



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem Oregon 97301-1271
 (503) 986-0900
 www.wrd.state.or.us

Application for a Permit to Use Ground Water

Please type or print in dark ink. If your application is found to be incomplete or inaccurate, we will return it to you. If any requested information does not apply to your application, insert "n/a." Please read and refer to the instructions when completing your application. A summary of review criteria and procedures that are generally applicable to these applications is available at www.wrd.state.or.us/OWRD/PUBS/forms.shtml.

1. APPLICANT INFORMATION

A. Individuals

Applicant: _____
First Last

Mailing address: _____

City State Zip

Phone: _____
Home Work Other

*Fax: _____ *E-Mail address: _____

B. Organizations

(Corporations, associations, firms, partnerships, joint stock companies, cooperatives, public and municipal corporations)

Name of organization: Oak Acres Nursery, Inc.

Name and title of person applying: Jim Roofener

Mailing address of organization: 3995 SW Dilley Road
Forest Grove Oregon 97116
City State Zip

Phone: 503-969-3339 (Nursery Manager)
Day Evening

*Fax: 503-992-8951 *E-Mail address: chris@oakacresnursery.com

*Optional information

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WATER RESOURCES DEPT
SALEM, OREGON

For Department Use		
App. No. _____	Permit No. _____	Date _____

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2. PROPERTY OWNERSHIP

Do you own all the land where you propose to divert, transport, and use water?

- Yes (Skip to section 3 "Ground water Development.")
- No (Please check the appropriate box below.)
 - I have a recorded easement or written authorization permitting access.
 - I do not currently have written authorization or easement permitting access.
 - Written authorization or an easement is not necessary, because the only affected lands I do not own are state-owned submersible lands, and this application is for irrigated and/or domestic use only (ORS 274.040).

You must provide the legal description of: (1) the property from which the water is to be diverted, (2) any property crossed by the proposed ditch, canal or other work, and (3) any property on which the water is to be used as depicted on the map.

List the names and mailing addresses of all affected landowners.

3. GROUND WATER DEVELOPMENT

A. Well Information

Number of well(s): 1

Name of nearest surface water body: Unnamed reservoir under Cert. 38764

Distance from well(s) to nearest stream or lake: 1) Unnamed reservoir, 400'

2) Lousignont Canal, 3250' 3) _____ 4) _____

If distance from surface water is less than one mile, indicate elevation difference between nearest surface water and well head. 1) Unnamed reservoir, 10' est.

2) Lousignont Canal, 40' est. 3) _____ 4) _____

B. Well Characteristics

Wells must be constructed according to standards set by the Department for the construction and maintenance of water wells. If the well is already constructed, please enclose a copy of the well constructor's log and the well ID number, if available, for each well with this application. Identify each well with a number corresponding to the wells designated on the map and proceed to section 4 of the form. If the well has not been constructed, or if you do not have a well log, please complete the following:

Well(s) will be constructed by: A. M. Janssen Well Drilling Co., Inc.

Address: 21075 SW Tualatin Valley Highway, Aloha, OR 97006

Completion date: 10-18-83 See WASH 6768

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Please provide a description of your well development. (*Attach additional sheets if needed.*)

Well No.	Diameter	Type and size of casing	No. of feet of casing	Intervals casing is perforated (in feet)	Seal depth	Est. depth to water	Est. depth to water bearing stratum	Type of access port or measuring device	Total well depth
	***	Well log	attached	--	WASH	6768	***		

Note: Well numbers in this listing must correspond to well locations(s) shown on accompanying map.

If well log is not available, or well is not yet constructed, you must provide: proposed total depth, depth of casing and seal, and the anticipated perforation and open intervals.

C. Artesian Flows

If your water well is flowing artesian, describe your water control and conservation works:

2 PSI artesian pressure when constructed (10-18-83).

Static level 5' below land surface on 1-8-08 when pump test completed.

4. WATER USE

Please read the instruction booklet for more details on "type of use" definitions, how to express how much water you need and how to identify the water source you propose to use. You must fill out a supplemental form for some uses as they require specific information for that type of use.

A. Type(s) of Use(s)

See list of beneficial uses provided in the instructions.

