



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 Permanent 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 the application is available at www.wrd.state.or.us/OWRD/PUBS/forms.shtml#app_criteria_review.

Change in Place of Use Only

1A. APPLICANT INFORMATION

IRRIGATION DISTRICT Eagle Point Irrigation District			PHONE NO. 541-826-3411	ADDITIONAL CONTACT NO.
ADDRESS P.O. Box 157			COUNTY Jackson	
CITY Eagle Point	STATE OR	ZIP 97524	E-MAIL epidist@centurylink.net	
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.				

1B. AGENT INFORMATION

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 DOCUMENTS WILL ALSO BE MAILED.				

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: *(Attach additional pages as necessary.)*

	Certificate	Permit / Previous Transfer	Decree
1.	89373	-	
2.		-	
3.		-	
4.		-	
5.		-	
6.		-	

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3. 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 checked="" 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 checked="" type="checkbox"/> Permanent 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 (CWRE).</p>	<p>Fees:</p> <p><input checked="" type="checkbox"/> Amount enclosed: \$ 1,360.00 See the Department’s Fee Schedule at www.wrd.state.or.us or call (503) 986-0900.</p> <p>Land Use Compatibility Statement</p> <p><input type="checkbox"/> The Land Use Information Form is <u>not</u> required if water is to be diverted, conveyed and/or used only on federal lands or if <u>ALL</u> 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>
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4. SIGNATURES

The district certifies the following:

- (1) The water rights proposed for transfer are water rights subject to transfer and are not subject to forfeiture 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;
- (3) For lands which are no longer irrigated or susceptible of irrigation that are included in this transfer under the authority of ORS 540.572 and OAR 690-385-5000, notices as required under ORS.572 and OAR 690-385-5100 have been given to the user and any security interest holder of record of intent to transfer the right and the user was provided an opportunity to resolve the matter in the manner described by ORS 540.572 and OAR 690-385-5400 and 690-385-5600.
- (4) On behalf of the district, I affirm to the best of my knowledge the information contained in this application is true and accurate.


 District Manager signature

David Ford
 name (print)

12-1-23
 date

OR

 Authorized District Representative signature

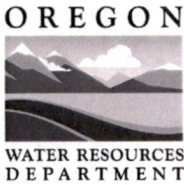
 name (print)

 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.

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District Permanent Water Right Transfer Application

Supplemental Form A

DESCRIPTION OF PROPOSED CHANGE(S) TO A WATER RIGHT

List only one water right per page. A **separate Supplemental Form A must be completed for each** certificate, permit, decree, or other right involved in the proposed transfer.

Attach additional copies of Supplemental Form A as needed to describe other certificates, permits, decrees or other rights involved in this transfer.

1. CURRENT WATER RIGHT INFORMATION

Water Right Subject to Transfer (check and complete one of the following):

<input checked="" type="checkbox"/> Certificated Right	89373	
	Certificate Number	
<input type="checkbox"/> Adjudicated, Non-certificated Right	_____	Page Number
	Name of Decree	
<input type="checkbox"/> Permit for which Proof has been Approved	-	Date Claim of Beneficial Use Submitted
	Permit Number	
<input type="checkbox"/> Transferred Right for which Proof has been Filed	-	Date Claim of Beneficial Use Submitted
	Previous Transfer Number	
<input type="checkbox"/> Permit for Supplemental Irrigation	-	
	Permit Number	

- Name on Permit, Certificate, or Decree: Eagle Point Irrigation District
- Priority Date(s): 8/21/1915

If there are **multiple Priority Dates** identified on the water right, any information provided in Supplemental Form A of this application must identify which priority date is associated with each of the authorized points of diversion or appropriation and places of use.

Source(s) of Water to be Affected by Transfer: Big Butte Creek

Tributary to: Rogue River

- Are there **other water rights**, Permits or Ground Water Registrations associated with this land?
 - Yes No

If “Yes”, what are the Permit, Registration or Certificate Numbers? _____

Any “layered” water use or a right that is supplemental to a primary right proposed for transfer **must be included in the transfer or be cancelled.**

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▪ Certificate Number or other identifying number: 89373

The following information must be provided only for those points of diversion or appropriation that are involved in the transfer.

If a point of diversion or appropriation is not numbered on the decree or water right certificate or permit, assign it a unique number in the following table (e.g. POD #1 or POA(well) #1). Use the number to refer to the point of diversion or appropriation serving the place of use described in Tables I and II. Note: Permanent district transfers do not allow for a change in point of diversion or appropriation to serve the proposed place of use.

Government lot and donation land claim numbers must be included in the table below **only** if the information is reflected on the existing water right.

Location of Existing Authorized Point(s) of Diversion (POD) or Appropriation (POA):
(i.e., the allowed point(s) of diversion or appropriation listed on the water right for the "FROM" or "OFF" lands)

AUTHORIZED POINT(S) of DIVERSION (POD) or APPROPRIATION (POA)							
POD# or POA#	TWP	RNG	SEC	QQ	DLC	GOV'T LOT	MEASURED DISTANCES
1	35 S	2 E	10	NE NE			1130 feet south & 700 feet west from the NE corner, section 10, NE-NE section 10, T35S, R2E, W.M.
2	35 S	2 E	3	NW NW		10	1030 feet south & 290 feet east from the NW corner, section 3, Lot 4, NW-NW section 3, T35S, R2E, W.M.

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▪ Certificate Number or other identifying number: 89373

Provided the district filed notice of a change in place of use pursuant to OAR 690-385-4100, reference the District Internal Notice Number (DINN) used to describe the change(s) to be made permanent by this transfer.

Government lot (GOV'T LOT) and donation land claim numbers (DLC) must be included in the tables below **only** if the information is reflected on the existing water right.

TABLE I. – AUTHORIZED PLACE OF USE												
POD# or POA#	PRIORITY DATE	USE	LEGAL DESCRIPTION						ACRES	USER NAME	DINN	
			TWP	RNG	SEC	QQ	DLC	GOV'T LOT				TAX LOT
1, 2	8/21/1915	IR	36 S	1W	10	SWNW		3	500	2.90	Bob Fellows Construction	T-2023-001
TOTAL:										2.90		

▪ Certificate Number or other identifying number: 89373

TABLE II. – PROPOSED PLACE OF USE												
POD / POA #	PRIORITY DATE	USE	LEGAL DESCRIPTION						ACRES	USER NAME	DINN	
			TWP	RNG	SEC	QQ	DLC	GOV'T LOT				TAX LOT
1, 2	8/21/1915	IR	36S	1W	11	NWSE			1100	2.90	Lallo, Vincent C. & Kristie	T-2023-001
TOTAL:										2.90		

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