

LICENSE REVIEW CHECKLIST

PERMIT NO. 457071041

DATE 12-14-94



NAME Yes No Or Address Change?

PRIORITY DATE Yes No Advance? YES Advanced to: JUNE 8, 1989
 Order to reinstate needed? Done
 Incorrect fee for rate recommended?

SOURCE Changes or just clarification of originally intended source?
 Notice of Intent to Void necessary?

POINT OF DIV Amendment needed?
 Overlaps?

PLACE OF USE Amendment needed?
 Overlaps?

DIV RATE Permit/fee limits: .04 CFS
 Meas Q = Theo Q = .13 Recommend: .04
8.8 x .7 x 7.5
193 + (2.31 x 65) = .13 CFS
 Combined rates exceed capacity

ANNUAL VOLUME Season of use: 1-1 to 12-31
 Calculations: Irrigation around at least 2 of the
 buildings + experimental greenhouse
 Flow limit: cfs x x 1.9835 =
 Combined volumes exceed capacity/allowable

4.8 acceptable

USES Change in Nature of Use or additional uses?
 Amendment necessary?

REMARKS Multiple p/d(s) in 1/4 1/4?
 Other commercial use for restroom facilities for
 4 commercial buildings + experimental greenhouse.

CONDITIONS Measuring/Locking Devices
 Watermaster control - District
 Irrigation Overlap
 Water Quality
 Other Heat/Cool/ Fish verified

COMMENTS:

RECOMMENDED	CFS	VOL	SRBA Claim Filed	<u>NO</u>
<u>Commercial</u>	<u>.04</u>	<u>4.8</u>	Adjustment Memo Needed	<u>NO</u>
<u> </u>	<u> </u>	<u> </u>	LICENSE	<u> </u>
<u> </u>	<u> </u>	<u> </u>	1ST AMENDMENT LETTER	<u> </u>
<u> </u>	<u> </u>	<u> </u>	FINAL AMENDMENT LETTER	<u> </u>

