SACRAMENTO-SAN JOAQUIN DELTA
DIVERSION SURVEY

Name: ________________________________________________________________

Address: __________________________________________________________________

Daytime phone number: ________________________________

Basis of Right:
License # ________  Permit # _________ Statement #__________ Other ___________

Name of the water body at the point of diversion _______________________________
______________________________________________________________________

1. Did you receive a notice from Fish and Game? □ Yes □ No
   If yes, did you reduce or curtail your diversion? □ Yes □ No
   Water Savings __________________________ □ Acre-feet □ Gallons
   How was savings achieved and will you continue this on a temporary or permanent basis?
   __________________________________________________________________
   __________________________________________________________________

2. If you have not already implemented water reduction or curtailment measures, do you plan to implement measures to temporarily reduce or curtail your diversion in order to conserve water, and protect instream beneficial uses?
   □ Yes □ No
   How would water savings be achieved?
   __________________________________________________________________
   __________________________________________________________________
   Estimated Water Savings __________________________ □ Acre-feet □ Gallons

3. Is your diversion screened for the protection of aquatic resources?
   □ Yes □ No
   If so, please describe. _______________________________________________
   __________________________________________________________________
   Screen Area___________________ Screen Mesh Size___________________

4. Is your diversion equipped with a measuring device? □ Yes □ No
   If so, what type? ___________________________________________________

5. Normal hours of pump operation (am/pm) ___________________________________
6. Capacity of diversion ________________ □ CFS □ GPM

7. Maximum Annual Diversion: __________ □ Acre-feet □ Gallons

8. Season of Diversion: _______________________________________________

9. Purpose of use:    □ Irrigation       □ Domestic       □ Other

10. Crop Grown: ________________    Acres _________________________

Comments or Recommendations based on your local knowledge or observations (Use this space to also identify any unauthorized diversions you believe the State Water Board should investigate): _______________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

Signature:__________________________    Date: ________________

Please use the enclosed return envelope or mail survey to:

Sacramento-San Joaquin Delta Diversion Survey
Division of Water Rights
P.O. Box 2000
Sacramento, CA  95812

The State Water Board thanks you for your response and cooperation.