Application for

Groundwater Registration Modification



Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 www.oregon.gov/OWRD

Part 1 of 5 - Minimum Requirements Checklist

This Groundwater Registration Modification application will be returned if Parts 1 through 4 and all required attachments are not completed and included.

For questions, please call (503) 986-0900, and ask for Transfer Section.

- 1			
Chec	k all incl	uded with this application (N/A = Not Applicable)	RECEIVED
\boxtimes		Part 1 – Completed Minimum Requirements Checklist.	OCT 2 0 2023
\boxtimes		Part 2 – Completed Application Map Checklist.	
\boxtimes		Part 3 – Completed Applicant Information and Signature.	OWRD
\boxtimes		Part 4 – Completed Groundwater Registration Modification App Registration Information. (Only one Groundwater registration p Groundwater registrations to be modified are layered).	
\boxtimes		Completed Groundwater Registration Modification Application prepared by a Certified Water Right Examiner).	Map (Does not have to be
\boxtimes		Groundwater registration modification fees – Amount enclosed (\$875.00 for a place of use change only; \$1,250.00 for any other	
		Attachments:	
	□ N/A	Request for Assignment Form and statutory fee. This form need applicant owns the land to which the registration is appurtenar certificate holder of record. The Request for Assignment Form in https://www.oregon.gov/OWRD/Forms/Pages/default.aspx . Assignment is not needed for any person or entity who can den	nt and is not the registration s available at
		request recognition of a modification (e.g. legal representative, etc.) or the applicant is named on the certificate of registration certificate of registration.	power of attorney, agent,
	□ N/A	Oregon Water Resources Department's Land Use Information F signature (or signed land use form receipt stub) from each local water is to be diverted, conveyed, and/or used. Not required if conveyed, and/or used only on federal lands or if all of the folloplace of use only, b) no structural changes, c) the use of water if the use is located within an irrigation district or an exclusive far	land use authority in which water is to be diverted, owing apply: a) a change in s for irrigation only, and d)
	□ N/A	Water Well Report/Well Log for changes in point(s) of appropriation.	ation (well(s)) or additional
	App Land	(For Staff Use Only) RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): lication fee not enclosed/insufficient Map not included or incomplete Assignment Form and fee not itional signature(s) required Part is incomplete cplanation	
	Staff:	503 Date	344/-

Part 2 of 4 – Groundwater Registration Modification Map Checklist

Your Groundwater Registration Modification application will be returned if any of the map requirements listed below are not met.

Please be sure that the map you submit includes all the items listed below and meets the requirements of OAR 690-380-3100, however, the map does <u>not</u> have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

\boxtimes		Permanent quality printed with dark ink on good quality paper.	
\boxtimes		The size of the map can be $8\% \times 11$ inches, $8\% \times 14$ inches, 11×17 inches, inches. For 30×30 inch maps, one extra copy is required.	PPCE 80 x 30
\boxtimes		A north arrow, a legend, and scale.	OCT 20 2023
		The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the sassessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale approved by the Department.	
\boxtimes		Township, Range, Section, $\frac{1}{4}$, DLC, Government Lot, and other recognize survey lines.	ed public land
\boxtimes		Tax lot boundaries (property lines) are required. Tax lot numbers are reco	mmended.
\boxtimes		Major physical features including rivers and creeks showing direction of fl reservoirs, roads and railroads.	ow, lakes and
\boxtimes		Major water delivery system features from the point(s) of appropriation spipelines, canals, and ditches.	uch as main
		Existing place of use that includes hachuring, priority date, and use include acres in each quarter-quarter section, government lot, or in each quarter-projected within government lots, donation land claims, or other recognizes survey subdivisions. If less than the entirety of the registration is being chaseparate hachuring is needed for the portion of the registration left unchases.	quarter section as red public land anged, a
	⊠ N/A	If you are proposing a modification in place of use, show the proposed plathachuring including priority date and use including number of acres in each section, government lot, or in each quarter-quarter section as projected who lots, donation land claims, or other recognized public land survey subdivision.	ch quarter-quarter vithin government
\boxtimes		Existing point(s) of appropriation with distance and bearing or coordinate recognized survey corner.	s from a
	□ N/A	If you are proposing a modification in point(s) of appropriation, show the location and label it clearly with distance and bearing or coordinates. If Given are used, latitude-longitude coordinates may be expressed as either degree seconds with at least one digit after the decimal (example – 42°32′15.5″) decimal with five or more digits after the decimal (example – 42.53764°).	PS coordinates ees-minutes-

