## **Water Resources Registration**

# CITY OF MOLALLA DEPARTMENT OF PUBLIC WORKS

117 N Molalla Ave PO Box 248 Molalla Or 97038 Phone (503) 829-6855 Fax (503) 829-3676 e-mail dpw @ molalla . net

May 2, 2005

O W R D ATTEN: Mr. Bill Fujii 725 Summer Street NE Suite A Salem Or, 97301-1271

Re: Registration of Reclaimed Municipal Water Use

Dear Mr. Fujii,

Enclosed please find "Registration of Reclaimed Municipal Water Use" form for the Steve Coleman ranch here in Molalla.

If you need anything further, please advise.

Sincerely Yours,

Dean Madison

**Public Works Director** 

Cc; Jerry Minor, TetraTeck KCM

RECEIVED

MAY 0 4 2005

WATER RESOURCES DEPT SALEM, OREGON



### Oregon Water Resources Department

Registration No. (Dept. Use Only)

Registration of Reclaimed Municipal Water Use

"Reclaimed water" means water that has been used for municipal purposes and after such use has been treated in a sewage treatment system and that, as a result of treatment, is suitable for a direct beneficial purpose or a controlled use that could not otherwise occur. (ORS 537.131 and 537.132)

NOTE: Please type or print in dark ink. If your registration is found to be incomplete or inaccurate. we will return it to you. If any requested information does not apply to your registration, insert "n/a."

-	Molalla City	OR State	97038 Zip	503- 829-3140
- 1. Munici	pal Discharge Permit			
<b>VNPDES</b>		Effective Date 4/21/04	Expiration Date	12/21/09
WPCF	Permit No.	Essective Date	Expiration Date	12/31/00
Date use	of Reclaimed Water bega	an, or is scheduled to begin	May. 2001	
Annual P	eriod of Use: from_N	May	o November	
- 2. Supplie	er of the Municipal W	oformalist in the state of the		
If more th	an one supplier is used.	ater which produces the please provide a list in the	le Reclaimed Wat	er ———
Name of	un one supptier is usea,	please provide a list in the	e Reclaimed Water Remarks section of	n page 4.
Name of	an one supplier is usea, Supplier <u>City of Molal</u>	please provide a list in the	e Reclaimed Water Remarks section of	n pagė 4.
Name of S Address_	SupplierCity of Molal PO Box 248, Molalla	please provide a list in the la OR 97038	e Remarks section of	er————————————————————————————————————
Name of Address _  Telephone	SupplierCity of Molal PO Box 248, Molalla ( No. 503-829-6855	please provide a list in the la OR 97038 Fax No. 5	e Remarks section of	n page 4.
Name of S Address_ Telephone	Supplier Supplier is used, Supplier City of Molal PO Box 248, Molalla ( No. 503-829-6855 Source of Municipal Supp	please provide a list in the la OR 97038 Fax No. 5 ply Molalla River	9 <b>Remarks</b> section of	n page 4.
Name of Address_ Telephone Original	SupplierCity of Molal PO Box 248, Molalla ( PNo. 503-829-6855 Source of Municipal Supplier of Reclaimed Water	please provide a list in the la OR 97038  Fax No. 5 ply Molalla River	e <b>Remarks</b> section of	n page 4.
Name of S  Address _  Telephone Original S  -3. Supplie	SupplierCity of Molalla (PO Box 248, Molalla (	please provide a list in the la OR 97038 Fax No. 5 ply Molalla River	e <b>Remarks</b> section of	n page 4.
Name of S  Address  Telephone Original S  3. Supplie  Name of S  Name of I	Supplier City of Molalla (Supplier City of Molalla (Supplier No. 503-829-6855)  Source of Municipal Supplier of Reclaimed Water Supplier City of Molalla (Supplier City of Mo	please provide a list in the la OR 97038  Fax No. 5 ply Molalla River  Vater Treatment Plant	2 Remarks section of 03-829-3676	n page 4.
Address_ Address_ Telephone Original.  -3. Supplie Name of I Street Add	Supplier City of Molal PO Box 248, Molalla (2000)  PO Box 248, Molalla (2000)  No. 503-829-6855  Source of Municipal Supplier of Reclaimed Water City of Molalla Facility Molalla Wastew (1905)  Market Supplier City of Molalla (1906)  Molalla Wastew (1906)  Molalla Wastew (1906)  Molalla Wastew (1906)	please provide a list in the la OR 97038  Fax No. 5 ply Molalla River  vater Treatment Plant Toliver Road, Molalla Ol	03-829-3676	n page 4.
Name of S  Address Telephone Original  -3. Supplie Name of S  Name of I  Street Ada  Name of I	SupplierCity of Molalla PO Box 248, Molalla Pource of Municipal Supplier of Reclaimed Water Supplier City of Molalla Pource of Facility Molalla Pource of Facility 12424 Pource	please provide a list in the la OR 97038  Fax No. 5 ply Molalla River  Vater Treatment Plant Toliver Road, Molalla Ol	03-829-3676	n page 4.
Address  Telephone Original  3. Supplie Name of S  Name of I  Street Ada  Name of F  Address of	SupplierCity of Molalla PO Box 248, Molalla Pource of Municipal Supplier of Reclaimed Water Supplier City of Molalla Pource of Facility Molalla Pource of Facility 12424 Pource	please provide a list in the la OR 97038  Fax No. 5 ply Molalla River  Vater Treatment Plant	03-829-3676	n page 4.
Address  Telephone Original  3. Supplie Name of S Name of I Street Ada Name of F Address of	SupplierCity of Molalla PO Box 248, Molalla Pource of Municipal Supplier of Reclaimed Water Supplier City of Molalla Pacility Molalla Wastew Press of Facility 12424 Pacility Owner City of Molalla Pacility Owner Above	please provide a list in the la OR 97038  Fax No. 5 ply Molalla River  Vater Treatment Plant Toliver Road, Molalla Ol	Remarks section of 03-829-3676	n page 4.

