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

Application to Split A Permit and Request for Issuance of Replacement Permits (ORS 537.225)

Part 1 of 5 – Minimum Requirements Checklist

This application <u>will be returned</u> if Parts 1 through 5 and all required attachments are not completed and included.
For questions, please call (503) 986-0900, and ask for Transfer Section.

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Check all items included with this application.

- ☑ Part 1 – Completed Minimum Requirements Checklist.
- ☑ Part 2 – Completed Application Map Checklist.
- ☑ Part 3 – Completed Application with non-refundable $125.00 Application Fee, Applicant(s)' Information and Signature(s).
- ☑ Part 4 – Other Landowner Information and proportionate rate(s).
- ☑ Part 5 – Water Right Permit Information. List the permit number to be assigned here: G 13843

Attachments:

- ☑ Completed application map prepared by Certified Water Right Examiner (CWRE).
- ☑ Completed Affidavit(s) from the applicant(s):
  - ☑ Certifying the permit has not been conveyed or withheld, and remains appurtenant to the applicant's land.
  - ☑ Certifying the applicant has read the permit.
- ☑ Copy(s) of current recorded deed(s) showing that the applicant(s) is/are an owner of the land(s) to which the permit is appurtenant.

INSTRUCTIONS for editing the Application Form

Photocopy pages or tables in Part 5, ~~mark through~~ any non-applicable information, insert/attach photocopied pages to document in the appropriate location, and manually amend page numbers as necessary (e.g., Page ~~5~~ 6 of ~~9~~ 10).

You may refer to additional attachments that you may include, such as separately produced tables or spreadsheets to convey large numbers of rows of place of use listings, owner/property parcels, etc. You may contact the Department at 503-986-0900 and ask for Transfer Staff if you have questions.

For Staff Accounting Purposes Only – PCA #46110 Object #____

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[illegible]

This application <u>will be returned</u> if any of the map requirements listed below are not met.

Please be sure that the map you submit is based upon the original water right application map or permit amendment map and includes all the items listed below and meets the requirements of OAR 690-325-0050. Check all boxes that apply.

The map shall not include any unauthorized change to the authorized place of use outside of its original perimeters as exhibited on the original water right application map or approved permit amendment map nor any unauthorized change to the location of the point(s) of diversion or appropriation as exhibited on the original water right application map or approved permit amendment map.

- ☑ Certified Water Right Examiner (CWRE) Stamp and Signature. For a list of CWRE's, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/.
- ☑ Permanent quality printed with dark ink on good quality paper.
- ☑ The size of the map can be 8½ x 11 inches, 8½ x 14 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one additional paper copy and an electronic copy in a .pdf, .tiff or .jpg format is required.
- ☑ A north arrow, a legend, and scale. The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- ☑ Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- ☑ Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- ☑ Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- ☑ Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- ☑ The place of use of each applicant's portion of the water right permit shall be clearly defined by outline and shaded or hachured and shall show the number of acres for each portion in each quarter-quarter section, government lot, or quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If the permit has multiple priority dates or uses, the lands to be served by each priority date and on which use is authorized, must be separately identified.
- ☑ The place of use of any part of the permit **not** being assigned shall be clearly defined by outline and shaded or hachured and shall show the number of acres for each portion in each quarter-quarter section, government lot, or quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If the permit has multiple priority dates or uses, the lands to be served by each priority date and on which use is authorized, must be separately identified.
- ☑ Each applicant's portion of the permit shall be referenced, by either alphabet letter or number, to each applicant(s) listed in the application form.
- ☑ The rate and any applicable acre-feet allowance of water use under the permit for each applicant's portion of the permit shall be clearly labeled on the map. On Permit Ammendment
- ☑ The location of each authorized point of diversion or appropriation.

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Application to Split A Permit and Request for Issuance of Replacement Permits

Affidavit of Non-Conveyance and Reading of Permit _____

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State of Oregon)
) ss
County of Umatilla)

I/We, Weslie F Adams + Karen Adams, mailing address 30875 Klaus Rd Hermiston OR 97838, telephone number (541) 922 4339, being first duly sworn depose and say:

1. Permit G-13843, has not been conveyed or withheld and remains appurtenant to my/our land.
2. I/We attest that I/we have read Permit G 13843

Weslie F Adams — 3-29-2021
Signature of Affiant — Date

Karen Adams — 3-29-2021
Signature of Affiant — Date

Signed and sworn to (or affirmed) before me this 29 day of March, 20 21.

Notary Public for Oregon

My Commission Expires: 8-22-2023

OFFICIAL STAMP
YVETTE CARRILLO GOMEZ
NOTARY PUBLIC-OREGON
COMMISSION NO. 990983
MY COMMISSION EXPIRES AUGUST 22, 2023

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Affidavit of Non-Conveyance and Reading of Permit _____

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State of Oregon)
) ss
County of Umatilla)

I/We, Monica Rodriguez + Juventino Madrigal Cardozo, mailing address 303 Walla Walla St, Umatilla, OR, 97882.,

telephone number (970) 319-4930, being first duly sworn depose and say:

1. Permit G13843, has not been conveyed or withheld and remains appurtenant to my/our land.
2. I/We attest that I/we have read Permit G13843.

Signature of Affiant — Date 04/09/2021

Juventino Madrigal Cardoso — Signature of Affiant — Date 04-9-21

Signed and sworn to (or affirmed) before me this 9 day of April, 2021.

