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Oregon Water Resources Department

SALEM, OR

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 <u>and</u> the reclaimed water use is both authorized by the Oregon Department of Environmental Quality (DEQ) <u>and registered</u> 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 you need assistance, please call 503-986-0900 and ask for the "Water Reuse Coordinator" or contact the local watermaster in your county Insert "N/A" if the requested information does not apply to your situation.

1. Name of "Registrant". Who will <u>use</u>	e the reclaimed wa	iter?	FEB 27	2017
Name of Reclaimed Water User: Gail Woodw	vorth		SALEM,	OR.
County where reclaimed water use will occur	Jefferson			
Mail Address: 1057 SE McTaggart Rd.	Madras	OR	97741	
Street/P.O. Box	City	State	Zip	
Daytime Telephone: (541) 475-2264	E-mail:			
2. Does the reclaimed water user own YES NO If no, provide Landowner Name: City of Madras (Jeffrey H	the landowner's name	e and contact info		
Mail Address: 125 SW "E" Street	Madras	OR	 97741	
Street/P.O. Box	City	State	Zip	
Daytime Telephone: (541) 325-0309	E-mail: jhurd	d@ci.madras.or	.us	
3. Are there existing water rights on the YES (provide information below)		e the use will o	occur?	
Application No. S24921, S30083 Per	_{mit No.} S23196, S25	5921	······································	
Certificate No. 72279, 72281Decr	ree vol. & pg. Vol. 91,	pg. 331		
Will the reclaimed water be used <u>instead of</u> existinuse of the existing water rights? Supplement (F				

4	Has DEQ issued a Municipal Wathorizing the use of reclaime		-	ge Permit	
	YES NPDES Permit No	or WPCF I	Permit No. 1017	39	
P	ermit Effective Date: 11-16-2006	Permit Expiration Da	te: 10-31-2016		_
D	ermit Effective Date: 11-16-2006 EQ Region: (Check one) Northwes	nt Region Eastern Regio	on Western	Region	
	NO Permit application	n was submitted to DEQ, b	ut not yet issued.		
	NO Permit application	n has not been submitted to	DEQ.		
5.	Who is treating and supplying t	he reclaimed water to	the user?		
No	ame of Supplier: City of Madras	Telephone No	(541) 325-031	3	
Tr	eatment Facility Name: South WWTF	Telephone No	(541) 948-695	2	
M	nil Address: 800 SE Grizzly Road, Street/P.O. Box	Madras,	OR	97741	
	Street/P.O. Box	City	State	Zip	
Mi	Which water provider supplies per that produces the sewage enter unicipal Water Provider: DVWD urce(s) of Municipal Water: Opal Springer	ing the treatment facil Telep	_		
50		ream name, groundwater, and/o	r reservoir name)		
7.	Will the use of reclaimed water of boundaries of the potable municular Question 6?	occur inside or outside cipal water provider id	e the water ser entified above	HECEIVEI In	D BY OWRD
				FEB 2	7 2017
	INSIDE OUTSIDE			SALE	M, OR
8.	What is the length in years of the water user and the reclaimed water	•	between the re	claimed	
	Describe any conditions in the agreen	nent that limit use of the re	eclaimed water.	RECEIV	ED BY OWR
				API	R 2 4 2017
	Please describe the transmissio the wastewater treatment facility Effluent Pumps, Effluent Force Ma Valves, and Spray Irrigation Syste	y to the place of reclain ain, Recycled Water Storms.	med water use rage Pond, Cor	ntrol	LEM, OR
(Inc	lude type of construction of diversion works/pa	ump capacity, length and dimen	sions of supply ditc	hes/ pipelines)	

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10. What is the Intended Use(s) of Reclaimed Water?	SALEM, OR
Irrigation (irrigation, aquifer recharge, wetlands, industrial, cooling, aquifer storage & recovery, etc.)	
Irrigation Total Acres: 76 What type of crop? alfalfa (potentially other crops) (hay, pasture, golf course, wood fiber, etc.))
What is the irrigation application system? wheel lines	
(flood, center pivot, wheel line, drip, micro-sprinklers	s)
How much Reclaimed Water will be used? Varies from 100 to 700 gpm	
(cubic feet per second, OR gallons per minute)	
Date use began or will begin: May 2003 Period of use (month/day): from April to Oct	ober
11. What are the water user's motivations to use reclaimed water?	
My existing water rights are "junior" and not always reliable.	
Another water source is available, but reclaimed water is less expensive.	
Reclaimed water is the only source available and enables the use listed in Question	
Reclaimed water allows a WRD transfer of existing water rights to a different local	ENED BY OWRD
Reclaimed water use reduces demand on the local municipal water supply.	
To assist the treatment facility in meeting DEQ regulatory permit requirements.	APR 2 4 2017
To recharge the aquifer or store water in the aquifer for future recovery.	MAI POLA
Other (describe):	SALEM, OR
	EIVED BY OWRE
12. Describe the historic reclaimed water disposal method.	
A) Into which stream was the reclaimed water discharged? None	FEB 2 7 2017
B) Has the reclaimed water been discharged into the stream for 5 or more years? YES NO	SALEM, OR
C) Where did the treated wastewater historically enter the stream? N/A - City has never discharged to a stream or other surface water body. (Township, Range and Section, or distance from landmark, or river mile, or Lat/Long)	
D) Does the amount (rate in gpm or cfs) of reclaimed water proposed for use under this registration represent more than 50% of the total average annual flow of the stream?	
YES NO UNKNOWN	
Source of information used to answer this?	
3. Is the required map attached showing the reclaimed water transmission system and place of use? YES NO (If No, please prepare and attac	
The Registration Form is not complete without an adequate map. See map requirement explanation on page 4.	

14. MAP REQUIREMENTS:

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: Gail Woodworth	Title:
Registrant Signature: Land Worker A	Date: 15 Feb 17
Supplier Printed Name: Jeff Hurd	Title: Public Works Director
Supplier Signature:	Date: 2/16/17-
	1

NOTE: Once completed and signed, keep a copy and send this form to the DEO permit writer 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.

^{*}A map showing the wastewater treatment facility, transmission system, and place of use at a scale of 4'' = I mile is fine only if a second map is provided showing the place of use at not less than 4'' = I mile.

17. Signature of DEQ Wa	ater Quality Mana	ager:	-		
Date registration form red	eived at DEQ:		_		2
Pursuant to ORS 537.132 DE	Q has:				
a) Authorized the use of water") as evidenced			DEQ regulations as " t issued and described		
Permit Number:	DEQ File I	Vumber:			
Printed DEQ Permit Writer's	Name:				
Mail Address: Streev/P.C					T.
			State	Zip	
Telephone:	E-mail:	·			
b) Consulted with State reclaimed water sha	•		e and determined this impact on fish or wildl		
ODFW contact name:					
ODFW contact phone numbe	r:	···			
c) Determined the use of the receiving stream.		is intended to	improve the water qua	ality of	
The reclaimed water is (e.g. t	oo warm for salmor	nids):			
I certify the provisions of OR	~		application are satisfied	RECEIV	VED BY OWRI R 2 4 2017
DEQ Water Quality Manager			,	AF	K 2 4 2011
Don Butch				S	ALEM, OR
DEQ Water Quality Manager	's printed name				
Once signed by DEQ, this co	ompleted form is to	o be sent to:	RECEIVED	BY OWR	D
Oregon Water Resour C/O Water Reuse Coo 725 Summer St. NE, S	rdinator		FEB 2	7 2017	
723 Summer St. NE, S			SALE	M, OF	

Salem, OR 97301-1266