

Checklist for Claims of Beneficial Use Received at CSG Counter

Application # <u>S-86240</u>	WRD Reviewer <u>Cony M., Judy F</u>
Transfer #	
Date Received <u>9-5-2019</u>	
CWRE Name <u>H. Timothy Fassbender</u>	

Priority Date: 4/4/2005

Fees Required:

YES NO A fee of \$200 must accompany this form for permits with priority dates of July 9, 1987, or later.

YES NO A fee of \$200 must accompany this form for any transfers including a water right with a priority date of July 9, 1987, or later.

Example – A transfer involves 5 rights and one of the rights has a priority date of July 9, 1987, or later, the fee is required.

Fill in App or Transfer Number

Map Review:

- k Map on polyester film (OAR 690-014-0170(1) & 310-0050(1)(b))
- x Application & permit #; or transfer # (OAR 690-014-0100(1))
- k Disclaimer (OAR 690-014-0170(5))
- k North arrow (OAR 690-310-0050(2)(c))
- k CWRE stamp and signature (OAR 690-014 & 310-0050)
- k Appropriate scale (1" = 1320', 1" = 400', or the original full-size scale of the county assessor map) (014 & 310)
- k Township, range, section, and tax lot numbers (OAR 690-310-0050(4))

MONEY SLIP

DATE:	RECEIPT #:
RECEIVED FROM:	APPLICATION PERMIT TRANSFER
CASH <input type="checkbox"/> CHECK # <input type="checkbox"/> OTHER (IDENTIFY) <input type="checkbox"/>	TOTAL RECEIVED \$
0183 TREASURY 0118 WERE/ELN/AGCY	
0407 COPIES OTHER (IDENTIFY)	\$
0243 IMPROVEMENT 0244 More Water Right Plan 0245 Canal Water	
0183 TREASURY 0270 WRD OPERATING ACCT.	
MISCELLANEOUS	
0407 COPY & TAPE FEES <u>4611</u>	\$
0410 RESEARCH FEES	\$
0408 RESC. REVIEW (IDENTIFY)	\$
0240 DEPOSIT LIME (IDENTIFY)	\$
0240 EXTENSION OF TRAY	\$
WATER RIGHTS	0240 FEE \$
0201 SURFACE WATER	0202 \$
0202 GROUND WATER	0204 \$
0205 TRANSFER	\$
WELL CONSTRUCTION	0240 FEE \$
0218 WELL DRILL CONSTRUCTION LANDOWNER'S PERMIT	0219 \$
0220 OTHER (IDENTIFY) <u>COBU</u>	0220 \$
0240 TREASURY 0401 HYDROELECTRIC	
0223 POWER LICENSE FEE (P/WRD)	0224 \$
0221 HYDRO LICENSE FEE (P/WRD)	\$
HYDRO APPLICATION	\$
SPECIAL INSTRUCTIONS:	

Report Review:

- k On form provided by the Department (OAR 690-014-0100(1))
- k Application & permit #; or transfer # (OAR 690-014)
- k Ownership information (OAR 690-014)
- k Date of survey (OAR 690-014)
- k Person interviewed (OAR 690-014)
- k County (OAR 690-014)
- k CWRE stamp and signature (OAR 690-014-0100)
- k Signature(s) of all permittee of transfer holder (OAR 690-014-0100)

Groundwater File Review:

Pump Test Required? N/A YES NO Pump Test Submitted? N/A YES NO*

*If no, include pump test flyer w/acknowledgment letter

**CLAIM OF
BENEFICIAL USE
for Surface Water Permits
claiming 0.1 cfs or less**



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

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A fee of \$200 must accompany this form for permits with priority dates of July 9, 1987, or later. Claims received without the correct fee of \$200 will be returned.

A separate form shall be completed for each permit.

In cases where a permit has been amended through the permit amendment process, a separate claim for the permit amendment is not required. Incorporate the permit amendment into the claim for the permit.

This form is subject to revision. **Begin each new claim** by checking for a new version of this form at: http://www.oregon.gov/owrd/pages/wr/cwre_info.aspx

The completion of this form is required by OAR 690-014-0100(1) and 690-014-0110(4).