- If your proposed use is **domestic**, indicate the number of households to be supplied with water: _____
- If your proposed use is **irrigation**, please attach **Form I**
- If your proposed use is **mining**, attach **Form R**
- If your proposed use is **municipal or quasi-municipal**, attach **Form M**
- If your proposed use is **commercial/industrial**, attach **Form Q**

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B. Amount of Water

Provide the production rate in gallons per minute (gpm) and the total annual amount of water you need from each well, from each source or aquifer, for each use. You do not need to provide source information if you are submitting a well log with your application.

Well No.	Source or aquifer	Type of use	Total rate of water requested (in gpm)	Total annual quantity (in gallons)	Production rate of well (in gpm)
1	Basalt	Irr & Ag use (nurs. use)	400	133 ac ft	400

C. Maximum Rate of Use Requested

What is the maximum, instantaneous rate of water that will be used? 400 gpm
(The fees for your application will be based on this amount.)

D. Period of Use

Indicate the time of year you propose to use the water: Year around
(For seasonal uses like irrigation give dates when water use would begin and end, e.g. March 1–October 31.)

E. Acreage

If you will be applying water to land, please give the total number of acres where water will be applied or used: 44.5
(This number should be consistent with your application map.)

5. WATER MANAGEMENT

A. Diversion

What equipment will you use to pump water from your well(s)?

- Pump (give horsepower and pump type): 40 hp electric submersible turbine
- Other means (describe): _____

B. Transport

How will you transport water to your place of use?

- Ditch or canal (give average width and depth):

Width _____ Depth _____

Is the ditch or canal to be lined? Yes No

- Pipe (give diameter and total length):

Diameter 6" - dia main Length est 2000' - not designed yet

- Other (describe) _____

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C. Application/Distribution Method

What equipment will you use to apply water to your place of use? Semi solid set sprinklers, typically
40' x 40' spacing. Some drip where appropriate.

Irrigation or land application method (check all that apply):

- Flood
- High-pressure sprinkler
- Low pressure sprinkler
- Drip
- Water cannons
- Center pivot system
- Hand lines
- Wheel lines
- Siphon tubes or gated pipe with furrows
- Other, describe _____

Distribution method

- Direct pipe from source
- In-line storage (tank or pond)
- Open canal

D. Conservation

What methods will you use to conserve water? Why did you choose this distribution or application method? For example, if you are using sprinkler irrigation rather than drip irrigation, explain. If you need additional space, attach a separate sheet.

Using sprinklers so that frost protection can also be provided. Drip may be used where appropriate.

6. PROJECT SCHEDULE

Indicate the anticipated dates that the following construction tasks should begin. If construction has already begun, or is completed, please indicate that date.

Proposed date construction will begin: Well is in.

Proposed date construction will be completed: October 2011

Proposed date beneficial water use will begin: As soon as permit is issued.

7. REMARKS

If you would like to clarify any information you have provided in the application, please do so here and reference the specific application question you are addressing.

*Applicant may pump from well to pond (Cert 38764) and then re-pump to nursery crops.

*Current pump test attached.

Jim and Debbie Roofener own Oak Acres Nursery and the tax lot.

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8. MAP REQUIREMENTS

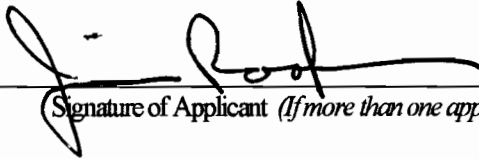
The Department cannot process your application without accurate information showing the source of water and location of water use. You must include a map with this application form that clearly indicates the township, range, section, and quarter/quarter section of the proposed well location and place of use. The map must provide tax lot numbers. See the map guidelines sheet for detailed map specifications.

9. SIGNATURE

By my signature below I confirm that I understand:

- I am asking to use water specifically as described in this application.
- Evaluation of this application will be based on information provided in the application packet.
- I cannot legally use water until the Water Resources Department issues a permit to me.
- If I get a permit, I must not waste water.
- If development of the water use is not according to the terms of the permit, the permit can be canceled.
- The water use must be compatible with local comprehensive land use plans.
- Even if the Department issues a permit to me, I may have to stop using water to allow senior water right holders to get water they are entitled to, and

I swear that all information provided in this application is true and correct to the best of my knowledge:



(Signature of Applicant (If more than one applicant, all must sign.)