MAY 0 4 2005

WATEH RESOURCES DEPT SALEM, OREGON

4	Address 15151 Feyrer Park Road
	Telephone No. <u>503-829-3140</u> Fax No
5.	Agreement/Contract ————————————————————————————————————
<b>,</b>	Period of Agreement and Contract 12/30/1999 (Date of Contracts)
	Term of Agreement 12/30/1999 to 11/1/2025
Š	Special Limitations
6.	Total Amount of Reclaimed Water —
/	Enter the amount to be applied to beneficial use:
	cubic feet per second, OR up to 2000 gallons per minute
	If reclaimed water is to be used from more than one treatment facility, give the quantity from each
7.	Intended Use(s) of Reclaimed Water
	Land Application on primarily pasture land.  (If for more than one use, give the quantity of reclaimed water from each treatment facility for each use.)
,	If for IRRIGATION, or other land application, state the TOTAL number of acres to receive reclaimed water under each use;
	Irrigation 190 acres
	Other (describe)
	(Temperature Control, Mitigation, Welland, etc.)
8.	Description of Delivery System
	Include dimensions and type of construction of diversion works, length and dimensions of supply ditches or pipelines, size and type of pump and motor. If for irrigation, describe the type of system (i.e., flood, wheel line, hand line, drip, other).
	Supply pipeline is approximately 27,000 If of 24-inch diameter.
	Supply pumps are vertical turbine pumps, driven by 300 HP electric motors.
•	Evistina Water Bighta
	Existing Water Rights ————————————————————————————————————
	Application No. Permit No. 204

Reclaimed Water/ 2

MAY 0 4 2005 WATER RESOURCES DEPT SALEM, OREGON

formand the second
- 10. Property Ownership
Do you own all the land where you propose to divert, transport and use water?
Yes (Skip to section no. 11 "Historic Disposal Method")
No (Please check the appropriate box below and, in the Remarks section,
list the names and addresses of all affected landowners.**)
☐ I have a recorded easement or written authorization permitting access.
I do not currently have written authorization or an easement permitting access.
**If more than 25 landowners are involved, a list is not required. Contact WRD for instructions.
-11. Historic Disposal Method ————————————————————————————————————
Has the reclaimed water being registered in this process been discharged into a natural watercourse for 5 or more years?
No (Skip to section no. 12 "Signature")
Yes (Please answer the following questions) a) Name of the receiving natural watercourse:
a) Name of the receiving natural watercourse.
b) Description of the location where the discharge historically entered the natural water-course:
c) Does the amount of reclaimed water proposed for use under this registration represent 50% or more of the total average daily flow of the natural watercourse?
-12. Signature  I/We certify that the information provided in this application is an accurate representation of the
proposed reclaimed water use and is true and correct to the best of my knowledge:
Steer (of my 4/15/05 Do. Madean 4-15-05
Signature of Registrant Die Supplier's Signature Date
Bungs City of World La
Signature of Co-Registrant Title Date
M. Carrier
DEQ Signature Date
DECINUR.
NOTE: This registration must be accompanied by a map which shows the location of the
treatment plant, approximate location of conveyance system (pipelines, canals, etc.) and place of
usc. The map must be drawn to scale with the scale stated on the map. The land area where the reclaimed water is to be applied shall be identified on the map. Topographic maps with the period for its and place of use shown will meet the map requirement.
facilities and place of use shown will meet the map requirement.
MAY 0 4 2005

