

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

## Instream Lease Renewal Application

The undersigned hereby request Instream Lease Numb	Not Applicable) Renewal Fee included  per IL-1569 be renewed.
Fees: \$130.00 for an instream lease renewal app	
Check enclosed or Fee Charged to custor	ner account (Account name)
Term of the Lease:	5-1-
The lease is requested to begin in month OV. year 201	
Validity of the Right(s) (check the appropriate box):	Termination provision (for multiyear leases): The parties to the lease request:
The water right(s) to be leased have been used	<b>V</b> a. The option of terminating the lease prior to
under the terms and conditions of the right(s)	expiration of the full term with written notice to the
during the last five years or have been leased	Department by the Lessor(s) and/or Lessee.
instream.	b. The option of terminating the lease prior to
If the water right(s) have not been used for the last	expiration of the full term, with consent by all
five years, right(s). Documentation describing why	parties to the lease.
the water right(s) is not subject to forfeiture is	c. The parties would not like to include a Termination Provision.
provided. ORS 540.610(2).	(See instructions for limitations to this provision)
<ul> <li>and</li> <li>The Lessor(s) certify that I/we are the holders of the wadeeded 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 leas changed and all matters involved with or affected by the</li> </ul>	ental water right(s) not involved in the lease application;  ater right(s) involved in this Instream Lease. If not the demonstrating authorization to pursue the lease and e application is true and accurate. Circumstances have not le original instream lease remain as they were when the
lease was previously approved. We also acknowledge t	
referenced herein, are incorporated by reference in their	
Signature of Lessor  Printed name (and title): Repeate My Business nam  Mailing Address (with state and zip): 123 TWH  Phone number (include area code): 541- **E-t  222-7130	
Signature of Lessor Printed name (and title): Barry My Business nam Mailing Address (with state and zip): 123 Twh Phone number (include area code): 541- **E-t 222-7130  Signature of Lessor	Date: 6/23/2021  ne, if applicable: Peoce Heatth evnotional Way Sprinofield, Orazur  nail address: tamiller apeace heatth.  Date: W/t  RECEIVED
Signature of Lessor Printed name (and title): Booking Muller, Phone number (include area code): 123 I Who Signature of Lessor Printed name (and title): Business nam Mailing Address (with state and zip):	Date: 6/23/2021  ne, if applicable: Peoce Heatth expedient Way Sprinofield, Dearga mail address: tamiller apeaceheatth.  Date: N/A  RECEIVED  ne, if applicable: JUN 28 2021
Signature of Lessor Printed name (and title): Barry My Business nam Mailing Address (with state and zip): 123 Twh Phone number (include area code): 541- **E-t 222-7130  Signature of Lessor	Date: 6/23/2021  ne, if applicable: Peoce Heatth expedient Way Sprinofield, Dearga mail address: tamiller apeaceheatth.  Date: N/A  RECEIVED  ne, if applicable: JUN 28 2021

N/A Date: N/A
Signature of Co-Lessor
Printed name (and title):
District/organization name:
Mailing Address (with state and zip):
Phone number (include area code): **E-mail address:
Signature of Co-Lessor
Printed name (and title):
Business/organization name:
Mailing Address (with state and zip):
Phone number (include area code): **E-mail address:
Signature of Lessee Date: M/A
Printed name (and title):
Business/organization name:
Mailing Address (with state and zip):  Phone number (include area code): **E-mail address:
E-man address.
** 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.
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