Notary Public for Oregon

OFFICIAL STAMP
YVETTE CARRILLO GOMEZ
NOTARY PUBLIC-OREGON
COMMISSION NO. 990983
MY COMMISSION EXPIRES AUGUST 22, 2023

My Commission Expires: 8-22-2023

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Application to Spill A Permit and Request for Issuance of Replacement Permits

Affidavit of Non-Ownership and Reading of Permit _____

State of Oregon)
)
County of _____)

I, _____ mailing address

_____

_____ being first duly sworn on oath, state:

1. Permit _____ has been converted or is lost and cannot be found.

2. I/We do not have the permit in our possession.

_____ Date

Signature _____ Date

Signed and sworn to or affirmed before me this _____ day of _____, 20__

_____
Notary Public for State of Oregon

My Commission expires _____

PERMIT # G-13843

Completion date of the permit: OCTOBER 1, 2023

Name(s) currently appearing on permit: KIM WILLIAMS, WESLIE AND KAREN ADAMS, ROBERT AND JOANN CARR (CARR'S SOLD PROPERY, NEW OWNERS SUBMITTED REQUEST OF ASSIGNMENT) JUVENTINO MADRIGAL CARDOZO AND MONICA RODRIGUEZ

Type(s) of use as listed on permit: IRRIGATION

Note: Type of use must be one or more of the following uses approved for assignment under ORS 537.225(1) and OAR 690-325-0010: **irrigation, nursery, temperature control, stock watering, or agricultural water use**.

Table 1. Location of Authorized Point(s) of Diversion (POD) or Appropriation (POA)

POD/POA Name or Number	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
POA #1	**UMAT 3432**	**5**	**N**	**28**	**E**	**27**	**SE**	**NE**	**302**	**900ft NORTH, & 900 FT WEST OF 1/4 27/26**
POA #2	**UMAT 3431**	**5**	**N**	**28**	**E**	**27**	**SE**	**NE**	**300**	**340 FT NORTH, & 690 FT West of 1/4 27/26**
POA #3	**UMAT 3430**	**5**	**N**	**28**	**E**	**27**	**SE**	**NE**	**300**	**1060 FT NORTH, & 545 FT West of 1/4 27/26**
POA #4	**L95691**	**5**	**N**	**28**	**E**	**27**	**SE**	**NE**	**305**	**50 FT NORTH, & 636 FT West of 1/4 27/26**

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Please use additional pages of Table 2 as needed

Table 2. Description of Permit # 613843

List all parts of the permit (both assigned and unassigned). For the acreage or place(s) of use in each ¼ ¼, list the Map ID (letter or number from map and Parts 3 and 4) for each parcel. The acreage listed must equal the total acreage on the permit.

Description of Permitted Lands

Twp		Rng		Sec	¼ ¼		Tax Lot	Gvt Lot or DLC	Acres (if applicable)	Type of Use	POD(s) or POA(s) (name or number from Table 1)	Map ID (letter or number from map and Parts 3 and 4)
2	S	9	E	15	NE	NW	100		15.0	IR	POD #1	"A"
2	S	9	E	15	NE	NW	200		4.0	NU	POD #2	"B"
↑EXAMPLE↑												
5	**N**	**28**	**E**	**27**	**SE**	**NE**	300		15.25		POD 1, POD 2, POD 3	C
5	**N**	**28**	**E**	**27**	**SE**	**NE**	301		3.8		POD 1, POD 2, POD 3	C
5	**N**	**28**	**E**	**27**	**SE**	**NE**	302		4.0		POD 1, POD 2, POD 3	C
5	**N**	**28**	**E**	**27**	**SE**	**NE**	303		4.0		POD 4	B
5	**N**	**28**	**E**	**27**	**SE**	**NE**	304		4.0		POD 1, POD 2, POD 3	C
5	**N**	**28**	**E**	**27**	**SE**	**NE**	305		3.67		POD 4	A
5	**N**	**28**	**E**	**27**	**SE**	**NE**	400		4.0		POD 1, POD 2, POD 3	C
TOTAL ACRES												

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Check the appropriate box, if applicable:

☐ Check here if any portion of the permit is located within an irrigation or other water district.

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

☐ Check here if water for any portion of the permit is supplied under a water service agreement or other contract for stored water with a federal agency or other entity.

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

Additional Remarks:

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Applicant Information

APPLICANT/BUSINESS NAME			MAP ID (LETTER OR NUMBER)	PHONE NO.	ADDITIONAL CONTACT NO.
JUVENTIO MADRIGAL CARDOZO AND MONICA RODRIGUEZ			B	970-319-4930	
ADDRESS 303 WALLA WALLA STREET					FAX NO.
CITY UMATILLA	STATE OR	ZIP 97882	E-MAIL		
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER AND REPLACEMENT PERMIT DOCUMENTS WILL ALSO BE MAILED.					

Agent Information – This agent is authorized to represent the above applicant in all matters relating to this application

AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
CITY	STATE	ZIP	E-MAIL	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER AND REPLACEMENT PERMIT DOCUMENTS WILL ALSO BE MAILED.				

I (we) affirm that the most recent water use (if any) under my (our) portion of the permit has been exercised within the relevant terms and conditions of the permit.

I (we) affirm that the information contained in this application is true and accurate.

Juventio Madrigal Cardozo — Juventio Madrigal Cardozo — 04/14/21
Applicant signature — Name (and title if applicable) (print) — Date

Monica Rodriguez — Monica Rodriguez — 04/14/2021
Applicant signature — Name (and title if applicable) (print) — Date

Applicant Information

APPLICANT/BUSINESS NAME			MAP ID (LETTER OR NUMBER)	PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS					FAX NO.
CITY	STATE	ZIP	E-MAIL		
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER AND REPLACEMENT PERMIT DOCUMENTS WILL ALSO BE MAILED.					

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Applicant signature — Name (and title if applicable) (print) — Date

Applicant signature — Name (and title if applicable) (print) — Date

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Please use additional pages as needed

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