Please type or print in dark ink. If this form is found to contain errors or omissions, it may be returned to you. **Every item must have a response.** If any requested information does not apply to the claim, insert "NA." **Do not delete or alter any section of this form unless directed by the form.** The Department may require the submittal of additional information from any water user or authorized agent.

"Section 8" of this form is intended to aid in the completion of this form and should not be submitted.

If you have questions regarding the completion of this form, please call 503-986-0900 and ask for the Certificate Section.

The Department has a program that allows it to enter into a voluntary agreement with an applicant for expedited services. Under such an agreement, the applicant pays the cost to hire additional staff that would not otherwise be available. This program means a certificate may be issued in about a month. For more information on this program see:

http://www.oregon.gov/owrd/pages/mgmt_reimbursement_authority.aspx

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**SECTION 1
GENERAL INFORMATION**

1. File Information

APPLICATION # S-862401/T-12597.cac	PERMIT # (IF APPLICABLE) S-55140	PERMIT AMENDMENT # (IF APPLICABLE)
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2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME Judith Dahlberg		PHONE NO. 541-997-1725	ADDITIONAL CONTACT NO. 541-999-1899
ADDRESS 83396 Erhart Road			
CITY Florence	STATE OR	ZIP 97439	E-MAIL Judy.dahlberg@gmail.com

If the current property owner is not the permit holder of record, it is recommended that an assignment be filed with the Department. *Each permit holder of record must sign this form.*

3. Permit holder of record (this may, or may not, be the current property owner)

PERMIT HOLDER OF RECORD Same as Above		
ADDRESS		
CITY	STATE	ZIP

ADDITIONAL PERMIT HOLDER OF RECORD		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

5. Person(s) interviewed and description of their association with the project:

NAME	DATE	ASSOCIATION WITH THE PROJECT
Judith Dahlberg	3-4-2019	Owner

6. County:

7. If any property described in the place of use of the permit final order is excluded from this report, identify the owner of record for that property (ORS 537.230(4)):

OWNER OF RECORD		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

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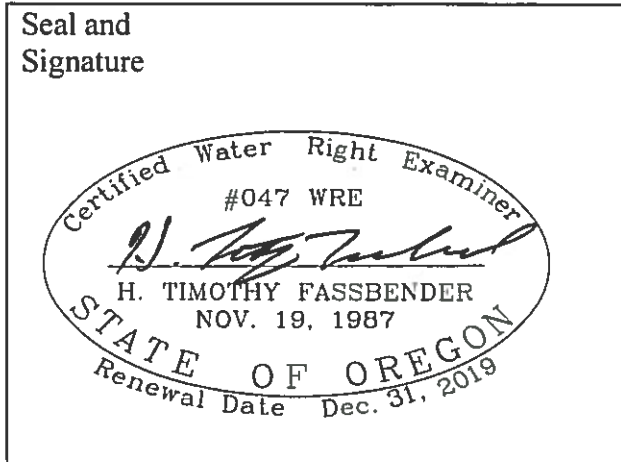
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**SECTION 2
SIGNATURES**

CWRE Statement, Seal and Signature

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge.




CWRE NAME H. Timothy Fassbender		PHONE NO. 541-485-3136	ADDITIONAL CONTACT NO. 541-913-0216
ADDRESS 2896 Sarah Lane			
CITY Eugene	STATE OR	ZIP 97408	E-MAIL htimfass@aol.com

Permit Holder's of Record Signature or Acknowledgement

Each permit holder of record must sign this form in the space provided below.

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge. I request that the Department issue a water right certificate.

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SIGNATURE	PRINT OR TYPE NAME	TITLE	DATE
	Judith Dahlberg	Owner	9/2/2019

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SECTION 3
CLAIM DESCRIPTION

1. POD source and, if from surface water, the tributary:

POD NAME OR NUMBER	SOURCE	TRIBUTARY
1	Siltcoos Lake	Siltcoos River

2. Developed use(s), period of use, and rate for each use:

POD NAME OR NUMBER	USES	IF IRRIGATION, LIST CROP TYPE	SEASON OR MONTHS WHEN WATER WAS USED	ACTUAL RATE OR VOLUME USED (CFS, GPM, OR AF)
1	Domestic Use		Year around	0.005 CFS
Total Quantity of Water Used				0.005 CFS

3. Provide a general narrative description of the distribution works. This description must trace the water system from each point of diversion to the place of use:

Water is pumped from lake directly to home.