1-30-08

Date

Before you submit your application be sure you have:

- Answered each question completely.
- Attached a legible map which includes township, range, section, quarter/quarter and tax lot number.
- Included a Land Use Information Form or receipt stub signed by a local official.
- Included the legal description of all the property involved with this application. You may supply a copy of the deed, land sales contract, or title insurance policy, to meet this requirement.
- Included a check payable to the Oregon Water Resources Department for the appropriate amount. The Department's fee schedule can be found at www.wrd.state.or.us or call (503) 986-0900.

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Oregon Water Resources Department

FORM I
FOR IRRIGATION WATER USE

1. Please indicate whether you are requesting a primary or supplemental irrigation water right.

[X] Primary [] Supplemental

If supplemental, please indicate the number of acres that will be irrigated for each type of use.

Primary: 44.5 Acres

Secondary: _____ Acres

List the permit or certificate number of the primary water right: No. _____

2. Please list the anticipated crops you will grow and whether you will be irrigating them for a full or partial season:

- 1. Nursery crops [X] Full season [] Partial season (from: _____ to _____)
2. _____ [] Full season [] Partial season (from: _____ to _____)
3. _____ [] Full season [] Partial season (from: _____ to _____)
4. _____ [] Full season [] Partial season (from: _____ to _____)

3. Indicate the maximum total number of acre-feet you expect to use in an irrigation season:

133 acre-feet
(1 acre-foot equals 12 inches of water spread over 1 acre, or 43,560 cubic feet, or 325,851 gallons.)

4. How will you schedule your applications of water? Will you be applying water in the evenings, twice a week, daily?

- [X] Daily during daytime hours [] Daily during nighttime hours
[] Two or three times weekly during daytime [] Two or three times weekly during nighttime
[] Weekly, during daytime hours [] Weekly, during nighttime hours
[] Other, explain: _____

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Last revision: October 31, 1996

Oregon Water Resources Department
PUMP TEST FORM COVER SHEET

Well Owner:

Name: Jim Roofener
 Address: Po Box 890
 County: Wash.
 City: Cornelius State: OR Zip: 97113
 Original owner (from well log): Angela Toppano

Well Location:

Township: 1 N (N/S) Range: 4 W (E/W)
 Section: 23 1/4: _____ 1/16: _____ 1/64: _____
 Well depth: 470' Date drilled: 10/20/83
 Owners well no. (if any): _____
 POD ID: _____

Water Right Information:

Application: _____ Permit: _____ Certificate: _____
 Is this well listed on more than one water right? Yes If yes, list additional water rights below:
 Application: _____ Permit: _____ Certificate: _____
 Application: _____ Permit: _____ Certificate: _____

Pump Test:

Test Conducted by: Hillsboro Pump Service Well Owner? Yes
 Company: Hillsboro Pump Service
 Address: 598 Baseline Date of Test: 1/8/08
 City: Cornelius State: OR Zip: 97113
 Daytime phone: 303-357-4217

Method of discharge measurement (see our brochure for acceptable methods): propeller meter
 Method of water-level measurement (pick one or enter other method used): electric sounder
 Length of air line (if used): N/A

Pump type (pick one or enter other method used): Submersible
 Was the pump test conducted during normal use of the well? Yes Note: No

Are you aware of any wells, other than domestic or stock wells, pumping within 1000 feet of the tested well during the test or within 24 hours prior to the test? Yes Note: No
 If yes, give approximate distances to each and approximate pumping rate of each. If possible, indicate if they were turned on or off during the test: No

Is there a lake, stream or other surface water body within 1/4 mile of the tested well? Yes If yes, give approximate distance from the well and approximate elevation difference between the surface water and the well head. Approx. distance: _____ ft Approx. elevation difference: _____ ft

Well elevation is _____ surface water body.

Description of measuring point (e.g. top port of 1 inch port pipe, west side) 1" port

Measuring point distance above land surface 1' feet.

