

Application for a Permit to Use Groundwater



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

Water-Use Permit Application Processing

1. Completeness Determination

The Department evaluates whether the application and accompanying map contain all of the information required under OAR 690-310-0040 and OAR 690-310-0050 (www.oregon.gov/owrd/law). The Department also determines whether the proposed use is prohibited by statute. If the Department determines that the application is incomplete, all fees have not been paid, or the use is prohibited by statute, the application and all fees submitted are returned to the applicant.

2. Initial Review

The Department reviews the application to determine whether water is available during the period requested, whether the proposed use is restricted or limited by rule or statute, and whether other issues may preclude approval of or restrict the proposed use. An Initial Review (IR) containing preliminary determinations is mailed to the applicant. The applicant has 14 days from the mailing date to withdraw the application from further processing and receive a refund of all fees paid minus \$260. The applicant may put the application on hold for up to 180 days and may request additional time if necessary.

3. Public Notice

Within 7 days of the mailing of the initial review, the Department gives public notice of the application in the weekly notice published by the Department at www.oregon.gov/owrd. The public comment period is 30 days from publication in the weekly notice.

4. Proposed Final Order Issued

The Department reviews any comments received, including comments from other state agencies related to the protection of sensitive, threatened or endangered fish species. Within 60 days of completion of the IR, the Department issues a Proposed Final Order (PFO) explaining the proposed decision to deny or approve the application. A PFO proposing approval of an application will include a draft permit, and may request additional information or outstanding fees required prior to permit issuance.

5. Public Notice

Within 7 days of issuing the PFO, the Department gives public notice in the weekly notice. Notice includes information about the application and the PFO. Protest must be received by the Department within 45 days after publication of the PFO in the weekly notice. Anyone may file a protest. The protest filing fee is \$410 for the applicant and \$810 for non-applicants. Protests are filed on approximately 10% of Proposed Final Orders. If a protest is filed, the Department will attempt to settle the protest but will schedule a contested case hearing if necessary.

6. Final Order Issued

If no protests are filed, the Department issues a Final Order consistent with the PFO. If the application is approved, a permit is issued that specifies the details of the authorized use and any terms, limitations or conditions that the Department deems appropriate.

RECEIVED BY OWRD

DEC 18 2017

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

RECEIVED BY OWRD

DEC 18 2017

SALEM, OR

Attachments:

- Land Use Information Form with approval and signature of local Planning Department (*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: \$2,560⁰⁰ *Make Payment to OWRD*
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)

Application for a Permit to Use Groundwater



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 Nick Kerby		PHONE (HM) (458)229-2171	
PHONE (WK)	CELL (458)229-2171	FAX	
ADDRESS 1679 Laurel Rd			
CITY Cave Junction	STATE OR	ZIP 97523	E-MAIL* matthewson@mail.com

Organization Information

NAME Northwest Bud Company		PHONE (458)229-2171		FAX
ADDRESS PO Box 2671			CELL	
CITY Grants Pass	STATE OR	ZIP 97528	E-MAIL* nick.kerby@mail.com	

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

AGENT / BUSINESS NAME		PHONE		FAX
ADDRESS			CELL	
CITY	STATE	ZIP	E-MAIL*	

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.)

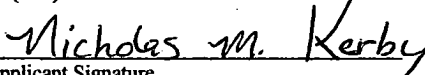
RECEIVED BY OWRD

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. SALEM, OR
- 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.

DEC 18 2017

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


 Applicant Signature Nicholas Kerby 12/05/2017
 Print Name and title if applicable Date

 Applicant Signature Print Name and title if applicable Date

For Department Use		
App. No. 6-18590	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.
- 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.

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

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
JOSE57315	E Fk Illinois River		
JOSE57356	E Fk Illinois River		

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*).

RECEIVED BY OWRD

DEC 18 2017

SALEM, OR

WR

2587-D

SECTION 3: WELL DEVELOPMENT, CONTINUED

Total maximum rate requested: 25gpm (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.