Reclaimed Water/ 3

WATEH RESOURCES DEPT SALEM, OREGON

Remarks —
No. 10. Conveyance to the Reclaimed Water Use Site is located in Public ROW or City owned property from the Treatment Plant to the Reused Site.
,
No. 11. No summer/dry weather Reclaimed Water has been discharged into a water course for more than 25 years.
•

RECEIVED

s Revision:October 29, 1996

MAY 0 4 2005

\*EXISTING RECLAIMED WATER USE SITE IS COLEMAN RANCH PROPERTY SOUTH OF FEYRER PARK ROAD. THE FUTURE NORTH RANCH AREA WILL BE UTILIZED. PUMP STATION I WASTEWATER
TREATMENT
PLANT SITE HWY 211/ROW S TRRICATION FORCEMAIN FOREST ROAD Z RO₩ CITY OF MOLALLA
URBAN GROWTH
BOUNDARY PARK PROPERTY (CITY OWNED) THE PROPERTY OF THE PROPERTY O (RECLAIN COLEMA Vens -USE 1250

7080 SW Fir Loop
Portland, Oregon 97223

CITY OF MOLALLA

m O D D O O

#### **Oregon Water Resources Department**

Registration No. (Dept. Use Only)

#### Registration of Reclaimed Municipal Water Use

"Reclaimed water" means water that has been used for muticipal purposes and after such use has been treated in a sewage treatment system and that, as a result of treatment, is suitable for a direct beneficial purpose or a controlled use that could not otherwise occur. (ORS 537.131 and 537.132)

NOTE: Please type or print in dark ink. If your registration is found to be incomplete or Inaccurate, we will return it to you, If any requested information does not apply to your registration, insert "n/a."

