

State of Oregon **Water Resources Department** 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900

## Instream Lease Renewal Application

Complete the questions below and include any r Fill in or check boxes as indicated. (N/A=	
The undersigned hereby request Instream Lease Num  Fees:   \$\infty\$ \$130.00 for an instream lease renewal app  Check enclosed or   Fee Charged to custo	
<ol> <li>The Lessor(s) certify that I/we are the holders of the w deeded land owner, I/we have provided documentation application and/or consent from the deeded landowner.</li> <li>All parties affirm that information provided in this lear changed and all matters involved with or affected by the lease was previously approved. We also acknowledge referenced herein, are incorporated by reference in the Signature of Lessor.</li> <li>Printed name (and title): Lorne Stills Business name</li> </ol>	Termination provision (for multiyear leases):  The parties to the lease request:  □ a. The option of terminating the lease prior to expiration of the full term with written notice to the Department by the Lessor(s) and/or Lessee.  □ b. The option of terminating the lease prior to expiration of the full term, with consent by all parties to the lease.  □ c. The parties would not like to include a Termination Provision.  (See instructions for limitations to this provision)  rogram CREP – Are some or all of the lands to be all program (list here:)?  uspend use of water allowed under the subject water mental water right(s) not involved in the lease application; water right(s) involved in this Instream Lease. If not the indemonstrating authorization to pursue the lease right and see application is true and accurate. Circumstances have not the original instream lease remain as they were when the that the terms and conditions of the original lease, sir entirety.  Date: 2-5-18  me, if applicable: Sagebrush Drive, Madras, OR 97741 (*NEW Address)
	Date: Received by OWRE
Signature of Lessor  Printed name (and title): Business name Mailing Address (with state and zip):	me, if applicable: FEB 0 9 2018
Phone number (include area code): **E-  See next page for additional signatures.	mail address: Salem, OR

Date:	
Signature of Co-Lessor	
Printed name (and title):	
District/organization name:	
Mailing Address (with state and zip):	
Mailing Address (with state and zip): **E-mail address:	
Date:	
Signature of Co-Lessor	
Printed name (and title):	
Business/organization name:	
Mailing Address (with state and zip):	
Mailing Address (with state and zip):  Phone number (include area code): **E-mail address:	
Marin de Ch	
Gluen Atunt Date: 2/9/18	
Signature of Lessee	
Printed name (and title): Genevieve Hubert, Program Manager	
Business/organization name: Deschutes River Conservancy	
Mailing Address (with state and zip): 700 NW Hill Street, Suite #1, Bend, OR 97703	

\*\* BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED TO THE LESSOR.

Phone number (include area code): 541-382-4077, ext. 16 \*\*E-mail address: gen@deschutesriver.org

Received by OWRD

FEB **09** 2018

Salem, OR