Static water level measurements: (A minimum of three measurements are required in the hour before pumping begins at no less than 20 minutes apart):

Time	Depth to water below meas. point	Depth to water below land surface
<u>1:00</u>	<u>6'</u>	<u>5'</u>
<u>1:20</u>	<u>6'</u>	<u>5'</u>
<u>1:40</u>	<u>6'</u>	<u>5'</u>

Discharge measurements: (A discharge measurement is required at the start of pumping and at least once an hour during the test; additional measurements should be noted on the Pump Test Data Sheet):

Time	Discharge Rate	Discharge Units (e.g. gpm)
<u>2:00</u>	<u>400</u>	<u>gpm</u>
<u>3:00</u>	<u>400</u>	<u>gpm</u>
<u>4:00</u>	<u>400</u>	<u>gpm</u>
<u>5:00</u>	<u>400</u>	<u>gpm</u>
<u>6:00</u>	<u>400</u>	<u>gpm</u>

Time pump turned on: _____ Date: 1/8/08 Time: 2:00
 Time pump turned off: _____ Date: 1/8/08 Time: 6:00
 Total pumping time: 4 hours 0 minutes

Note: Well must be idle for at least 16 hours prior to the test.

Additional forms can be obtained from our web site at: <http://www.wrd.state.or.us>

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PUMP TEST DATA SHEET

Application: _____ Permit: _____ Certificate: _____ Pod Id: _____

All water-level measurements must either be in feet and inches, or feet and decimal fractions.

Drawdown Data

Recovery Data

Date	Time	Time Since Pump Started (minutes)	Depth to Water Below Measuring Pt	Depth to Water Below Land Surface	Comments	Date	Time	Time Since Pump Stopped (minutes)	Depth to Water Below Measuring Pt	Depth to Water Below Land Surface	Comments
1/8/08	1:00	-	6'	-1	Static						
	1:20	-	6'		Static						
	1:40	-	6'		Static						
	2:00	-	6'		400 GPM						
	2:02	2	182'								
	2:04	4	216'								
	2:06	6	330								
	2:08	8	330								
	2:10	10	330								
	2:15	15	330								
	2:20	20	330								
	2:25	25	330								
	2:30	30	330								
	2:45	45	330								
	3:00	60	330'								
	3:15	75	330'								
	3:30	90	330'								
	3:45	105	330'								
	4:00	120	330								
	4:15	135	330'								
	4:30	150	330'								
	4:45	165	330'								
	5:00	180	330'								
	5:15	195	330'								
	5:30	210	330'								
	5:45	225	330'								
	6:00	240	330'								
	6:02	242	180'		Recovery						
	6:04	244	82'		Recovery						
	6:06	246	51'		Recovery						
	6:08	248	32'		Recovery						
	6:10	250	16'		Recovery						
	6:15	255	8'		Recovery						

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WATER WELL REPORT
STATE OF OREGON

WASH
6768

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OCT 25 1983
PLEASE TYPE OR PRINT IN INK
RESOURCES DEPT

State Well No. 1N/4W-23da

State Permit No. _____

(1) OWNER:

Name Angelo Toppano
Address 2211 156th N. E.
City Bellevue, Washington State 98007

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Air Driven Domestic Industrial Municipal
Rotary Mud Dug Irrigation Test Well Other
 Bored Thermal: Withdrawal Reinjection

(4) PROPOSED USE (check):

(5) CASING INSTALLED: Steel Plastic
Threaded Welded
8" Diam. from +1 ft. to 300 ft. Gauge 250
" Diam. from _____ ft. to _____ ft. Gauge _____

LINER INSTALLED:

" Diam. from _____ ft. to _____ ft. Gauge _____

(6) PERFORATIONS:

Perforated? Yes No

Type of perforator used _____
Size of perforations _____ in. by _____ in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

(7) SCREENS:

Well screen installed? Yes No

Manufacturer's Name _____ Model No. _____
Type _____
Diam. _____ Slot Size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot Size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom?
Lift 85 gal./min. with 150 ft. drawdown after 3 hrs.
" 150 " 300
" 160 " 450
Air test _____ gal./min. with drill stem at _____ ft. hrs.
Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow 12 g.p.m. @ = 1'
Temperature of water _____ Depth artesian flow encountered 340 ft.

