

Application for a Permit to Use Ground Water



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

SECTION 1: APPLICANT INFORMATION AND SIGNATURE

Applicant Information

NAME		PHONE (HM)	
PHONE (WK)	CELL	FAX	
ADDRESS			
CITY	STATE	ZIP	E-MAIL*

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Organization Information

NAME Blue Mountain Conservative Baptist Association (Camp Elkanah) co: Tom Selman		PHONE 541-963-5050	FAX SALEM, OR
ADDRESS 49504 Hwy 244 (P.O. Box 150)		CELL 541-963-5050	
CITY La Grande	STATE OR	ZIP 97850	E-MAIL* Tom@CampElkanah.com

Agent Information – The agent is authorized to represent the applicant in all matters relating to this application.

AGENT / BUSINESS NAME William Porfily		PHONE (541) 449-1327	FAX (541) 449-1327
ADDRESS P.O. Box 643		CELL (541) 561-7259	
CITY Stanfield	STATE OR	ZIP 97875	E-MAIL* wporfily@gmail.com

Note: Attach multiple copies as needed

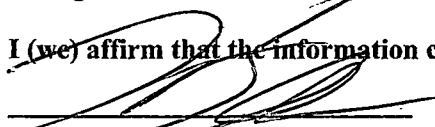
* By providing an e-mail address, consent is given to receive all correspondence from the department electronically. (paper copies of the final order documents will also be mailed.)

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.
- I cannot use water legally until the Water Resources Department issues a permit.
- Oregon law requires that a permit be issued before beginning construction of any proposed well, unless the use is exempt. Acceptance of this application does not guarantee a permit will be issued.
- 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 cancelled.
- The water use must be compatible with local comprehensive land-use plans.
- Even if the Department issues a permit, I may have to stop using water to allow senior water-right holders to get water to which they are entitled.

I (we) affirm that the information contained in this application is true and accurate.




 Applicant Signature

Tom Selman Director
 Print Name and title if applicable *of Camp Elkanah*

5/18/17
 Date

Applicant Signature

Print Name and title if applicable

Date

For Department Use		
App. No. G-18523	Permit No. _____	Date _____

SECTION 2: PROPERTY OWNERSHIP

Please indicate if you own all the lands associated with the project from which the water is to be diverted, conveyed, and used.

Yes

- There are no encumbrances.
- This land is encumbered by easements, rights of way, roads or other encumbrances.

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No

- 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 irrigation and/or domestic use only (ORS 274.040).
- Water is to be diverted, conveyed, and/or used only on federal lands.

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List the names and mailing addresses of all affected landowners (*attach additional sheets if necessary*).

N/A

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.

SECTION 3: WELL DEVELOPMENT

WELL NO.	NAME OF NEAREST SURFACE WATER	IF LESS THAN 1 MILE:	
		DISTANCE TO NEAREST SURFACE WATER	ELEVATION CHANGE BETWEEN NEAREST SURFACE WATER AND WELL HEAD
The Well	Meadow Creek	320 ft	15 ft

Please provide any information for your existing or proposed well(s) that you believe may be helpful in evaluating your application. For existing wells, describe any previous alteration(s) or repair(s) not documented in the attached well log or other materials (*attach additional sheets if necessary*).

See Attached Well Log UNIO 2510

528823

SECTION 3: WELL DEVELOPMENT, CONTINUED

Total maximum rate requested: **25 gpm** (each well will be evaluated at the maximum rate unless you indicate well-specific rates and annual volumes in the table below).

The table below must be completed for each source to be evaluated or the application will be returned. If this is an existing well, the information may be found on the applicable well log. *(If a well log is available, please submit it in addition to completing the table.)* If this is a proposed well, or well-modification, consider consulting with a licensed well driller, geologist, or certified water right examiner to obtain the necessary information.

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PROPOSED USE

OWNER'S WELL NAME OR NO.	PROPOSED	EXISTING	WELL ID (WELL TAG) NO.* OR WELL LOG ID**	FLOWING ARTESIAN	CASING DIAMETER	CASING INTERVALS (IN FEET)	PERFORATED OR SCREENED INTERVALS (IN FEET)	SEAL INTERVALS (IN FEET)	MOST RECENT STATIC WATER LEVEL & DATE (IN FEET)	SOURCE AQUIFER***	TOTAL WELL DEPTH	WELL-SPECIFIC RATE (GPM)	ANNUAL VOLUME (ACRE-FEET)
The Well	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Unio 2510	<input type="checkbox"/>					6 ft	Basalt		25 gpm	19.0
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>	Revised 2/1/2012	<input type="checkbox"/>			Ground Water/5				WR		

6-18-2017

- * Licensed drillers are required to attach a Department-supplied Well Tag, with a unique Well ID or Well Tag Number to all new or newly altered wells. Landowners can request a Well ID for existing wells that do not have one. The Well ID is intended to serve as a unique identification number for each well.
- ** A well log ID (e.g. MARI 1234) is assigned by the Department to each log in the agency's well log database. A separate well log is required for each subsequent alteration of the well.
- *** Source aquifer examples: Troutdale Formation, gravel and sand, alluvium, basalt, bedrock, etc.

