2M-212

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## **Oregon Water Resources Department**

Municipal Reclaimed Water Registration Form

A water use permit may not be required if the water being used is reclaimed water as defined in ORS 537.131 and the reclaimed water use is both authorized by the Oregon Department of Environmental Quality (DEQ) and registered with Oregon Water Resources Department (WRD)(ORS 537.132). Currently there is no fee for registering.

Complete and send this Registration Form to the DEO permit writer managing the wastewater treatment facility discharge permit. DEQ will review and sign this Registration Form prior to sending it on to WRD in Salem. A response letter will be sent by WRD to all parties within 60 days of receipt.

Instructions are available to guide you. If y ask for the "Water Reuse Coordinator" or a lnsert "N/A" if the requested information d	contact the local water	master in your co		-
1. Name of "Registrant". Who will <u>us</u>		ater?		
Name of Reclaimed Water User: Deschutes	Basin Farms			
County where reclaimed water use will occu	r: Jefferson			w
Mail Address: 1921 NE Cherry Lane	Madras	OR	97741	
Street/P.O. Box	City	State	Zip	
Daytime Telephone: (541) 475-2627	E-mail: gre	g.williams@cosi	.ag	
Landowner Name: City of Madras (Jeffrey	e the landowner's nam Hurd, Public Works		ormation.	
Mail Address: 125 SW "E" Street	Madras	OR	97741	
Street/P.O. Box Daytime Telephone: (541) 325-0309	City E-mail: jhu	State d@ci.madras.or	Zip :.us	
3. Are there existing water rights on the YES (provide information below)	<del></del>	re the use will	occur? RE	CEIVED BY OWI
Application No. S24921 and S0083	· <del></del>	S25921		APR 2 4 2017
Certificate No. 72279 and 72281 De	cree vol. & pg			SALEM, OR
Will the reclaimed water be used <u>instead of</u> exist use of the existing water rights? Supplement (	ting water rights OR use Recycled water use	ed to <u>supplement</u> the d to extent avail	e continued able)	y

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4. Has DEQ issued a Municipal Wast authorizing the use of reclaimed v		•	SALEM, OR rge Permit
YES NPDES Permit No	or WPCF	Permit No. 1017	39
Permit Effective Date: 11-16-2006	Permit Expiration D	ate: 10-31-2016	· · · · · · · · · · · · · · · · · · ·
DEQ Region: (Check one) Northwest R	egion Eastern Reg	ion Western	Region
[	as submitted to DEQ,		
NO Permit application he	as not been submitted t	to DEQ.	
5. Who is treating and supplying the	reclaimed water to	the user?	
Name of Supplier: City of Madras	Telephone N	o. (541) 325-031	
Treatment Facility Name: North WWTP		<sub>o.</sub> (541) 948-695	
Mail Address: 800 SE Grizzly Road, Street/P.O. Box	Madras,	OR	97741
Street/P.O. Box	City	State	Zip
6. Which water provider supplies pot that produces the sewage entering  Municipal Water Provider: DVWD & City of  Source(s) of Municipal Water; Opal Spring	the treatment faci of Madras Tele	llity? ephone No. (541)	475-3849
(stream	n name, groundwater, and	or reservoir name)	
7. Will the use of reclaimed water occupondaries of the potable municip Question 6?			
■ INSIDE □ OUTSIDE			
8. What is the length in years of the a water user and the reclaimed wate		between the re	eclaimed
Describe any conditions in the agreemen	nt that limit use of the r	reclaimed water.	0
Water accumulation and ponding munear municipal airport.	ist be prevented to a	void wildlife attr	action G

(Include type of construction of diversion works/pump capacity, length and dimensions of supply disches/ pipelines)

 Please describe the transmission system that delivers reclaimed water from the wastewater treatment facility to the place of reclaimed water use.
 Recycled Water Storage Pond, Effluent Pumps, Effluent Force Main, Control

Valves, and Spray Irrigation Systems.

