



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

Application for a Permit to Store Water in a Reservoir (Alternate Review)

Alternate Review Process (ORS 537.409): You may use this form for any reservoir storing less than 9.2 acre-feet or with a dam less than 10 feet high.

Use a separate form for each reservoir

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, insert "n/a". 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

Landowner: POWERS RANCH CO (BY ALBERT H. POWERS, PRESIDENT)
First Last
 Mailing Address: 5800 40TH AVENUE WEST
SEATTLE WASHINGTON 98199
City State Zip
 Phone: (206) 283 9996 (206) 571 8606 CELL
Home Work Other
 *Fax: (206) 284 8859 *E-Mail Address: GH POWERS @ AOL.COM
 *Optional Information

2. LOCATION AND SOURCE

A. Reservoir Name: QUINCY LAKE

B. Source: Provide the name of the water body or other source from which water will be diverted, and the name of the stream or lake it flows into. Indicate if source is run-off, seepage, or an unnamed stream or spring.

Source: UNNAMED STREAM Tributary to: SOUTH FORK COQUILLE RIVER

C. Reservoir Location

Township (N or S)	Range (E or W)	Section	quarter/quarter	tax lot number
30	12	27		100

D. County of use: COOS COUNTY

E. Dam: Maximum height of dam: 9.9 feet. If excavated, write "excavated" or "0 feet".

F. Quantity: Amount of water to be stored in the reservoir at maximum capacity. List quantity in Acre-Feet: 6.8

App. No. _____	For Department Use Permit No. _____	Date _____
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3. WATER USE

Indicate the proposed use(s) of the stored water. **NOTE: You may wish to consider filing for "Multipurpose use" for your reservoir. Multipurpose use does not limit the types of future uses for the stored water. Multipurpose covers all uses including: stockwater, fish and wildlife, aesthetics, domestic, irrigation, agriculture, fire protection and pollution abatement.** If any use will be out of reservoir use, regardless of the type of storage listed, a secondary application must be filed to appropriate the stored water.

MULTI PURPOSE USE

4. PROPERTY OWNERSHIP

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

Yes (Please check appropriate box below then skip to section 5)

There are no encumbrances

This land is encumbered by easements, rights of way, roads or other encumbrances (please provide a copy of the recorded deed(s))

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 an easement permitting access to lands not under my ownership.

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 irrigation and/or domestic use only (ORS 274.040). (Do not check this box if you described your use as "Multipurpose" in #3 above.)

List the names and mailing addresses of all affected landowners:

N.A. - AFFECTED PROPERTY OWNED BY POWERS RANCH CO.

5. ENVIRONMENTAL IMPACT

A. **Channel:** Is the reservoir in stream or off channel ?

*BOTH WINTER TIME ONLY
STREAM FILLS THE RESERVOIR.
NO SUMMER FLOW.*

B. **Wetland:** Is the project in a wetland? Yes No Don't know

C. **Existing:** Is this an existing reservoir? Yes No

If yes, how long has it been in place? 65 years.

D. **Fish Habitat:** Is there fish habitat upstream of the proposed structure? Yes No Don't know

If yes, how much? _____ miles.

E. **Partnerships:** Have you been working with other agencies? Yes No

Indicate agency, staff and phone numbers of those involved. Also indicate any agencies that are cost sharing in this project.

6. SIGNATURE

I swear that all statements made and information provided in this application are true and correct to the best of my knowledge.

A.H. Powers - Pres. Powers Ranch Co. 7 DEC 2008

Landowner Signature A.H. POWERS

Date

Before you submit your application be sure you have:

- Answered each question completely.
- Included a legible map that includes Township, Range, Section, quarter-quarter and tax lot number.
- The map must meet map requirements to be accepted.
- Included a land use form or receipt stub signed by a local planning official.
- Included a check payable to Oregon Water Resources Department for the appropriate amount.

FEE STRUCTURE: The fee is based on the number of acre-feet proposed to be stored. The base fee is \$80. In addition, there is a fee of \$20 per acre-foot or fraction thereof. Example: 0.3 AF=\$100; 1.5 AF=\$120; 20.0 AF=\$480; 30.0 AF=\$680.



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: POWERS RANCH CO
Mailing Address: 5800 40TH AVE W
City: SEASIDE State: OR Zip: 97138 Day Phone: 206 283 9996

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

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.

Table with 8 columns: Township, Range, Section, 1/4, Tax Lot #, Plan Designation (e.g. Rural Residential/RR-5), Water to be: (Diverted, Conveyed, Used), Proposed Land Use.

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

B. Description of Proposed Use

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

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

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

Estimated quantity of water needed: 6.8 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 STOCK WATER

Briefly describe: MULTI-PURPOSE USE

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.

Receipt for Request for Land Use Information

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

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WATER RESOURCES DEPT
SALEM, OREGON

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): 4.9.000 (K)

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:	
		Obtained Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		Obtained Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		Obtained Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		Obtained Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		Obtained Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		Obtained 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.

The Reservoir is noted on Planning historic zoning maps. Therefore, it is an established use pre-dating zoning, the zoning ordinance & Comprehensive Plan.

The Planning Dept. has no objections to the continuing use of this Reservoir.

Name: Debby Darling Title: Planner I
 Signature: Debby Darling Phone: 5413963121 Date: 12/19/08
 Government Entity: Coss County X210

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.

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Receipt for Request for Land Use Information

Applicant name: _____ **WATER RESOURCES DEPT
SALEM, OREGON**

City or County: _____ Staff contact: _____

Signature: _____ Phone: _____ Date: _____