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SECTION 4: WATER USE

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
Commercial use involved in Operating a Church & Youth Ministry Camp including the Irrigation of 3 acre	Year Around	19 ac-ft

Exempt Uses: Please note that 15,000 gallons per day for single or group **domestic** purposes and 5,000 gallons per day for a single **industrial or commercial** purpose are exempt from permitting requirements.

For irrigation use only: N/A

Please indicate the number of primary and supplemental acres to be irrigated (*must match map*).

Primary: _____ Acres Supplemental: _____ Acres

List the Permit or Certificate number of the underlying primary water right(s): _____

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

- If the use is **municipal or quasi-municipal**, attach **Form M**
- If the use is **domestic**, indicate the number of households: _____
If the use is **mining**, describe what is being mined and the method(s) of extraction: _____

SECTION 5: WATER MANAGEMENT

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A. Diversion and Conveyance

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

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Pump (give horsepower and type): 2 hp Submersible Pump

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Other means (describe): _____

Provide a description of the proposed means of diversion, construction, and operation of the diversion works and conveyance of water. The 2 hp submersible pump delivers water to a 10,000 gallon storage tank. A 1 hp centrifugal pump, pumps water from the storage tank to two 100 gallon pressure tanks. From the pressure tanks water is delivered to the facilities (showers, bathrooms, dining hall-kitchen, 4 cabin and irrigation system) that make up the church camp.

B. Application Method

What equipment and method of application will be used? (e.g., drip, wheel line, high-pressure sprinkler) An operating system for irrigation is planned to operate only at night when camp activity are at a minimum

C. Conservation

Please describe why the amount of water requested is needed and measures you propose to: prevent waste; measure the amount of water diverted; prevent damage to aquatic life and riparian habitat; prevent the discharge of contaminated water to a surface stream; prevent adverse impact to public uses of affected surface waters.

With the 10,000 gallons storage tank we are able to store water for the time when the activities of the camp would normally require more water than the well and the submersible pump can provide can provide. This system help us from wasting water

SECTION 6: STORAGE OF GROUND WATER IN A RESERVOIR:

If you would like to store ground water in a reservoir, complete this section (*if more than one reservoir, reproduce this section for each reservoir*).N/A

Reservoir name: _____ Acreage inundated by reservoir: _____

Use(s): _____

Volume of Reservoir (acre-feet): _____ Dam height (feet, if excavated, write "zero"): _____

Note: If the dam height is greater than or equal to 10.0' above land surface AND the reservoir will store 9.2 acre feet or more, engineered plans and specifications must be approved prior to storage of water.

SECTION 7: USE OF STORED GROUND WATER FROM THE RESERVOIR

If you would like to use stored ground water from the reservoir, complete this section (*if more than one reservoir, reproduce this section for each reservoir*).

Annual volume (acre-feet): _____

USE OF STORED GROUND WATER	PERIOD OF USE

SECTION 8: PROJECT SCHEDULE

Date construction will begin: Started

Date construction will be completed: October 1st 2022

Date beneficial water use will begin: October 1st 2022

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SECTION 9: WITHIN A DISTRICT

Check here if the point of diversion or place of use are located within or served by an irrigation or other water district.

Irrigation District Name	Address	
City	State	Zip

SECTION 10: REMARKS

Use this space to clarify any information you have provided in the application (*attach additional sheets if necessary*).

STATE OF OREGON
WATER WELL REPORT
 (as required by ORS 537.765)

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JAN - 4 1995

(START CARD #

45/35E/8
 30080

UN10
 2510

WATER RESOURCES DEPT.