Molalla		City		OR State	97038	503-781-5534
		City		State	Zip	Daytšine Telephone No
. Municij	pal Discharge	Permit				<u> </u>
NPDES	Permit No. 1	01514	Effective Date	12/11/200	9 Expirati	ion Dale <u>3/31/2013*</u>
WPCF	Permit No.		Effective Date		Expirati	ion Date
Date use	of Reclaimed W	later began,	or is schedule	d to begin	Immediately	y after approval
Annual P	eriod of Use:	from May			o November	
	er or the leading	DISTRIBUTE		unces in		ed Water
				10 . 1 . 4		
If more th	ian one supplie			list in the		ection on page 4.
	ian one suppliei Supplier <u>City of</u>	r is used, pla	ease provide a		Remarks s	ection on page 4.
Name of S		r is used, pla Molalia	ease provide a		Remarks s	
Name of S Address <u>F</u>	Supplier City of	r is used, pla Molalia Ialia, OR 970	ease provide a		: Remarks s	ection on page 4.
Name of S Address F Telephone	Supplier <u>City of</u> P.O. Box 248 Mo e No. <u>503-829-6</u>	r is used, pla Molalia Ialia, OR 970	ease provide a 38 F	ar No. <u>503</u>	Remarks s	ection on page 4.
Name of S Address F Telephone	Supplier City of P.O. Box 248 Mo	r is used, pla Molalia Ialia, OR 970	ease provide a 38 F	ar No. <u>503</u>	Remarks s	ection on page 4.
Name of S Address <u>F</u> Telephone Original S	Supplier <u>City of</u> P.O. Box 248 Mo e No. <u>503-829-6</u> Source of Muni	r is used, pla Molalia Ialia, OR 970 855 cipal Supply	ease provide d 38 F Molalia River	ax No. <u>503</u>	: Remarks s 3-829-3676	ection on page 4.
Name of S Address <u>F</u> Telephone Original S	Supplier <u>City of</u> P.O. Box 248 Mo e No. <u>503-829-6</u> Source of Muni	r is used, pla Molalia Ialia, OR 970 855 cipal Supply	ease provide d 38 F Molalia River	ax No. <u>503</u>	: Remarks s 3-829-3676	ection on page 4.
Name of S Address F Telephone Original S Supplie	Supplier <u>City of</u> P.O. Box 248 Mo e No. <u>503-829-6</u> Source of Muni	r is used, pla Moialla Ialla, OR 970 855 cipal Supply ed Water –	ease provide a 38 F Molalla River	ax No. <u>503</u>	Remarks s 3-829-3676	ection on page 4.
Name of S Address F Telephone Original S Supplie Name of S	Supplier City of P.O. Box 248 Mo e No. 503-829-6 Source of Muni	r is used, pla Molalia Ialia, OR 970 855 Cipal Supply ed Water — Molalia	ease provide a 38 F Molalia River	ax No. <u>503</u>	Remarks s 3-829-3676	ection on page 4.
Name of S Address F Telephone Original S Supplie Name of S Name of S	Supplier City of P.O. Box 248 Mo e No. 503-829-6 Source of Munior of Reclaims Supplier City of Pracility City Of Pracili	r is used, pla Moialla Ialla, OR 970 855 cipal Supply ed Water — Moialla	ease provide a 38 F  Molalia River	ax No. 503	Remarks s	ection on page 4.
Name of S Address F Telephone Original S Supplie Name of S Name of I Street Add	Supplier City of P.O. Box 248 Mo e No. 503-829-6 Source of Munior of Reclaims Supplier City of Pracility City Of Pracili	r is used, pla Molalla Ialla, OR 970 855 cipal Supply ed Water — Molalla Molalla Waste	ease provide a  38  F Molalia River  ewater Treatme	nt Plant OR 97038	3-829-3676	ection on page 4.
Name of S Address E Telephone Original S Supplie Name of S Name of I Street Ada Name of I	Supplier City of P.O. Box 248 Mo e No. 503-829-6 Source of Muniver of Reclaims Supplier City of Facility City of Idress of Facility	r is used, pla Motalia Islaia, OR 970 855 Cipal Supply ed Water — Motalia Wotalia Waste (12424 S. To City of Motalia	ease provide a  38  F Molalla River ewater Treatme	or No. <u>503</u> ort Plant ort 97036	3-829-3676	ection on page 4.
Name of S Address E Telephone Original S Supplie Name of S Name of I Street Add Name of I Address of	Supplier City of P.O. Box 248 Mo e No. 503-829-6 Source of Munior of Reclaime Supplier City of Facility City of I dress of Facility Owner Supplier Owner	r is used, pla Moialla Ialla, OR 970 855 cipal Supply ed Water — Moialla Wolalla Waste 12424 S. To City of Moialla	ease provide a  38  F  Molalia River  ewater Treatme liver rd. Molalia a  48 Molalia, OR	nt Plant OR 97038	3-829-3676	ection on page 4.

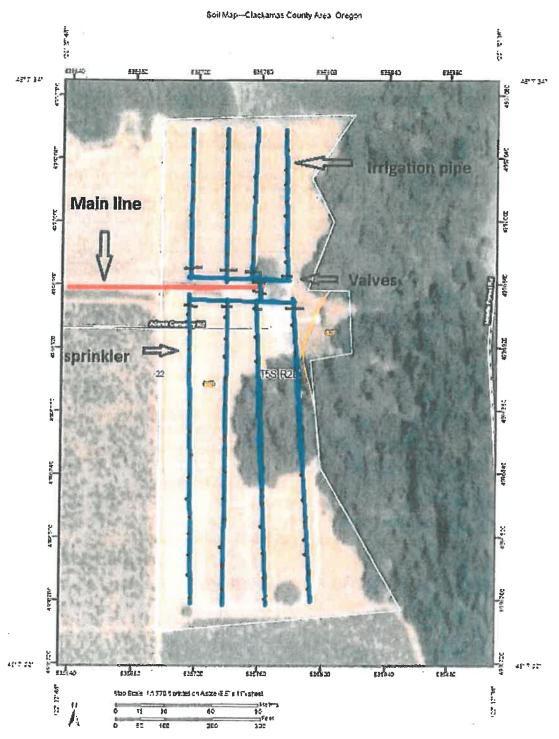
A 41 PM 1.1 4184 4	
-4. User of Reclaimed Water	
Name of Water User Adams Cemetery	
Address Clackamas County T5S R2E Sec22 00600 (No Site Address)	
Telephone No. <u>503-781-5534</u> Fax No	
~5. Agreement/Contract	
Period of Agreement and Contract 5/19/2008-11/1/2032	
Term of Agreement Water is provided as long as the terms and conditions RWUP and the permit a	e met.
Special Limitations Water availability is limited to the reuse operating season (when the WWTP is discharging to outto	
- 6. Total Amount of Reclaimed Water	
Enter the amount to be applied to beneficial use:	
cubic feet per second, OR 500 (based on availability) gallons per minute	
If reclaimed water is to be used from more than one treatment facility, give the quantity from	nn each.
~7. Intended Use(s) of Reclaimed Water ————————————————————————————————————	-
trainables	
Irigation (If for more than one use, give the quantity of reclaimed water from each treatment facility for each use.)	
If for IRRIGATION, or other land application, state the TOTAL number of acres to receive reclaimed water under each use;	!
Irrigation 8.2	
Other (describe)	
Other (describe)(Temperature Control, Alltigation, Wetland, etc.)	
-8. Description of Delivery System Include dimensions and type of construction of diversion works, length and dimensions of a ditches or pipelines, size and type of pump and motor. If for irrigation, describe the type of (i.e., flood, wheel line, hand line, drip, other).	
A 4 inch line is tied into the irrigation at the Coleman Ranch. It is pumped up to cemetery with a	20 hp
centrifugal pump. It is Irrigated by sprinkler irrigation.	
9. Existing Water Rights ————————————————————————————————————	the
Application No Permit No	
Certificate No Decree vol & pg	
(Quiv one marker needs to be provided. Attach a separate list if more than one water right is involved.)	od)