(9) CONSTRUCTION:

Special standards: Yes No

Well seal—Material used Cement + 5% gel
Well sealed from land surface to 300 ft.
Diameter of well bore to bottom of seal 12 in.
Diameter of well bore below seal 8 in.
Number of sacks of cement used in well seal 25 sacks
How was cement grout placed? 12 sacks pumped to bottom & pressured into annular 270'-300'. 13 sacks tremmed into annular @ 30' back to surface. Muddled clay in between.
Was pump installed? Type _____ HP _____ Depth _____ ft.
Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
Did any strata contain unusable water? Yes No
Type of Water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:

County Washington Driller's well number _____
NE 1/4 SE 1/4 Section 23 T. 1 N. R. 4 W. W.M.
Tax Lot # _____ Lot _____ Blk _____ Subdivision _____
Address at well location: _____

(11) WATER LEVEL: Completed well.

Depth at which water was first found 340 ft.
Static level _____ ft. below land surface. Date _____
Artesian pressure 2 lbs. per square inch. Date 10/19/83

(12) WELL LOG:

Diameter of well below casing 8"

Depth drilled 470 ft. Depth of completed well 470 ft.
Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Topsoil	0	1	
Firm dark brown clay	1	3	
Soft light brown silty clay	3	13	
Soft gray silty clay	13	22	
Soft light brown clay	22	34	
Sticky red-brown clay (decomposed basalt streaks from 55' to 119')	34	119	
Soft decomposed brown basalt (basalt streaks 225' - 256')	119	256	
Firm decomposed brown basalt	256	285	
Firm gray-brown basalt	285	304	
Soft red-brown basalt	304	315	
Firm gray-brown basalt	315	340	
Soft brown basalt	340	349	30 gpm
Firm gray-black basalt	349	367	
Soft red-brown basalt	367	374	30 gpm
Firm gray-brown basalt	374	379	
Soft brown basalt	379	385	30 gpm
Soft gray-brown basalt (occ. firm streaks)	385	434	

Work started 10/13/83 19 Completed 10/18/83 19
Date well drilling machine moved off of well 10/18/83 19

(unbonded) Water Well Constructor Certification (if applicable):

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] _____ Date _____, 19____

Bonded Water Well Constructor Certification:

Bond 390-1672 Issued by: Great American Ins.
(number) _____ Surety Company Name _____
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Name A. M. Janssen Well Drilling Co., Inc.
(Person, firm or corporation) _____ (Type or print)
Address 21075 SW Tualatin Valley Hwy. Aloha, OR
[Signed] A. M. Janssen
Water Well Constructor
Date 10/20/83, 19____

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NOTICE TO WATER WELL CONSTRUCTOR
The original and first copy of this report are to be filed with the

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WATER RESOURCES DEPARTMENT,
SALEM, OREGON 97310
within 30 days from the date of well completion.

SP-45292-090

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SALEM, OREGON



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 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 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: Oak Acres Nursery, Inc.
Mailing Address: 3995 SW Dilley Road
City: Forest Grove State: OR Zip: 97116 Day Phone: 503-969-3339

This application is related to a Measure 37 claim. Yes No

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A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), or used. 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	¼ ¼	Tax Lot #	Plan Designation (e.g. Rural Residential/RR-5)	Water to be:	Proposed Land Use:
1N	4W	24	--	300	EFU	<input checked="" type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	Nursery
						<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input type="checkbox"/> Used	
						<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input type="checkbox"/> Used	
						<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input type="checkbox"/> Used	

List all counties and cities where water is proposed to be diverted, conveyed, or used. Washington County

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B. Description of Proposed Use

Type of application to be filed with the Water Resources Department:

- Permit to Use or Store Water
- Allocation of Conserved Water
- Permit Amendment or Ground Water Registration Modification
- Water-Right Transfer
- Limited Water Use License
- Exchange of Water

Source of water: Reservoir/Pond Ground Water Surface Water (name) _____

Estimated quantity of water needed: 400 cubic feet per second gallons per minute acre-feet

Intended use of water: Irrigation Commercial Industrial Domestic for _____ household(s)
 Municipal Quasi-municipal Instream Other nursery use

Briefly describe: Irrigation and agricultural use on nursery crops

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

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 and provide the requested information

- Land uses to be served by proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): Community Development Code section 201
- Land uses to be served by proposed water uses (including proposed construction) involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.)
If approvals have been obtained but all appeal periods have not ended, check "Being pursued".