(1) OWNER: Name Camp EIKANDH
 Address PO Box 150
 City LAGrade State OR Zip 97850

LOCATION OF WELL by legal description:
 County Union Latitude _____ Longitude _____
 Township 43 N or S. Range 35 E E or W. WM. _____
 Section 8 _____ 1/4 _____ 1/4 _____
 Tax Lot 1700 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 49504 Hwy 249 LAGrade OR 97850

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable
 Other _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other _____

(10) STATIC WATER LEVEL:
6 ft. below land surface. Date 12-27-94
 Artesian pressure _____ lb. per square inch. Date _____

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 200 ft.
 Explosives used Yes No Type _____ Amount _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 14

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	
10	0 30	Barite	0 30	30 bags
8	30 185			
6	185 200			

From	To	Estimated Flow Rate	SWL
14	14	1	6
145	200	30	

How was seal placed: Method A B C D E
 Other Powerdrill
 Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(12) WELL LOG:
 Ground elevation _____

(6) CASING/LINER:

Casing/Liner	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing:	6	+2	185	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Material	From	To	SWL
Soil + sand	0	6	
Chert rock	6	14	13
Basalt Rock	14	25	
Solid Rock	25	145	6
Broken Rock	145	200	6

(7) PERFORATIONS/SCREENS:
 Perforations Method air + saw
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
140	180	5	200	6		<input checked="" type="checkbox"/>	<input type="checkbox"/>
180	200	15	20		4	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
30		190	1 hr.

Date started 12-19-94 Completed 12-27-94
 (unbonded) Water Well Constructor Certification:
 I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Temperature of Water 50 Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom _____
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: _____

Signed Carl P. Itch WWC Number 494 Date 12-27-94
 (bonded) Water Well Constructor Certification:
 I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief.

G-18528

EXHIBIT A

IN TOWNSHIP 4 SOUTH, RANGE 35 EAST OF THE WILLAMETTE MERIDIAN

Section 8: The west half of northeast quarter, the southeast quarter of northeast quarter and the northeast quarter of southeast quarter.

Section 9: The southwest quarter of northwest quarter.

EXCEPTING THEREFROM parcels of land described in deed book 133, page 571, records of Union County, Oregon, conveyed to State of Oregon, by and through its State Highway Commission.

ALSO EXCEPTING therefrom a parcel of land conveyed to Blue Mountain Conservative Baptists Association, deed book 138 page 199, in the southwest quarter of the northeast quarter, and the southeast quarter of the northeast quarter of Section 8, Township 4 South, Range 35 East of the Willamette Meridian, described as follows:

Beginning at a point South 51°30' East 1358.3 feet and South 3°40' East 487.2 feet of the quarter corner common to Sections 5 and 8 in Township 4 South, Range 35 East of the Willamette Meridian;

From this established point South 41°05' East 223.6 feet; thence South 29°18' East 305.5 feet; thence South 29°22' East 434.6 feet; thence South 50°26' East 259.2 feet; thence South 50°31' East 399.9 feet; thence South 67°44' West 491.5 feet; thence North 48°06' West 462.8 feet; thence North 32°01' West 421.5 feet; thence North 7°48' West 679.5 feet; thence North 89°10' East 123.5 feet to the place of beginning.

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SALEM, OR

INDEXED

Rec. No. _____ Pd. \$ _____
 STATE OF OREGON } ss
 County of Union }
 I certify that the within instrument was
 received for recording on the 28
 day of April 19 86
 at 4:55 A.M./P.M., and was
 recorded on microfilm no. 118641
 Record of Deeds/Mortgages of said County
 R. NELSON CLERK, UNION COUNTY, OREGON County Clerk
 By [Signature] Deputy

WARRANTY DEED

KNOW ALL MEN BY THESE PRESENTS, that BOISE CASCADE CORPORATION, a Delaware corporation ("Grantor"), for the consideration hereinafter stated, to Grantor paid by BLUE MOUNTAIN CONSERVATIVE BAPTIST ASSOCIATION, an Oregon nonprofit corporation ("Grantee"), does hereby grant, bargain, sell and convey unto the said Grantee and Grantee's heirs, successors and assigns, that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or appertaining, situated in the county of Union and state of Oregon, described as follows, to-wit:

Refer to attached legal description on Exhibit A.

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 have and to hold the same unto the said Grantee and Grantee's heirs, successors and assigns, that grantor is lawfully seized in fee simple of the above granted premises, free from all encumbrances except for easements, restrictions and reservations of record and those apparent upon the land, if any, as of the date of this Deed, and that Grantor will warrant and forever defend the said premises and every part and parcel thereof against the lawful claims and demands of all persons whomsoever, except those claiming under the above-described encumbrances.

The true and actual consideration for this conveyance is \$22,000.00 together with other property conveyed by Grantee to Grantor in Ferry County, Washington, and together with a charitable gift by Grantor to Grantee, which is a part of the consideration.