	y Ownership —
•	n all the land where you propose to divert, transport and use water?
Yes	(Skip to section no. 11 "Historic Disposal Method")
	(Please check the appropriate box helow and, in the Remarks section, list the names and addresses of all affected landowners.**)
	I have a recorded easement or written authorization permitting access,
	I do not currently have written authorization or an easement permitting access.
**!f n101	re than 25 landowners are involved, a list is not required. Contact WRD for instructions.
Has the rec	Disposal Method  Idalmed water being registered in this process been discharged into a natural efor 5 or more years?
Ø No (	(Skip to section no. 12 "Signature")
□ Yes	(Please answer the following questions)
	a) Name of the receiving natural watercourse:
	<ul> <li>b) Description of the location where the discharge historically entered the natural water- course:</li> </ul>
	c) Does the amount of reclaimed water proposed for use under this registration represent 50% or more of the total average daily flow of the natural watercourse?    Yes   No
	that the information provided in this application is an accurate representation of the
proposed re	3. F 10/14/13 Who best of my knowledge:
ЅІдэнаіиле о	Co-Registrant Title Operator
DEQ Signa	that Dule
treatment use. The reclaime	This registration must be accompanied by a map which shows the location of the at plant, approximate location of conveyance system (pipelines, canals, etc.) and place of a map must be drawn to scale with the scale stated on the map. The land area where the ad water is to be applied shall be identified on the map. Topographic maps with the sand place of use shown will meet the map requirement.

Remarks
* NPDES permit expiration date has been extended by DEQ until the permit is renewed.
<del></del>
Last Revision (Irtsker 79, 1980

In Sproall Feyrer Park Rd Molalla Forest Claim Rd Adams 1 Cemetery

#### Attachment 1



#### **Oregon Water Resources Department**

Registration No. (Dept. Use Only)

#### Registration of Reclaimed Municipal Water Use

"Reclaimed water" means water that has been used for municipal purposes and after such use hus been treated in a sewage treatment system and that, as a result of treatment, is suitable for a direct beneficial purpose or a controlled use that could not otherwise occur. (ORS 537.131 and 537.132)

NOTE: Please type or print in dark ink. If your registration is found to be incomplete or inaccurate, we will return it to you. If any requested information does not apply to your registration, insert "n/a."

