*The Klamath County Circuit Court has approved this recommended format (form) for filing exceptions to the Amended and Corrected Findings of Fact and Order of Determination (ACFFOD). The Court has also adopted “Instructions for Filing Exceptions to the Oregon Water Resources Department’s Amended and Corrected Findings of Fact and Order of Determination of Water Rights in the Klamath Adjudication Using the Court-Approved Exceptions Form” which are to be used in completing this form. Parties are advised to review the Instructions as well as Case Management Order #7 prior to completing this form.*

IN THE CIRCUIT COURT OF THE STATE OF OREGON

FOR THE COUNTY OF KLAMATH

In the Matter of the Determination of the Relative Rights of the Waters of the Klamath River,

A Tributary of the Pacific Ocean

|  |  |
| --- | --- |
| In Re:WATERS OF THE KLAMATH RIVER BASIN.  | Case No. WA1300001**STATEMENT OF EXCEPTIONS OF [*insert name(s) of Exceptor(s)*]*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* TO AMENDED AND CORRECTED FINDINGS OF FACT AND ORDER OF DETERMINATION IN THE KLAMATH BASIN ADJUDICATION; EXCEPTIONS TO PARTIAL ORDER OF DETERMINATION CONCERNING WATER RIGHT CLAIM OR CLAIMS NUMBER(S)** [*insert claim number(s)*] **\_\_\_\_\_\_\_****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

The Exceptor or Exceptors filing this Statement of Exceptions take(s) exception to the Partial Order of Determination for Water Right Claim Number(s) [*insert*\_\_\_\_\_\_\_\_] within the Amended and Corrected Findings of Fact and Order of Determination (ACFFOD) as provided in this statement. Exceptor(s) acknowledge, and have read, Oregon Revised Statutes section 539.150 and the *“*Instructions for Filing Exceptions to the Oregon Water Resources Department’s Amended and Corrected Findings of Fact and Order of Determination of Water Rights in the Klamath Adjudication Using the Court-Approved Exceptions Form” (Instructions).

1. **NAME(s) AND STATUS OF EXCEPTORS(s)** [*list for each Exceptor the following information*]**:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Daytime Phone [*not required if represented by an attorney*]:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address [*not required if represented by an attorney*]:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[*complete or otherwise provide the following information for each Exceptor*]

This Exceptor(s) [*check all boxes that apply*]

[\_\_] Is a claimant, or a successor-in-interest, on the claim(s) that is/are the subject(s) of the Partial Order of Determination being excepted to.

[\_\_] Was a contestant, or is a successor-in-interest to a contestant, before the Oregon Water Resources Department or the Office of Administrative Hearings with respect to the claim(s) that is/are the subject(s) of the Partial Order of Determination being excepted to.

[\_\_] Was not a claimant or contestant before the Oregon Water Resources Department or the Office of Administrative Hearings with respect to the claim(s) that is/are the subject(s) of the Partial Order of Determination being excepted to.

[\_\_] Owns irrigation works or claims an interest in the stream in question.

[\_\_] Other [*describe*]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

1. **NAME AND ADDRESS OF ATTORNEY(S), IF ANY, FOR EXCEPTOR(S):**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Daytime Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **CLAIMANT(S) OF WATER RIGHT(S) THAT ARE THE SUBJECT OF THE PARTIAL ORDER OF DETERMINATION BEING EXCEPTED TO:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **EXCEPTOR(S) IDENTIFIED ABOVE EACH INDIVIDUALLY TAKE(S) EXCEPTION AS FOLLOWS:**

[*Insert exception(s) consistent with ORS 539.150 and the Instructions.*]

1. **SERVICE.**  I have attached a certificate or affidavit of service to this Statement of Exceptions, which evidences service consistent with Rule 9 of the Oregon Rules of Civil Procedure and the Instructions.
2. **VERIFICATION / CERTIFICATION BY PARTY OR ATTORNEY**

I am an Exceptor making the above exception(s) and am not represented by an attorney in this matter and I verify and declare, or I am an attorney representing one or more of the Exceptors making the above exception(s) and I certify and declare, that: as required by ORS 539.150 and ORCP 17, the exception(s) is/are based on reasonable knowledge, information and belief, formed after the making of such inquiry as is reasonable under the circumstances, and is/are not presented for any improper purpose, such as to harass, cause unnecessary delay or needlessly increase the cost of litigation, and that legal positions are warranted by existing law or a non-frivolous argument for the extension, modification, or reversal of existing law, and factual assertions are supported by evidence.

Dated this \_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2014. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Exceptor or attorney filing

Statement of Exceptions

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[*Typed name of signatory. If attorney, include bar number and identity of Exceptor(s) represented by the attorney.*]

*If more than one Exceptor is filing this Statement, each Exceptor or the attorney must sign and verify or certify the Statement of Exceptions. Include additional date and signature lines as necessary.*