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)	PROPOSED USE			
										SOURCE AQUIFER***	TOTAL WELL DEPTH	WELL-SPECIFIC RATE (GPM)	ANNUAL VOLUME (ACRE-FEET)
JOSE 57356	<input type="checkbox"/>	<input checked="" type="checkbox"/>	87914	<input type="checkbox"/>	6"	2'-78'	220'-240'	0-20'	24' 10/26/06		240'	5gpm	
JOSE 57315	<input type="checkbox"/>	<input checked="" type="checkbox"/>	85497	<input type="checkbox"/>	6"	1'-26'	None	0-20'	53' 10/18/06		240'	0.5gpm	
	<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"/>									

RECEIVED BY OWRD
DEC 18 2017
SALEM, OR

* 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.

SECTION 4: WATER USE

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
Year Round Irrigation	Annual	55

For irrigation use only:

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

Primary: 11 Acres Supplemental: _____ Acres

If you listed 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: Yr round use: 55

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

RECEIVED BY OWRD

DEC 18 2017

SALEM, OR

SECTION 5: WATER MANAGEMENT

A. Diversion and Conveyance

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

Pump (give horsepower and type): Yet to be purchased

Other means (describe): _____

Provide a description of the proposed means of diversion, construction, and operation of the diversion works and conveyance of water. Well to PVC to polly irrigation lines

B. Application Method

What equipment and method of application will be used? (e.g., drip, wheel line, high-pressure sprinkler) (*attach additional sheets if necessary*)

From main irrigation line there will be flow restrictors/pressure reducers feeding smaller laterals with drip emitters. Also hose bibs for handwatering as necessary.

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 (*attach additional sheets if necessary*).

Irrigation system will be on timers; specific flow to each location will be monitored and regulated to avoid over watering and waste runoff. May use mulch/ground cover as needed to combat evaporative loss.

SECTION 6: STORAGE OF GROUNDWATER IN A RESERVOIR

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

Reservoir name: N/A 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 GROUNDWATER FROM THE RESERVOIR

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

Annual volume (acre-feet): _____

USE OF STORED GROUNDWATER	PERIOD OF USE

SECTION 8: PROJECT SCHEDULE

Date construction will begin: As soon as permitted **RECEIVED BY OWRD**

Date construction will be completed: Within 5 yrs of receipt of permit **DEC 18 2017**

Date beneficial water use will begin: As soon as permitted **SALEM, OR**

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 SUPPLY WELL REPORT
 (as required by ORS 537.765 & OAR 690-205-0210)

JOSE 57356
11-09-2006

WELL LABEL # L 87914

START CARD # 1000163

(1) LAND OWNER Owner Well ID. 2

First Name DONN Last Name LEWIS
 Company LEWIS REV. TRUST
 Address 3200 RIVANNA CT
 City WOODBIDGE State VA Zip 22192-3373

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (repair/recondition) Abandonment

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Reverse Rotary Other

(4) PROPOSED USE Domestic Irrigation Community
 Industrial/ Commercial Livestock Dewatering
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
 Depth of Completed Well 240.00 ft.

BORE HOLE			SEAL			sacks/
Dia	From	To	Material	From	To	Amt lbs
10	0	20	Cement	0	2	2 S
			Bentonite Chips	2	20	8 S
6	20	240				

How was seal placed: Method A B C D E

Other Dry Poured Cmt Cap

Backfill placed from 12 ft. to 240 ft. Material Pea Gravel

Filter pack from 12 ft. to 240 ft. Material Pea Gravel Size pea gravel

Explosives used: Yes Type Amount

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	6		2	78	.250	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	4		0	240	sch 40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) 78

Temp casing Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method Factory Screened Liner

Screens Type Material

Perf/	Casing/	Screen	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Perf	Liner			220	240	.063	3	360	

(8) WELL TESTS: Minimum testing time is 1 hour

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
5		240	1

Temperature 56 °F Lab analysis Yes By

Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County Josephine Twp 39.00 S N/S Range 8.00 W E/W WM
 Sec 22 SE 1/4 of the NE 1/4 Tax Lot 200
 Tax Map Number Lot
 Lat " or DMS or DD
 Long " or DMS or DD
 Street address of well Nearest address

LAUREL RD CAVE JUNCTION, OR (well #2)

(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)