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		Pa	art 3 of 4 – Ap	oplicant Information	and Signature
Applicant Information					
APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONT	ACT NO.
Weyerhaeuser NR Co.			(541) 327-2229		
ADDRESS				FAX NO.	
16014 Pletzer Rd. SE			_		
СПҮ	STATE	ZIP	E-MAIL		
Turner	OR	97392	jesse.eaton@we		
BY PROVIDING AN E-MAIL ADDRES	The second secon			NCE FROM THE DEPARTMEN	NT
ELECTRONICALLY. COPIES OF THE	FINAL ORDE	R DOCUMENTS WILL	ALSO BE MAILED.		
Agent Information – The	agent is au	thorized to represer	t the applicant in a	II matters relating to this	application
APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONT	ACT NO.
Will McGill Surveying, LLC			(503) 931-0210	(503) 510-3026	í
ADDRESS				FAX NO.	
15333 Pletzer Rd. SE	T	T	I		
CITY	STATE	ZIP	E-MAIL		
Turner	OR	97392	willmcgill.surveyi		
BY PROVIDING AN E-MAIL ADDRESS ELECTRONICALLY. COPIES OF THE				NCE FROM THE DEPARTMEN	NT
ELECTRONICALLY. COPIES OF THE	FINAL OKDI	K DOCOMENTS WILL	ALSO BE MAILED.		
Explain in your own word	ds what v	ou propose to ac	complish with th	is modification: and	why:
To authorize proposed N				•	,
411 on newly acquired to			proposed wen-	ras i ozsioi tile port	.ion or on
411 Off flewiy acquired to	1X 101 300	•			
Check this box if this	project is	fully or partially	funded by the A	merican Recovery an	d Reinvestment
Act. (Federal stimu	lus dollar	s)			
		(Check	one box)		
By signing this application	, I (we) und	derstand that, upon	receipt of the draft	preliminary determinatio	n and prior to
Department approval of t					
information and evidence	that I am	authorized to pursue	the modification a	s identified in OAR 690-3	82-
0400(16)(a); OR					
I (we) affirm the applican	t is a munic	cipality as defined in	ORS 540.510(3)(b)	and that the right is in the	e name of the
municipality or a predece					
I (we) affirm that the appl					
which the Groundwater re		proposed for modific	ation is appurtenar	nt by condemnation and h	nave attached
supporting documentation	١.				
I understand that prior to D	-				,
to submit payment to the I					
area where the groundwat					
qualifying newspaper is ava	ilable, I su	uggest publishing t	he notice in the fo	ollowing paper: Stayton	Mail.
I (we) affirm that the infor	mation co	ntained in this ap	olication is true a	nd accurate.	TOP
M. nn	n. 1		M	10/11	RECENT
Megn 1 1	iones	Megen Print Naime (and	ויונרובנט	10/16/23	
Applicant Signature		Print Name (and	little if applicable)	Date	OCT 20 202



danifying newspaper is available, i sugges	st publishing the notice in the n	ollowing paper: <u>Stayton i</u>	vidii.
we) affirm that the information contain	nd accurate.	Trop.	
Megn 1 Marlea	Megan Marieau	10/16/23	RECEIVA
Applicant Signature	Print Name (and Title if applicable)	Date	OCT 20 2023
Applicant Signature	Print Name (and Title if applicable)	Date	OWRD

Is the applicant the sole owner of the land on which the Groundwater registration modification or portion thereof, is located? 🛛 Yes 🗌 No If NO, include signatures of all deeded landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the Groundwater registration has been conveyed.

Check the appropriate box, if applicable:		
Check here if the Groundwater registrati within or served by an irrigation or other	• •	is or will be located
IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP
Check here if water for the Groundwater or other contract with a federal agency o		a water service agreemen
ENTITY NAME	ADDRESS	
CITY	STATE	ZIP
To meet State Land Use Consistency Require county, city, municipal corporation, or tribal diverted, conveyed or used.	to the second se	
ENTITY NAME Marion County	ADDRESS 5155 Silverton Rd. NE	
CITY	STATE	ZIP
Salem	OR	97305
ENTITY NAME	ADDRESS	

STATE

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ZIP

CITY

Please use a separate Part 4 for each registration being modified. See instructions on page 5, to copy and paste additional Part 4s, or to add additional rows to tables within the form.

Groundwater Registration # GR-411 (Certificate # GR-394)

Table 1. Location of Authorized and Proposed Point(s) of Appropriation (POA)

(Note: If the POA name is not specified in the registration, assign it a name or number here.)

