

725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900

Groundwater **Allocation of Conserved Water Notice of Completion**

For CW ____

(Applicant's signature)

(Printed Applicant Name)

Applicant	Information				
PPLICANT/BUSINESS NAME				PHONE NO.	ADDITIONAL CONTACT NO.
NDDRESS					FAX NO.
CITY		STATE	ZIP	E-MAIL	
f submitting	g with an Application	, complete	e only the Applic	cant name)	
cor are tim	nservation measu complete. The a e as a Request fo	re(s) out applicant or Finaliza	lined in Alloc t acknowledg ation is subm	cation of Conserved ges the conserved witted and approved.	oy notifies the Director that the Water Application CWvater may not be used until such
Ine	e applicant reque	sts the D	irector to iss	ue an order:	
1.	Canceling the water right(s) held by the applicant that is/are modified by the allocation of conserved water;				
2.	Allowing the continued use of water for the purposes and at the locations described in the original water right certificate(s) at the reduced rate and duty prescribed under OAR-690-018-0050(4)(e); and				
3.	Allowing <u>all</u> of the conserved water to remain in the source aquifer.				
The	e applicant will fil	e a Requ	est for Finaliz	zation on or before	(no more than 5 years).
Dat	red:				
(Pri	nted Applicant Nam	e)			(Applicant's signature)
(Pri	nted Applicant Nam	e)			