	Address P.O. Box 248		-		PAR ARE DOFF
Molalla	City		OR 9 State	7038	503-829-6855 Daytime Telephone No
d Marialair	pal Discharge Per	no it			
1. WUNICI NPDES	_				tion Date <u>3/31/2013*</u>
					tion Date
	-	=			ur
	Molalia Forest Road Mo				
Telephon	e No. 503-829-5408	F	ax No. <u>503</u>	829-7709	
	Source of Municipal	Supply Molalla River			
Original					
	er of Reclaimed W	ater ————			
3. Supplie	Supplier City of Molal	8			
3. Supplie		8			
3. Supplie  Name of	Supplier <u>City of Molal</u> Facility <u>City of Molall</u>	a Wastewater Treatma	ent Plant		
3. Supplie  Name of  Name of  Street Ad	Supplier <u>City of Molal</u> Facility <u>City of Molali</u> dress of Facility <u>1242</u>	a Wastewater Treatme 24 S. Toliver Rd. Mola	ent Plant la OR		
3. Supplied Name of Street Add Name of Street Add	Supplier <u>City of Molal</u> Facility <u>City of Molali</u> dress of Facility <u>1242</u>	a <u>Wastewater Treatms</u> 24 S. Toliver Rd. Molal f Molalla	ent Plant lla OR		
3. Supplied Name of Street Add Name of Street Add	Supplier City of Molal Facility City of Molall dress of Facility 1242 Facility Owner City o	a Wastewater Treatme 24 S. Toliver Rd. Molal f Molalla . Box 248 Molalla, OR	ent Plant lla OR		
3. Supplied Name of Street Add Name of Street Add	Supplier City of Molal Facility City of Molali dress of Facility 1242 Facility Owner City o of Facility Owner P.O	a Wastewater Treatms 24 S. Toliver Rd. Molai f Molalia . Box 248 Molalia, OR -829-6855	ent Plant lla OR	o. of Faci	ility <u>503-829-54</u> 07

-4. User of Reclaimed Wa	ter
	f Molalla Wastewater Treatment Plant
Address 12424 S. Toliver Rd.	
Telephone No. 503-829-540	7 Fax No. <u>503-829-4298</u>
-5. Agreement/Contract -	
Period of Agreement and C	ontract
-6. Total Amount of Reclai Enter the amount to be app	imed Water ————————————————————————————————————
-	per second, OR 300 gallons per minute
	used from more than one treatment facility, give the quantity from each.
-7. Intended Use(s) of Rec	lalmed Water ————————————————————————————————————
A- 6:- 48 -	
Irrigation (If for more than one t	use, give the quantity of reclaimed water from each treatment facility for each use,)
reclaimed water under each	_ <del>_</del>
Irrigatio	20
Other (de	escribe)(Temperature Control, Mitigation, Wesland, esc.)
	(realpersture Control, Mingalian, Welland, etc.)
Include dimensions and type	System  e of construction of diversion works, length and dimensions of supply d type of pump and motor. If for irrigation, describe the type of system line, drip, other).
We use pressure off the mai	in effluent line. 24 inch forced main driven by one of two 300 hp pumps.
There is a 2 inch line tapped in that run	s the plant sprinklers. The leven is tirtigated by a Shp pump that runs a system of pop up sprinklers.
There is an additional 30 hp	pump that can be used to irrigate a portion of the property.
9. Existing Water Rights – Please provide a description reclaimed water will be app.	of all the existing water rights appurtenant to the lands where the
Application No	Permit No
	Decree vol & pg
	provided Attach a senavate list if more than are juster right is involved

10. Property	Ownership ————————————————————————————————————
Do you own	all the land where you propose to divert, transport and use water?
	Skip to section no. 11 "Historic Disposul Method")
j	Please check the appropriate box below and, in the Remarks section, list the names and addresses of all affected landowners.**)
	☐ I have a recorded easement or written authorization permitting access.
ί	☐ I do not currently have written authorization or an easement permitting access.
**If more	e than 25 landowners are involved, a list is not required. Contact WRD for instructions.
Has the reci	Disposal Method————————————————————————————————————
watercourse	e for 5 or more years?
M No (	Skip to section no. 12 "Signature")
,	(Please answer the following questions)
	n) Name of the receiving natural watercourse:
	b) Description of the location where the discharge historically entered the natural water- course:
	c) Does the amount of reclaimed water proposed for use under this registration represent 50% or more of the total average daily flow of the natural watercourse?   □ Yes □ No
12. Signatur	that the information provided in this application is an accurate representation of the calculation of the calculation water use and is true and correct to the best of my knowledge:
Signoline of	y of Molalla Jon Buter
Signature of	Co-Registrani Title (Dambor Date
DEQ Signa	time V/16/2015
treatmen use. The reclaime	This registration must be accompanied by a map which shows the location of the at plant, approximate location of conveyance system (pipelines, canals, etc.) and place of a map must be drawn to scale with the scale stated on the map. The land area where the dwater is to be applied shall be identified on the map. Topographic maps with the and place of use shown will meet the map requirement.

Remarks
* NPDES permit expiration date has been extended by DEQ until the permit is renewed.
(*)



ħ,