POA Name or Number	Is this POA Authorized by the registration or is it Proposed?	OWRD Well Log ID# (or Well ID Tag # L)	TV	v p	R	ing	Sec	% %		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Pump Well 1	Authorized Proposed	MARI 16005	10	s	2	w	4	NE	sw	600	690' S and 920' W from center of Sec. 4
Pump Well 2	Authorized Proposed	MARI 16006	10	s	2	w	4	NW	NW SW		320' S and 1800' W from center of Sec. 4
New Greenhouse (NG) Well	Authorized Proposed		10	s	2	w	4	SE	sw	100	250' N and 2020' E from SW cor. of Sec. 4
Well 4	☐ Authorized ☐ Proposed		10	s	2	w	9	NE	NW	100	900' S and 1950' E from NW cor. of Sec. 9

Check all typo parentheses)		low (n	nodification "CODES" are provided in			
Plac	e of Use (POU)	\boxtimes	Point of Appropriation (well) (POA)			
Chai	haracter of Use (USE) Additional Point of Appropriation (APO					
Will all of the	proposed changes affect the entire	Groui	ndwater registration?			
Yes	Complete only the proposed ("to" la "CODES" listed above to describe the		section of Table 2 on the next page. Use the posed changes.			
⊠ No	Complete all of Table 2 to describe	the po	ortion of the registration to be changed.			

RECEIVED OCT 20 2023 OWRD Please use and attach additional pages of Table 2 as needed. See page 5 for instructions.

Do you have questions about how to fill-out the tables? Contact the Department at 503-986-0900 and ask for Transfer

Table 2. Description of Modifications to Registration GR-411 (Certificate # GR-394)

List only the part of the registration that will be modified. For the acreage in each ¼ ¼, list the modification proposed. If more than one modification, specify the acreage associated with each modification. If more than one POA, specify the acreage associated with each POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears in the registration BEFORE PROPOSED CHANGES List only that part or portion of the groundwater registration that will be changed.								Proposed Changes (see																		
Tw	rp q	Rr	ng	Sec	y	i ¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POA(s) (name or number from Table 1)	Priority Date	"CODES" from previous page)	TV	wp	R	ng	Sec	1/4	14	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POA(s) to be used (from Table 1)	Priority Date
10	s	2	w	4	NE	sw	500	55	10.04	Irrigation	Pump Well 1	1939	РОА	10	s	2	w	4	NE	sw	500	55	10.04	Irrigation	NG Well, Well 4	1939
10	s	2	w	4	NW	SE	500	55	4.5	Irrigation	Pump Well 1	1939	POA	10	s	2	w	4	NW	SE	500	55	4.5	Irrigation	NG Well, Well 4	1939
	+																									
						TC	OTAL AC	RES	14.54		-	L		_						ТО	TAL AC	RES	14.54			

Additional remarks:	
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Groundwater Registration Modification – Page 6 of 7 $\,$

Groundwater Registration # GR-411 (Certificate # GR-394)

For	a modification	in place of	use or	cnaracter	or use:		

Are there other water right certificates, water use permits, or Groundwater registrations
associated with the "from" or "to" lands? Yes No

If YES, list the other certificate, water use permit, or other Groundwater registration numbers:



Pursuant to OAR 690-382-0200, any "layered" water use, such as an irrigation right that is supplemental to a primary irrigation right proposed for transfer, must be concurrently transferred with the registration or be cancelled. Any change to a water right must be filed separately in a transfer application. Any change to a water use permit must be filed separately with a permit amendment. Any modification to a Groundwater registration on the "to" lands must be filed separately with a Groundwater registration modification.

For modifications in point(s) of appropriation (well(s) or additional point(s) of appropriation:

\boxtimes	Well log(s) are attached for each well that are clearly labeled and associated with the
	corresponding well(s) in Table 1 above and on the accompanying application map.
	(Tip: You may search for well logs on the Department's web page at:
	http://apps.wrd.state.or.us/apps/gw/well_log/)

AND/OR

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells
that do not have a well log. For proposed wells not yet constructed or built, provide "a best
estimate" for each requested information element in the table. The Department
recommends you consult a licensed well driller, geologist, or certified water right examine
to assist with assembling the information necessary to complete Table 3.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide adequate information is likely to delay the processing of your modification application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of complete d well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right
New Greenhouse Well	No		50′ +/-	16"		Min. 18'	18-30′ +/-		Sand and gravel	
Well 4	No		50′ +/-	16"		Min. 18'			Sand and gravel	