In construing this Deed and where the context so requires, the singular includes the plural and all grammatical changes shall be implied to make the provisions hereof apply equally to corporations and to individuals.

IN WITNESS WHEREOF, the Grantor has executed this instrument this 25th day of April, 1986. It has caused its name to be signed and seal affixed by its officers, duly authorized thereto by order of its board of directors.

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BOISE CASCADE CORPORATION

MAY 30 2017

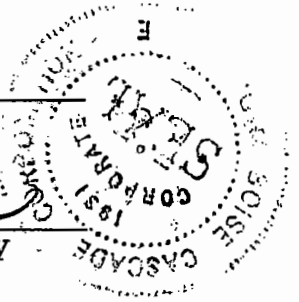
SALEM, OR

BY *[Signature]*

Vice President

BY *[Signature]*

Assistant Secretary



STATE OF IDAHO)
) ss.
COUNTY OF ADA)

April 25th, 1986, personally appeared J. R. Ayre and Donald Mitchell, who, being duly sworn, each for himself and not one for the other, did say that the former is the Vice President and the latter is the Assistant Secretary of Boise Cascade Corporation, a corporation, and that the seal affixed to the foregoing was signed and sealed in behalf of said corporation by authority of its board of directors; and each of them acknowledged said instrument to be its voluntary act and deed. Before me:

[Signature]
Notary Public for Idaho
My Commission expires 4/29/91



Minimum Requirements Checklist

Minimum Requirements (OAR 690-310-0040, OAR 690-310-0050 & ORS 537.615)

Include this checklist with the application

Check that each of the following items is included. The application will be returned if all required items are not included. If you have questions, please call the Water Rights Customer Service Group at (503) 986-0900.

- SECTION 1: applicant information and signature
- SECTION 2: property ownership
- SECTION 3: well development
- SECTION 4: water use
- SECTION 5: water management
- SECTION 6: storage of groundwater in a reservoir
- SECTION 7: use of stored groundwater from the reservoir
- SECTION 8: project schedule
- SECTION 9: within a district
- SECTION 10: remarks

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Attachments:

- Land Use Information Form with approval and signature (*must be an original*) or signed receipt
- 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. Example: A copy of the deed, land sales contract or title insurance policy.
- Fees - Amount enclosed: **\$1450.00**
See the Department's Fee Schedule at www.oregon.gov/owrd or call (503) 986-0900.

Provide a map and check that each of the following items is included:

- Permanent quality and drawn in ink
- Even map scale not less than 4" = 1 mile (example: 1" = 400 ft, 1" = 1320 ft, etc.)
- North Directional Symbol
- Township, Range, Section, Quarter/Quarter, Tax Lots
- Reference corner on map
- Location of each well, and/or dam if applicable, by reference to a recognized public land survey corner (distances north/south and east/west). Each well must be identified by a unique name and/or number.
- Indicate the area of use by Quarter/Quarter and tax lot clearly identified
- Number of acres per Quarter/Quarter and hatching to indicate area of use if for primary irrigation, supplemental irrigation, or nursery
- Location of main canals, ditches, pipelines or flumes (if well is outside of the area of use)
- Other _____

Land Use Information Form



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

Applicant: **Blue Mountain Conservative Baptist Association (Camp Elkanah) co: Tom Selman**

First

Last

Mailing Address: **49504 HWY 244 (P.O. BOX 150)**

LA GRANDE
City

OR
State

97850 Daytime Phone: **541-963-5050**
Zip

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. 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:
4 S	35 E	8	NE ¼	1700	Rural center	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Church Camp

List all counties and cities where water is proposed to be diverted, conveyed, and/or used or developed:

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

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

Estimated quantity of water needed: 25 gpm 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 _____

Briefly describe:

We are making application for a water right permit to provide water for the operation of our existing church camp form our well

Note to applicant: If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt at the bottom of the next page and include it with the application filed with the Water Resources Department. See bottom of Page 3. →

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 landuse 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 the proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): _____.

Land uses to be served by the 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:	
<i>Ministerial Decision</i>	<i>UCZPSO Sec. 24.01</i>	<input checked="" 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.

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SALEM, OR

Name: Stacy Warren Title: Associate Planner
 Signature: *Stacy Warren* Phone: 541-963-1014 Date: May 22, 2017
 Government Entity: Union County Planning Dept.

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.

Receipt for Request for Land Use Information

Applicant name: _____
 City or County: _____ Staff contact: _____