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Irrigation	lands, industrial, cooling, aquifer storage & recovery, etc.)	SALEM, OR
· , <del>-</del>	What type of crop? Wheat, alfalfa & carrots	
errigation Total Acres:	what type of crop? (hay, pasture, golf course, woo	od fiber, etc.)
What is the irrigation applicat	ion system? wheel lines and drip	•
	(flood, center pivot, wheel line, drip, mic	ro-sprinklers)
How much Reclaimed Water w	ill be used? Varies (700 gpm max.)	
	(cubic feet per second, OR gallons per m	•
Date use began or will begin:	Period of use (month/day): from April	to October
1. What are the water	user's motivations to use reclaimed water?	
My existing water rig	ghts are "junior" and not always reliable.	
Another water source	e is available, but reclaimed water is less expensive	i.
Reclaimed water is the	ne only source available and enables the use listed i	in Question 10.
Reclaimed water allo	ws a WRD transfer of existing water rights to a dif	ferent location.
Reclaimed water use	reduces demand on the local municipal water supp	ly.
To assist the treatment	nt facility in meeting DEQ regulatory permit requir	rements.
To recharge the aquit	er or store water in the aquifer for future recovery.	
Other (describe):	•	
,		
2. Describe the historic	reclaimed water disposal method.	
A) Into which stream v	was the reclaimed water discharged? None	
B) Has the reclaimed	vater been discharged into the stream for 5 or more yea	ırs?
YES	NO .	
	ed wastewater historically enter the stream?	
	er discharged to a stream or other surface water the and Section, or distance from landmark, or river mile, or L	
-	ate in gpm or cfs) of reclaimed water proposed for use	RECEIVED BY OWR
·	nore than 50% of the total average annual flow of the si	tream?
YES	NO UNKNOWN	APR 2 4 2017
Source of information u	sed to answer this?	SALEM, OR
3. Is the required map	attached showing the reclaimed water trans	smission
system and place of		
The Registration Form See map requirement ex	is not complete without an adequate map.	

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## 14. MAP REQUIREMENTS:

SALEM, OR

This registration must be accompanied by a map, or maps, to show the location of the wastewater treatment facility, location of reclaimed water transmission system (pipelines, canals, etc.) and the place of reclaimed water use. Features of the map(s) should include the following:

- A north arrow.
- Drawn to scale at not less than 4" = 1 mile, with the scale identified.
- Township, Range, Section, Quarter-Quarters, and tax lot number(s).
- Place of use shown by Quarter-Quarter section with shading or diagonal lines.
- Acres, if land application, per Quarter-Quarter section (approximate if not certain).
- · Location of main canals or pipelines to and within the reclaimed water use area.
- Streams and roads identified if they cross through the map.
- Other obvious features that would help someone in the field locate the place of use.
- A legend.

15. ADDITIONAL COMMENTS: Provide additional information here or attach additional pages.

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16. Signatures of Registrant and Reclaimed Water Supplier:

Salem, or

I/We certify that the information provided in this Registration Form is an accurate representation of the proposed reclaimed water use to the best of my knowledge:

Registrant Printed Name: Greg Williams	Title: Outer PBF
Registrant Signature:	Date: Z-9-/7
Supplier Printed Name: Jeff Hurd	Title: Public Works Director
Supplier Signature:	Date: 2 3 7
	V

NOTE: Once completed and signed, keep a copy and <u>send this form to the DEO permit writer</u> responsible for the wastewater treatment facility permit. DEQ will sign and forward the form to WRD in Salem. A response letter will be sent by WRD to all parties within 60 days.

<sup>\*</sup>A map showing the wastewater treatment facility, transmission system, and place of use at a scale of 4" = >1 mile is fine only if a second map is provided showing the place of use at not less than 4" = 1 mile.

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			ILOLIVES S. C	
17. Signature of DEQ Water Quality Mana	ager:	-	0 = 0017	
Date registration form received at DEQ:			FEB 2 7 2017	•
Pursuant to ORS 537.132 DEQ has:			SALEM, OR	
a) Authorized the use of reclaimed water water") as evidenced by the NPDES or	•		=	
Permit Number: DEQ File N	vumber:			
Printed DEQ Permit Writer's Name:				
Mail Address: Street P.O. Box			Zip	
Telephone:E-mail;	-			
reclaimed water shall not have a signifi		•	wituite.	
ODFW contact phone number:		•		
c) Determined the use of reclaimed water the receiving stream.  The reclaimed water is (e.g. too warm for salmon)	nids):			
I certify the provisions of ORS 537.132(1)(a)(b) a	and (c) for this a	•	•	
DEQ Water Quality Manager Signature			<del></del>	,
Don Butcher				
DEQ Water Quality Manager's printed name	<del></del>	ŧ		
Once signed by DEQ, this completed form is to	o be sent to:		RECEIVED BY	OWRD
Oregon Water Resources Department C/O Water Reuse Coordinator 725 Summer St. NE, Suite A			APR 2 4 20	17
Salem, OR 97301-1266			SALEM, O	R

SALEM, OR