water rights to be affected by this transfer. Indicate the certificate, permit, decree or other identifying number(s) in the table below: If a certificate has been issued and reflects the current status of the water right, you need only list the certificate number.
 (Attach additional pages as necessary.)

	Application / Decree	Permit / Previous Transfer	Certificate
1.	- /	- / -	
2.	- /	- / -	
3.	- /	- / -	
4.	- /	- / -	
5.	- /	- / -	
6.	- /	- / -	

- Check **all** proposed change(s) included in this transfer application:
 - Place of Use Point of Diversion or Point of Appropriation
 - Surface Water source to Ground Water source
 - Character or Type of Use

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: _____

Agency/
Gov't Name: _____ Contact Name: _____ Phone: _____

Agency/
Gov't Name: _____ Contact Name: _____ Phone: _____

Agency/
Gov't Name: _____ Contact 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.

<p>Supplemental Form A – Description of Proposed Change(s) to a Water Right</p> <p><input type="checkbox"/> A <u>separate</u> Supplemental Form A is enclosed for <u>each</u> water right to be affected by this transfer.</p> <p>Map</p> <p><input type="checkbox"/> 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.</p> <p>Consent to Transfer</p> <p><input type="checkbox"/> A copy of the written consent, if applicable, for a change in type of use of a water right to store water.</p> <p>Land Use Compatibility Statement</p> <p><input type="checkbox"/> The Land Use Information Form is not required if water is to be diverted, conveyed and/or used only on federal lands or if ALL of the following apply: a) a change in place of use only, b) a change that does not involve the placement or modification of structures, 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.</p>	<p>Supplemental Water Right Statement</p> <p><input type="checkbox"/> 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.</p> <p>Water Well Reports/Well Logs:</p> <p><input type="checkbox"/> The application is for a change from surface water to ground water and copies of all water well reports are attached.</p> <p><input type="checkbox"/> 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.</p> <p><input type="checkbox"/> The application is for a surface water transfer and water well reports are not required.</p> <p>Fees:</p> <p><input type="checkbox"/> Amount enclosed: \$ _____ See the Department's Fee Schedule at www.wrd.state.or.us or call (503) 986-0900.</p>
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6. SIGNATURES

The district certifies the following:

- (1) The water right(s) proposed for transfer is a water right(s) subject to transfer and has not been forfeited for nonuse under ORS 540.610;
- (2) Each user affected by the proposed transfer has provided written authorization for the transfer and such authorization is on file with the district; and
- (3) The district has notified each affected user that the Department may condition or reject the transfer at any time to the extent necessary to avoid injury to an existing water right, and that the use of water on lands from which the water right is transferred (authorized place of use) and at the proposed place of use during the same irrigation season or calendar year may subject both the user and district to civil penalties.

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.