Existing Well / Predeepening	Date	SWL(psi)	+ SWL(ft)
Completed Well	10-26-2006		24

Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 82

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
10-26-2006	82	240	5		24

(11) WELL LOG

Ground Elevation

Material	From	To
Brown Clay Tight	0	28
Tan Clay Tight	28	42
Brown Clay & Gravel	42	71
Grey Clay	71	73
Brown Serpentine Broken	73	81
Grey Serpentine	81	240

RECEIVED BY OWRD

DEC 18 2017

SALEM, OR

Date Started 10-25-2006 Completed 10-26-2006

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

License Number Date

Electronically Filed

Signed

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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 water supply well construction standards. This report is true to the best of my knowledge and belief.

License Number 1835 Date 11-09-2006

Electronically Filed

Signed KEVIN D GILL (E-filed)

Contact Info (optional) Clouser Drilling LLC

G-18590

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

10-23-2006

WELL LABEL # L 85497

START CARD # 1000111

(1) LAND OWNER Owner Well I.D.

First Name DONN Last Name LEWIS
Company LEWIS REV. TRUST
Address 3200 RIVANNA CT
City WOODBRIDGE State VA Zip 22192-3373

(2) TYPE OF WORK
[X] New Well [] Deepening [] Conversion
[] Alteration (repair/recondition) [] Abandonment

(3) DRILL METHOD
[X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Cable Mud
[] Reverse Rotary [] Other

(4) PROPOSED USE
[X] Domestic [] Irrigation [] Community
[] Industrial/ Commercial [] Livestock [] Dewatering
[] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy)
Depth of Completed Well 240.00 ft.

Table with columns: Dia, From, To, Material, SEAL From, To, Amt, lbs. Row 1: 10, 0, 20, Bentonite Chips, 0, 20, 10, S. Row 2: 6, 20, 240.

How was seal placed: Method [] A [] B [] C [] D [] E
[X] Other Dry Poured
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: [] Yes Type Amount

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
6 [X] 1 26 .250 [X] [X] [X] [X]
Shoe [] Inside [X] Outside [] Other Location of shoe(s) 26
Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type Material
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/
Screen Liner Dia From To width length slots pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
[] Pump [] Bailer [X] Air [] Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
.5 240 1

Table for water quality concerns with columns: From, To, Description, Amount, Units.

(9) LOCATION OF WELL (legal description)

County Josephine Twp 39.00 S N/S Range 8.00 W E/W WM
Sec 22 SE 1/4 of the NE 1/4 Tax Lot 200
Tax Map Number Lot
Lat " or DMS or DD
Long " or DMS or DD
[] Street address of well [X] Nearest address

LAUREL RD CAVE JUNCTION, OR

(10) STATIC WATER LEVEL

Table with columns: Existing Well / Predeepening, Date, SWL(psi), + SWL(ft). Row 1: Completed Well, 10-18-2006, 53.

Table for WATER BEARING ZONES with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft). Row 1: 10-18-2006, 77, 78, .5, 53.

(11) WELL LOG

Table for WELL LOG with columns: Material, From, To. Rows: Brown Clay Tight (0-24), Black Serpentine Broken (24-77), Black Serpentine (77-240). Includes 'RECEIVED BY OWRD' and 'DEC 18 2017' stamp.

Date Started 10-17-2006 Completed 10-17-2006

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards.

License Number 1504 Date 10-23-2006
Electronically Filed
Signed CHARLIE GILL (E-filed)

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above.

License Number 1835 Date 10-23-2006
Electronically Filed
Signed KEVIN D GILL (E-filed)
Contact Info (optional) Clouser Drilling LLC

G-18590



Oregon Water Resources Department
Apply for a Permit to Appropriate Ground Water and/or Store Ground Water

- [Main](#) [Help](#)
- [Return](#) [Contact Us](#)