Reminder: The map associated with this claim must identify the location of the point(s) of diversion, Donation Land Claims (DLC), Government Lots (GLot), and Quarter-Quarters (QQ).

4. Variations:

Was the use developed differently from what was authorized by the permit, permit amendment final order, or extension final order? If yes, describe below.

NO

(e.g. "The permit allowed three points of diversion. The water user only developed one of the points." or "The permit allowed 40.0 acres of irrigation. The water user only developed 10.0 acres.")

5. Claim Summary:

POD / POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
PUMP & METER	0.005 CFS	0.04 CFS	0.001 CFS	Domestic Use	Domestic Use	Domestic Use

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SECTION 4 SYSTEM DESCRIPTION

Are there multiple PODs?

NO

If "YES" you will need to copy and complete Sections 4B through 4E for each POD.

POD Name or Number this section describes (only needed if there is more than one):

A. Place of Use

Attach Claim of Beneficial Use map.

Reminder: The map associated with this claim must identify Donation Land Claims (DLC), Government Lots (Gov Lot), Quarter-Quarters (QQ), and if for irrigation, the number of acres irrigated within each projected DLC, Gov Lot, and QQ.

B. Diversion and Delivery System Information

Provide the following information concerning the diversion and delivery system. Information provided must describe the equipment used to transport and apply the water from the point of diversion to the place of use.

1. Is a pump used?

YES

If "NO" items 2 through item 5 may be deleted.

2. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)
McDonald	24075k2	1278867	Centrifugal

3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN GFS)
3/4	40	30 feet	10 feet	0.04 cfs

4. Provide pump calculations:

$$(.75)(6.61)/(40+40)=0.04 \text{ CFS}$$

5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN GFS)
53811.99 gal	53819.28 gal	15 minutes	0.001

Reminder: For pump calculations use the reference information at the end of this document.

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6. Sprinkler Information

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (GFS)
NA					

Reminder: For sprinkler output determination use the reference information at the end of this document.

7. Additional notes or comments related to the system:

Water is used for domestic use only. No irrigation use.

C. Storage

1. Does the distribution system include in-system storage (e.g. storage tank, bulge in system / reservoir)

NO

D. Gravity Flow Pipe

(THE DEPARTMENT TYPICALLY USES THE HAZEN-WILLIAM'S FORMULA FOR A GRAVITY FLOW PIPE SYSTEM)

1. Does the system involve a gravity flow pipe?

NO

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SECTION 5 CONDITIONS

All conditions contained in the permit, permit amendment, or any extension final order shall be addressed. Reports that do not address all performance related conditions will be returned.

1. Time Limits:

Permits and any extension final orders contain any or all of the following dates: the date when the actual construction work was to begin, the date when the construction was to be completed, and the date when the complete application of water to the proposed use was to be completed. These dates may be referred to as ABC dates. Describe how the water user has complied with each of the development timelines established in the permit or extension final order:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	5-25-2018		
BEGIN CONSTRUCTION (A)		June 2018	Rec'd permit and installed line
COMPLETE CONSTRUCTION (B)		June 2018	Pump installed
COMPLETE APPLICATION OF WATER (C)		June 2018	System supplying water to house

* MUST BE WITHIN PERIOD BETWEEN PERMIT OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETELY APPLY WATER

2. Is there an extension final order(s)?

NO

3. Measurement Conditions:

a. Does the permit, permit amendment, or any extension final order require the installation of a meter or approved measuring device?

YES

If "NO", items 3b through 3f relating to this section may be deleted.

Reminder: If a meter or approved measuring device was required, the COBU map must indicate the location of the device in relation to the point of diversion.

b. Has a meter been installed?

