

Oregon Water Resources Department Land Use Information Form

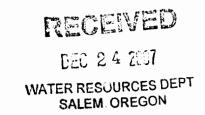
THIS FORM IS NOT REQUIRED IF: 1) water is to be diverted, conveyed, and/or used only an federal lands; or 2) the application is for a water-right transfer, allocation of conserved water, exchange, permit amendment, or ground water registration modification, and all of the following apply: a) only the place of use is proposed for change, b) there are no structural changes, c) the use of water is for irrigation, and d) the use is located in an irrigation district or exclusive farm-use zone.

Applicant Name: Larson Land Co., LLC, DBA Larson Skyline Farms Partnership, Farrell Larson, Partner

City:	Mailing Address:		4395 Heinz Blvd.							
City:		Ontario		State:	OR Zip:	97914	Day Phone:	(541)889-6586		
This app	dication	is related to	o a Me	asure 37 cl	aim. 🖺 Yes 🎵 No					
Land and L	ocatio	<u>n</u>								
nsported), or	used. A	Applicants for	or mun	icipal use,	ots where water will or irrigation uses w mation requested be	ithin irrigal	d (taken from its tion districts may	source) substit	, conveye ute existin	
Township	Range	Section	44	Tax Lot #	Plan Designation (e. Rural Residential/RR		Water to be:		Proposed Land Use	
17 S	46 E	2, 9-17,		Misc.	EFU		ented 2 Conveyed	E Used	Irrigatio	
	-	20-23, 26-				G Div	erted Conveyed	C Used		
		29, 32-35,				C Div	erted [] Conveyed	(3 Used		
18 \$	46 E	3,4				C Div	erted Conveyed	© Uscd		
e of applicat	ion to be	filed with	_	iter Resour	ces Department:					
≟ Permi	to Use	e filed with or Store Wa Conserved \	 the Wa ater Vater	i) Wa Si Lia	ces Department: ater-Right Transfer mited Water Use Li tration Modification	cense	Exchange of Wa	iter		
≟ Permi	to Use of to tion of to Amend	e filed with or Store We Conserved \ Iment or Gr	 the Wa acr Water ound W	i) Wa Si Lia	ater-Right Transfer mited Water Use Li tration Modification	cense n	Exchange of Wa		r Rivers	
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⊆ Permi X Alloca □ Permi ree of water:	to Use of tion of (in Amendal Res	e filed with or Store Wa Conserved \ Iment or Gra servoir/Pond ster needed:	the Wa	ा Wa ा Lii Vater Regis Ground Wa	ater-Right Transfer mited Water Use Li tration Modification ater	cense n ce Water (n second :	ame) <u>Snako</u> &	<u>k Malbeu</u> nute [acre-fee	
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Receipt for Request for Land Use Information

State of Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, OR 97301-1266



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.

	plow and provide the requested used water uses (including proposed to plan. Cite applicable ordinance se	construction)	_	are not
☐ Land uses to be served by proposing approvals as tisted in the table be already been obtained. Record of	osed water uses (including proposed clow. (Please attach documentation of Action/land-use decision and acco and but all appeal periods have not o	construction) of applicable mpanying fin	land-use approvals which dings are sufficient.)	
Type of Land-Use Approval Needed (e.g. plan amendments, resones,	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:		
conditional-use permits, etc.)		□ Obtained	☐ Being pursued	
		☐ Denied	□ Not being pursued	
		i.) Obtained Demied	☐ Being pursued ☐ Not being pursued	
		□ Obtained	☐ Being pursued	
		C Obtained	☐ Not being pursued ☐ Being pursued	
		C Denied	E Not being pursued	
7.		C Obtained	Ci Being pursued	
		C Denico	☐ Not being pursued	
gnature: Bill LAWRENCE povernment Entity: Malhe	Tide: As	=1. Pla 173-518	nain Dir	- ector Lot
lote to local government representative fyou sign the receipt, you will have 30 day and Use Information Form or WRD may p ocal comprehensive plans.	ys from the Water Resources Depart	ment's notice	date to return the compl	eted
Receip	t for Request for Land Use I	nformation		
pplicant name:				, ra-
ity or County:	Staff contact;			
anothers:	Phone:		Date:	

Last updated 12/22/06 WR



DEC 2 4 2007