Today's Date: Tuesday, December 5, 2017

Base Application Fee for use of Ground, Surface and optionally Stored Water.		\$1,340.00
Number of proposed cubic feet per second (cfs) to be appropriated. (1 cfs = 448.83 gallons per minute)	0.055	\$350.00
Number of proposed Use's for the appropriated water. (i.e. Irrigation, Supplemental Irrigation, Pond Maintenance, Industrial, Commercial, etc) *	1	
Number of proposed Ground Water points of appropriation. (i.e. number of wells) (include all injection wells, if applicable) **	2	\$350.00
Number of Acre Feet to be stored in a reservoir/pond from Ground Water.	0	
Number of Acre Feet to be appropriated from reservoir/pond (Only Applies to reservoir/pond constructed under Ground Water Application)	0	
Number of reservoirs.	0	
Permit Recording Fee. ***		\$520.00
* the 1st Water Use is included in the base cost. ** the 1st Ground Water point of appropriation is included in the base cost. *** the Permit Recording Fee is not required when the application is submitted but, must be paid before a permit will be issued. It is fully refundable if a permit is not issued. If the recording fee is not paid prior to issuance of the Final Order, permit issuance will be delayed.	Recalculate	
Estimated cost of Permit Application		\$2,560.00

OWRD Fee Schedule

Fee Calculator Version B20170117

RECEIVED BY OWRD

DEC 18 2017

SALEM, OR

G-18590

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 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:	
		<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.

RECEIVED BY OWRD

DEC 18 2017

SALEM, OR

Name: _____ Title: _____

Signature: _____ Phone: _____ Date: _____

Government Entity: _____

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: Nick Kerby

City or County: Josephine Staff contact: JAMES BICK

Signature: [Signature] Phone: 541-474-5418 Date: 12-15-17

JOSEPHINE COUNTY COMMUNITY DEVELOPMENT – PLANNING DIVISION

Name: Nick Lerby Date: 12/15/17 Receipt # 55347
Situs: 1679 Laurel Rd.
Legal: T 39 R 8 Sec 32 00 Tax Lots: 213 Amount: \$ 125.00

ADMINISTRATIVE

- 31127 Annual Comp Inspect Certificate
- 31128 Bed & Breakfast
- 38220 Conditional Use
- 38200 Development Permit / Minor
- 39801 Aggregate Mining Permit
- 38240 Farm Dwelling
- 38250 Forest Dwelling
- 38260 Medical Hardship
- 38210 Medical Hardship Renewal
- 38270 Home OCC / No Hearing Type I / Type II / Type III
- 38271 Home OCC / Hearing
- 38280 Manufactured Dwelling Conversion/Storage
- 38290 Non-Conforming Use-Verification
- 39810 Non-Conforming Use-Expansion
- 39803 Pre-App Aggregate Mining
- 39804 Pre-App Comp Plan / ZC
- 39050 Pre-App - PUD
- 39806 Pre-App Subdivision
- 39250 Road Naming
- 39450 Variance w/o Hearing
- 39451 Variance w/ Hearing
- 31123 Violation Citation

HEARING REQUESTS

- 38000 Appeal after Hearing
 - 38010 Appeal w / o Hearing
 - 39200 Remand Hearing
 - 39650 Re-noticing Fee
- LAND DIVISION**
- 38300 Final Plat
 - 39000 Partition / Tentative Approval
 - 39001 Partition / Easement/ Public Usage Access
 - 39802 PUD / Tentative Approval
 - 39150 Property Line Adjustment
 - 31102 Replat – Lot Line Vacation
 - 39700 Replat (Less than 4 lots)
 - 39701 Replat (Pre-App Review involving more than 3 lots)
 - 39702 Replat (More than 3 lots)
 - 39400 Subdivision/Tentative Approval

ORDINANCE CHANGES

- 38100 Comp Plan/Zone Change
- 39002 Comp Plan / Zone Change w /exception to Statewide Goals
- 39800 Text Amendment

SITE REVIEW

- 39350 Half Acre or Less
- 39360 Half Acre - Two Acres
- 39380 Over Two Acres
- 39340 Standards Only

ANALYSIS

- 38050 Auth.Lot/Dwelling Determination
- 38235 Determination of Develop
- 31129 Time Extension
- 39805 Flood Review - Substantial Improvement
- 39550 Land Use Statement
- 39807 Technical Plan Review / Flood, Fire, Erosion,Re-Siting, etc.