YES

c. Meter Information

POD NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Pump & meter	Sensus	63276924	Working	53819.28	June 2018

If a meter has been installed, items 3d through 3f relating to this section may be deleted.

4. Recording and reporting conditions

a. Is the water user required to report the water use to the Department?

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NO

If "NO", item 4b relating to this section may be deleted.

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If the reports have not been submitted, attach a copy of the reports if available.

5. Fish Screening

a. Are any points of diversion required to be screened to prevent fish from entering the point of diversion? **YES**

If "NO", items 5b through 5e relating to this section may be deleted.

Reminder: If fish screening devices were required, the COBU map must indicate their location in relation to the point of diversion.

b. Has the fish screening been installed? **RECEIVED YES**

c. When was the fish screening installed? **SEP 05 2019**

DATE	BY WHOM
JUNE 2018	OWNER

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Reminder: If the permit or transfer final order was issued on or after February 1, 2011, the fish screen is required to be approved by the Oregon Department of Fish and Wildlife regardless of the rate of diversion.

d. If the diversion involves a pump *and* the total diversion rate of all rights at the point of diversion is less than 225 gpm (0.5 cfs):

- Has the self-certification form previously been submitted to the Department? **YES**
 - If not, go to <http://www.oregon.gov/owrd/Pages/pubs/forms.aspx>, complete and attach a copy of the self-certification form to this claim, and send a copy of it to the Oregon Department of Fish and Wildlife (ODFW).

Reminder: Failure to submit evidence of a timely installed fish screen may result in an unfavorable determination. The ODFW self certification form needs to have been previously submitted or be attached to this form.

e. If the diversion does not involve a pump *or* the total diversion rate of all rights at the point of diversion is 225 gpm (0.5 cfs) or greater:

- Has the ODFW approval been previously submitted? **NA**
- If not, contact and work with ODFW to ensure compliance. To demonstrate compliance, provide signed documentation from ODFW. A form is available at <http://www.oregon.gov/owrd/Pages/pubs/forms.aspx>

Reminder: Failure to submit evidence of a timely installed fish screen may result in an unfavorable determination. In order to receive a favorable approval, the ODFW/WRD "Fish Screen Inspection" form needs to have been previously submitted or be attached to this form.

6. By-pass Devices

a. Are any points of diversion required to have a by-pass device to prevent fish from entering the point of diversion? **NO**

7. Other conditions required by permit, permit amendment final order, or extension final order

- a. Was the water user required to restore the riparian area if it was disturbed? **NO**
- b. Other conditions? **YES**

If "YES" to any of the above, identify the condition and describe the water user's actions to comply with the condition(s):

A flow restrictor was installed at the point of approbation in the lake.

SECTION 6 ATTACHMENTS

Provide a list of any additional documents you are attaching to this report:

ATTACHMENT NAME	DESCRIPTION
ODFW Letter	Fish Screen approval letter

SECTION 7 CLAIM OF BENEFICIAL USE MAP

The Claim of Beneficial Use Map must be submitted with this claim. Claims submitted without the Claim of Beneficial Use map will be returned. The map shall be submitted on poly film at a scale of 1" = 1320 feet, 1" = 400 feet, or the original full-size scale of the county assessor map for the location.

Provide a general description of the survey method used to prepare the map. Examples of possible methods include, but are not limited to, a traverse survey, GPS, or the use of aerial photos. If the basis of the survey is an aerial photo, provide the source, date, series and the aerial photo identification number.

Map Checklist

Please be sure that the map you submit includes ALL the items listed below.
(Reminder: Incomplete maps and/or claims may be returned.)

- Map on polyester film.
- Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map)
- Township, Range, Section, Donation Land Claims, and Government Lots
- If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters
- Locations of fish screens and/or fish by-pass devices in relationship to point of diversion
- Locations of meters and/or measuring devices in relationship to point of diversion
- Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
- Point(s) of diversion or appropriation (illustrated and coordinates)
- Tax lot boundaries and numbers
- Source illustrated if surface water

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- Disclaimer (“This map is not intended to provide legal dimensions or locations of property ownership lines”)
- Application and permit number or transfer number
- North arrow
- Legend
- CWRE stamp and signature

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