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-Use Approval:	
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued

Local governments are invited to express special land-use concerns or make recommendations to the Water Resources Department regarding this proposed use of water below, or on a separate sheet.

Comments:
Farm exemption - any grading or building associated with this activity may require a Land Use Review

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Name: Dyani Valentine Title: Associate Planner
 Signature: Dyani Valentine Phone: 846-3821 Date: 2-1-08
 Government Entity: Washington County

Note to local government representative: Please complete this form or sign the receipt below and return it to the applicant. If you sign the receipt, you will have 30 days from the Water Resources Department's notice date to return the completed Land Use Information Form or WRD may presume the land use associated with the proposed use of water is compatible with local comprehensive plans.

30
6
11
47
200
297

Washington County, Oregon 2006-110814
09/15/2006 03:46:48 PM
D-DW Cnt=1 Str=22 REED
\$30.00 \$8.00 \$11.00 \$750.00 - Total = \$797.00



01011031200601108140060088

I, Richard Hobemicht, Director of Assessment and Taxation and Ex-Officio County Clerk for Washington County, Oregon, do hereby certify that the within instrument of writing was received and recorded in the book of records of said county.
Richard W. Hobemicht, Director of Assessment and Taxation, Ex-Officio County Clerk



AFTER RECORDING RETURN TO:

Jimmie R. Roofener
P.O. Box 890
Cornelius, Oregon 97113

Until a change is requested,
all tax statements will be sent to the following address:

P.O. Box 890
Cornelius, Oregon 97113



WASHINGTON COUNTY
REAL PROPERTY TRANSFER TAX
\$ 750.00 9-15-06
FEE PAID DATE

SPECIAL WARRANTY DEED

Grantor: ANGELO AND JUNE TOPPANO REVOCABLE LIVING TRUST, a Washington ~~Trust~~ *Trust*

Grantees: JIMMIE R. ROOFENER AND DEBORAH J. ROOFNER

Legal Description: Complete legal description on Attachment A

Assessor's Property Tax Map No.: 1n424-0030, Property ID Numbers: R1036961 and
Parcel/Account Number(s): R0771418

THE GRANTOR, ANGELO AND JUNE TOPPANO REVOCABLE LIVING TRUST, a Washington Trust (the "Grantor") for and in consideration of the payment of SEVEN HUNDRED AND FIFTY THOUSAND DOLLARS (\$750,000.00), conveys and specially warrants to JIMMIE R. ROOFENER AND DEBORAH J. ROOFNER, husband and wide (herein collectively the "Grantee"), with those warranty covenants stated below, their entire interest in and to the real property located in Washington County, Oregon as legally described in Attachment A hereto and incorporated herein by this reference. The title to the said real property is conveyed forever subject to: (i) the General Title Exceptions set forth on Attachment B hereto, and (ii) the Special Title Exceptions listed on Attachment C, attached hereto and incorporated herein by this reference.

The Grantor does by these presents expressly limit the covenants of this deed to those herein expressed, and excludes all covenants arising or to arise by statutory or other implication, and does hereby covenant that against all persons whomsoever lawfully claiming

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SALEM, OREGON

Recorded By
First American Title Insurance Company of Oregon
No. 892215 LI

or to claim by, through or under the Grantor, and not otherwise, the Grantor will forever warrant and defend the title to said real property.

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 197.352. THIS INSTRUMENT DOES NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES, TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.930 AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 197.352.

THE PROPERTY DESCRIBED IN THIS INSTRUMENT MAY NOT BE WITHIN A FIRE PROTECTION DISTRICT PROTECTING STRUCTURES. THE PROPERTY IS SUBJECT TO LAND USE LAWS AND REGULATIONS THAT, IN FARM OR FOREST ZONES, MAY NOT AUTHORIZE CONSTRUCTION OR SITING OF A RESIDENCE AND THAT LIMIT LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.930 IN ALL ZONES. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 197.352. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES, THE EXISTENCE OF FIRE PROTECTION FOR STRUCTURES AND THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 197.352.