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HEMPHEZ:			BECE	MED	
DRILLER of DIGGER ADDITIONAL DATA: Log Water Level Measurements Chemical Ana	***************************************		' reliupA		-
USE OF WATER Integrion (33.3 acres) Temp	p			6	61
Drawdown ft, after hours	s	***********			G.P.M
MELL TESTS: It. after hours	s			***************************************	G.P.M
PUMPING EQUIPMENT: Type F. M. Capacity			гн	6. sg	
WATER LEVEL:		The state of the s			
AQUIFERS:					
EINIZH:		×81000 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			
CASING RECORD:					
Depth drilled 291 Depth cased 291		ection	η		
TYPE OF WELL: Drilled Date Constructed Apr. 1939	68	T			
Altitude at well 2781		ļ <u>i</u>			
***************************************		r(I)	G		
corner 690'S. & 920'W, from center of sec. 4	-				
Bearing and distance from section or subdivision					
NE W SM W Sec. h T TO S, R. XW. W.M.		<u> </u>	<u>:</u>	<u> </u>	
LOCATION OF WELL: Owner's No STATE:	QNA Y	r, Oreg	uo		
OWNER: Autis Haves ADDRESS:		98 xoa .	(•••••	
(000)		PPLICAT	ON NOIT		
STATE ENGINÉER M A R Well Record	bro:	OUNTY W	EFF NO	TO/SM	
	LVA	1 14200		-,	

- PP8PI

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STATE ENGINEER Well	Record	STATE WELL NO. 10/2W-LM(1 COUNTY Marion APPLICATION NO. GR- 411
OWNER: Autis Rayes	MAILING	Rt. 1 Box 86
	CITY AND	
LOCATION OF WELL: Owner's No. 2	_ STATE:	Turner, Oregon
NW 1/4 SW 1/4 Sec. 14 T. 10 S., R. 14 W.	, W.M.	
Bearing and distance from section or subdivision		
corner 320' S. & 1800' W. of center of sec.	4	
		0
0001	*******	M(1)
Altitude at well 2781	244444	
TYPE OF WELL: Drilled Date Constructed Apr	• 1939	
Depth drilled 291 Depth cased 221		Section4
CASING RECORD: 8 inch		
FINISH:		
AQUIFERS:		
WATER LEVEL:		

PUMPING EQUIPMENT: Type F. M. Capacity G.P.M.		н.р. 25
WELL TESTS: Drawdown ft. after	hours	G.P.M.
Drawdown ft. after	hours	G.P.M.
		PF
ADDITIONAL DATA: LogNA Water Level Measurements	Chemical Ana	alysis Aquifer Test
REMARKS:		RECEIVED

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WEYERHAEUSER NR COMPANY

CERTIFICATE OF AUTHORITY AND INCUMBENCY

I, Irina West, Assistant Secretary of Weyerhaeuser NR Company corporation organized under the laws of the State of Washington (the "Company"), do hereby certify that:

- I am a duly appointed and qualified Assistant Secretary of the Company and as such Assistant Secretary I have access to the corporate and stock books and the corporate seal of the Company;
- (2) I have reviewed the Bylaws, Delegations of Authority and Responsibility Policy of Weyerhaeuser Company and its subsidiaries, including the Company, and such other documents as I have deemed necessary, and confirm that Megan Marleau, Western Regeneration Team Leader, has been duly delegated the authority on behalf of the Company to execute and deliver the application, agreements, amendments, certificates, instruments, documents, notices, consents, approvals, permits and other documents in connection with water rights located in the State of Oregon.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Company this 12th day of October 2023.



Irina West, Assistant Secretary Weyerhaeuser NR Company

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Land Use Information Form



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

www.oregon.gov/OWRD

NOTE TO APPLICANTS

In order for your application to be processed by the Water Resources Department (WRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be used and developed. The planning official may choose to complete the form while you wait, or return the receipt stub to you. Applications received by WRD without the Land Use Form or the receipt stub will be returned to you. Please be aware that your application will not be approved without land use approval.

This form is NOT required if:

- 1) Water is to be diverted, conveyed, and/or used only on federal lands; OR
- 2) The application is for a water right transfer, allocation of conserved water, exchange, permit amendment, or ground water registration modification, and <u>all</u> of the following apply:
 - a) The existing and proposed water use is located entirely within lands zoned for exclusive farm-use or within an irrigation district;
 - b) The application involves a change in place of use only;
 - The change does not involve the placement or modification of structures, including but not limited to water diversion, impoundment, distribution facilities, water wells and well houses; and
 - d) The application involves irrigation water uses only.

NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for or modifying a water right. The Water Resources Department (WRD) requires its applicants to obtain land-use information to be sure the water rights do not result in land uses that are incompatible with your comprehensive plan. Please complete the form or detach the receipt stub and return it to the applicant for inclusion in their water right application. You will receive notice once the applicant formally submits his or her request to the WRD. The notice will give more information about WRD's water rights process and provide additional comment opportunities. You will have 30 days from the date of the notice to complete the land-use form and return it to the WRD. If no land-use information is received from you within that 30-day period, the WRD may presume the land use associated with the proposed water right is compatible with your comprehensive plan. Your attention to this request for information is greatly appreciated by the Water Resources Department. If you have any questions concerning this form, please contact the WRD's Customer Service Group at 503-986-0801.

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Land Use Information Form



O R E G O N Oregon Water Resources Department

725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 www.oregon.gov/OWRD

Applicant(s): Weyerhaeuser NR Co.

Mailing Address: 16014 Pletzer Rd. SE

City: Turner

State: OR

Zip Code: 97392

Daytime Phone: (541) 327-2229

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Township	Range	Section	1/4 1/4	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)		Water to be:		Proposed Land Use:
<u>10S</u>	<u>2W</u>	4	NESW SESW NWSE SWSE	500	<u>EFU</u>	Diverted	☐ Conveyed	☑ Used	<u>farming</u>
<u>10S</u>	<u>2W</u>	4	SESW	100	<u>EFU</u>	□ Diverted	Conveyed	Used	farming
<u>10S</u>	<u>2W</u>	9	NENW	100	<u>EFU</u>	□ Diverted	Conveyed	Used	farming
<u>10S</u>	<u>2W</u>	4	swsw	1000	<u>EFU</u>	Diverted	Conveyed	□ Used	farming
<u>10S</u>	<u>2W</u>	4	NWSW	1000	<u>EFU</u>	Diverted	Conveyed	Used	farming

<u>10S</u>	<u>2W</u>	4	NWSW	1000	<u>EFU</u>	Diverted	☐ Conveyed	Used	farming
List all counties and cities where water is proposed to be diverted, conveyed, and/or used or developed:									
Marion	Marion RECEIVED								
								0	CT 20 2023
B. Descrip Type of app				er Resources I	Department:			(DWRD
	☐ Permit to Use or Store Water ☐ Water Right Transfer ☑ Permit Amendment or Ground Water Registration Modification ☐ Limited Water Use License ☐ Allocation of Conserved Water ☐ Exchange of Water								
Source of w	vater: 🗌 R	eservoir/Po	ond 🛛 G	round Water	Surface Water (r	name)	-		
Estimated of	quantity of	water nee	ded: <u>55.05</u>	☐ cub	ic feet per second	gallons per m	ninute 🛛 a	acre-feet	
Intended us	se of water		ation [Commercial Quasi-Munici	Industrial		estic for	househo	old(s)
Briefly desc	cribe:								
It is proposed to change the authorized wells for specific portions of existing water rights GR 170 and GR 411.									
									0

Note to applicant: If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt at the bottom of the next page and include it with the application filed with the Water Resources Department.

See bottom of Page 3. →

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For Local Government Use Only

The following section must be completed by a planning official from each county and city listed unless the project will be located entirely within the city limits. In that case, only the city planning agency must complete this form. This deals only with the local land-use plan. Do not include approval for activities such as building or grading permits.

Please check the appropriate box below ar	nd provide the requested information		
Land uses to be served by the proposed water by your comprehensive plan. Cite applicable	er uses (including proposed construction) ar ordinance section(s): Farm USE in E	e allowed outrig	ht or are not regulated (6,020 (A)
Land uses to be served by the proposed water as listed in the table below. (Please attach do Record of Action/land-use decision and according periods have not ended, check "Being pursus	ocumentation of applicable land-use approvempanying findings are sufficient.) If approve	als which have a	Iready been obtained.
Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land	l-Use Approval:
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
Name: Vaniel Jansen Signature: Jansen	Title: Phone (503) 588 -	Assista 588 Date:	nt Planner 8/29/2023
Government Entity:	County		
Note to local government representative: Pleasign the receipt, you will have 30 days from the Information Form or WRD may presume the lancomprehensive plans.	Water Resources Department's notice date	to return the co	mpleted Land Use
	to Downer for Land Health Information		- Po
Receipt	t for Request for Land Use Informati	on	
Applicant name:			
City or County:			
Signature:	Phone: Dat	e:	OCT 20 2023
Revised 2/8/2010	Land Use Information Form - Page 3 of 3	14344	OWRD _{WR/FS}