MISCELLANEOUS

- 39600 Copies / Maps / Ordinance / Notary
- 39750 Transcript Deposit
- 39808 LUBA Record / Remand Copy
- 31143 Addressing
- 33116 Property File Research

PUBLIC WORKS

- (11-3410-31100)
- 11763 Subdivision Pre-App
 - 11764 Subdivision Application
 - 11766 Partition Application
 - 11768 Site Plan Application
 - 11772 Comp Plan Zone Change

RECEIVED BY OWRD

DEC 18 2017

SALEM, OR

CREDIT 38540899 CASH _____ CHECK # _____ BY: RA



Josephine County, Oregon

Community Development - Planning Division

700 NW Dimmick, Suite C / Grants Pass, OR 97526

(541) 474-5421 / Fax (541) 474-5422

E-mail: planning@co.josephine.or.us

PLANNING APPLICATION FORM

Property Address: 1679 laurel rd.
Cave Junction

Assessor's Map & Tax Lot:
39-0822-00 Tax Lot(s) 213

Tax Lot(s) _____

Zoning: WR

Size of Project (# of units, lots, sq. ft., etc.):
25.44 Acres

Application Type: (Please check all applicable)

- Appeal
- Comp Plan/Zone Map Amendment
- CUP
- Final Plat
- Land Use Compatibility Statement
- Partition
- Planned Unit Development
- Pre-Application
- Property Line Adjustment
- Property Line Vacation
- Replat
- Site Plan Review
- Subdivision
- Text Amendment
- Variance
- Other: _____

Attachments:

- (2) Folded Maps/Site Plan to scale
- (1) 8 1/2x 11" reduced copy of site plan
- Written Narrative/Response to Criteria
- Power of Attorney
- Statement of Understanding
- Floor Plan/Elevations
- Access Permit
- Proof of Fire Protection
- Other: _____

Description of Request/Reason for Appeal

(Include name of project and proposed uses):

Water Rights
Lucs for OWRD

G-18590

Property Owner: Nicholas M. Kerby
Address: PO Box 2671
Grants Pass OR 97528
Phone: 458-229-2171
Email: nick.kerby@mail.com

Applicant: same

Address: _____

Phone: _____

Email: _____

Authorized Representative (If different from applicant):

Address: _____

Phone: _____

Email: _____

Surveyor or Engineer (If applicable)

RECEIVED BY OWRD

Address: _____ DEC 18 2017

Phone: _____

Email: _____ SALEM, OR

CERTIFICATION: I hereby certify that the information on this application is correct and that I own the property or the owner has executed a Power of Attorney authorizing me to pursue this application (attached).

Nicholas M. Kerby
(Signature of owner or Attorney-in-Fact) Date

(Signature of owner or Attorney-in-Fact) Date

(For RECEIVED)
DEC 15 2017
JOCO-PLANNING
Fees Paid: <u>125.00</u> Initials: <u>RA</u>

Payment Entry Form

Result: Payment Authorized
Confirmation Number: 38540899

Your payment has been authorized successfully and payment will be processed.

Josephine County Planning thanks you for your payment. For questions about your account, please call 541-474-5423. Credit card payments will show up as Josephine Co Planning. E-check payments will show up as PNP BILLPAYMENT 8888916064 Thank you for using our bill payment services.

Please save or print a copy of this receipt for record keeping purposes.

My Bills

Description	Amount
Land Use Statement payment of \$125.00 on Parcel Number 39082200000213	\$125.00
Subtotal:	\$125.00
Convenience Fee:	\$3.13
Total Payment:	\$128.13

Customer Information

First Name: Nick
 Last Name: Kerby
 Address Line 1:
 Address Line 2:
 City:
 State:
 Zip Code:
 Phone Number:
 Email Address:

Payment Information

Payment Date: 12/15/2017
 Card Type: MasterCard
 Card Number: *****7729

Signature: Nicholas Kerby Date: 12.15.2017
 By signing this receipt you agree to the terms and conditions of this service.

You will see one line item on your credit or debit card statement indicating the amount you paid and will be identified as Josephine Co Planning. If you have any questions about the charges please call 1-888-891-6064.

RECEIVED BY OWRD
 DEC 18 2017
 SALEM, OR