IN WITNESS WHEREOF, the Grantor hereunto sets its seal and signature this 5 day of September, 2006.

ANGELO AND JUNE TOPPANO
REVOCABLE LIVING TRUST, a Washington
trust

By: Angelo Toppano
Angelo Toppano, Trustee

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STATE OF WASHINGTON)
) ss
COUNTY OF KING)

I certify that I know or have satisfactory evidence that ANGELO TOPPANO is the person who appeared before me, and said person acknowledged that he signed this instrument, on oath stated that he was authorized to execute the instrument as the TRUSTEE on behalf of ANGELO AND JUNE TOPPANO REVOCABLE LIVING TRUST, a Washington trust, and acknowledged it to be the free and voluntary act of said trust for the uses and purposes mentioned in the instrument.

DATED: September 5, 2006

[Signature]
NAME: Jerome D. Carpenter
(Print Name)

Notary Public in and for the State of Washington
Commission Expires: Sept 17, 2008
[Signature]



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**ATTACHMENT A TO SPECIAL WARRANTY DEED
LEGAL DESCRIPTION OF REAL PROPERTY**

The west one-half of the following described property located in Washington County, Oregon, to-wit:

Beginning at a point on the western boundary of the E.C. Johnson Donation Claim in Section 24, Township 1 North, Range 4 West of the Willamette Meridian, said beginning point being 4.70 chains North 1°20' East of the corner of the said E.C. Johnson Donation Claim on the Northern boundary of the Wesley Mulkey Donation Claim, running thence North 1°20' East on Western boundary of said E.C. Johnson Donation Claim 24.86 chains to a post; thence South 89°31' West parallel with Northern boundary of said Section 24, 10 chains to a post; thence North 1°20' East parallel with Western boundary of the E.C. Johnson Donation Claim 10 chains to a stone on Northern boundary of said Section 24; thence South 89°31' West on section line 14.30 chains to a point 6.77 chains North 89°31' East of the northwest corner of said Section 24; thence South 1°38' East 20 chains to a post; thence South 88°50' West 20 chains to a stone; thence South 1°25' East 11.95 chains to a post; thence South 89°50' East parallel with the Northern boundary of the above named Wesley Mulkey Donation Claim 42.52 chains to the place of beginning.

EXCEPTING THEREFROM the following described tract of land:

A part of the northwest one-quarter of the northwest one-quarter of Section 24, Township 1 North, Range 4 West, Willamette Meridian, more particularly described as follows:

Beginning at an iron pipe on the south right of way of County Road No. 442, also known as Kemper Road, said iron pipe being 22.40 feet South and 447.50 feet East of the section corner common to Sections 11, 14, 21 and 24, Township 1 North, Range 4 West, of the Willamette Meridian; and thence running North 89°40' East along the south right of way of said County Road 359.21 feet to an iron pipe; thence South 1°46' 42" East 602.69 feet to an iron pipe; thence South 89°40' West 362.41 feet to an iron pipe; thence North 1°28' 19" West 602.60 feet to the place of beginning.

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ATTACHMENT B TO SPECIAL WARRANTY DEED

GENERAL EXCEPTIONS TO THE TITLE TO THE PROPERTY

1. Any service, installation, connection, maintenance, tap, capacity, late comer, meter, general facilities, construction or other charges, fees or assessment attributable to the period after the Date of Closing for sewer, water, electricity, other utilities;
2. Reservations or exceptions in patents or in acts authorizing the issuance thereof; Indian tribal codes or regulations, Indian treaty or aboriginal rights, including easements or equitable servitudes;
3. Water rights, claims, or title to water;
4. Any governmental law, ordinance or regulations applicable to the Property, including but not limited to any building and zoning laws, ordinances, regulations, restrictions and limitations applicable to the Property, including those which have the effect of restricting, regulating, prohibiting or limiting (i) the occupancy, use, or enjoyment of the Property; (ii) the character, dimensions or location of any improvement now or hereafter erected on the Property; (iii) a separation in ownership or a change in the dimensions or area of the Property or any parcel of which the Property is or was a part; or (iv) environmental protection, or (v) the effect of any violation of such laws, ordinances, restrictions, limitations or governmental regulations;
5. Any governmental police power;
6. Rights of eminent domain and the power of condemnation;
7. Rights of the municipality to make slopes for cuts or fills;
8. Reserved oil, gas, mineral rights and/or mining rights; and
9. Any taxes, penalties, interest or other charges that may become due or payable as the direct or indirect result of the removal of the Property from any special tax status or tax zone.

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ATTACHMENT C TO SPECIAL WARRANTY DEED

SPECIFIC EXCEPTIONS TO THE TITLE TO THE PROPERTY

1. Taxes for the fiscal year 2006-2007 a lien due, but not yet payable.
2. The assessment roll and the tax roll disclose that the within described premises were specially zoned or classified for Farm use. If the land has become or becomes disqualified for such use under the statute, an additional tax or penalty may be imposed.
3. The rights of the public in and to that portion of the premises herein described lying within the limits of streets, roads and highways.
4. Easement, including terms and provisions contained therein:
Recording Information: February 4, 1975 in Book 1099, Page 750
In Favor of: United States of America
For: Water pipeline

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SALEM, OREGON



First American Title Insurance Company of Oregon

Washington (OR)

Prepared For:	Prepared By: Property Information Division 222 SW Columbia St, Suite 400 - Portland, Oregon 97201 Phone: (503) 219-TRIO Fax: (503) 790-7872
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OWNERSHIP INFORMATION

Owner	: Roofener Jimmie R	Ref Parcel Number	: 1N42400 00300
CoOwner	: Roofner Deborah J	T: 01N	R: 04W S: 24 Q:
Site Address	: 5260 NW Thatcher Rd Forest Grove 97116	Parcel Number	: R1036961
Mail Address	: PO Box 890 Cornelius Or 97113	Map Number	:
Telephone	: Owner: Tenant:	County	: Washington (OR)

SALES AND LOAN INFORMATION

Transferred	: 09/15/2006	Loan Amount	: \$550,000
Document #	: 110814 Multi-parcel	Lender	: Private
Sale Price	: \$750,000	Loan Type	: Private
Deed Type	: Special Warranty	Interest Rate	: Fixed
% Owned	: 100	Vesting Type	: Married Persons

PROPERTY DESCRIPTION

Map Page & Grid : 561 F6
 Census : Tract: 333.00 Block: 2
 Subdivision/Plat :
 Neighborhood Cd : 1N46
 Land Use : 4516 Res,Rural,Farm Zone,Improved
 Legal : ACRES 5.73, CODE SPLIT, ZONED
 : FARMLAND-POTENTIAL ADDITIONAL TAX
 : LIABILITY

ASSESSMENT AND TAX INFORMATION

MktLand :
 MktStructure :
 MktOther : \$4,080
 MktTotal : \$4,080
 M50 Assd Total : \$4,080
 % Improved :
 07-08 Taxes : \$57.10
 Exempt Amount :
 Exempt Type :
 Levy Code : 01517
 Millage Rate : 13.9944

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 SALEM, OREGON**

PROPERTY CHARACTERISTICS

Bedrooms	:	Lot Acres	: 5.73	Year Built	:
Bathrooms	:	Lot SqFt	: 249,598	EffYearBlt	:
Heat Method	:	Bsm Fin SqFt	:	Floor Cover	:
Pool	:	Bsm Unfin SqFt	:	Foundation	:
Appliances	:	Bsm Low SqFt	:	Roof Shape	:
Dishwasher	:	Bldg SqFt	:	Roof Matl	:
Hood Fan	:	1st Flr SqFt	:	InteriorMat	:
Deck	:	Upper Flr SqFt	:	Paving Matl	:
Garage Type	:	Porch SqFt	:	Const Type	:
Garage SF	:	Attic SqFt	:	Ext Finish	:
	:	Deck SqFt	:		:

This title information has been furnished, without charge, in conformance with the guidelines approved by the State of Oregon Insurance Commissioner. The Insurance Division cautions intermediaries that this service is designed to benefit the ultimate insureds. Indiscriminate use only benefiting intermediaries will not be permitted. Said services may be discontinued. No liability is assumed for any errors in this report.