

# **DRAFT - MEASUREMENT AND MONITORING ALTERNATIVE COMPLIANCE PLAN**



See Information and Instruction Sheet for assistance in completing this form. The form shall be completed by the water right owner, their agent, or for an alternative compliance plan filed for a group, the designated contact. The vast majority of water right owners should be able to meet the measurement requirements. Participation in an Alternative Compliance Plan does not relieve the participant of the independent obligation to file an online annual Report of Water Diversion and Use.

**Primary Permit, License, Statement, Registration, or Certificate Number:**

<b>A. INFORMATION ON PRIMARY CONTACT</b>				<input type="checkbox"/> Response Includes Attached Document(s) (List all attachments in Section H of this form)
Name(s)	Plan is being filed by: <input type="checkbox"/> Water Right Owner <input type="checkbox"/> Agent <input type="checkbox"/> Designated Contact			
Phone Number	Email Address			
Mailing Address	City	State	Zip	
Water Right or Statement Number(s)	Beneficial Use(s)	Diversion Amount		
Priority	Parcel number(s) covering the place of use			
For plans covering more than one water right holder, attach a table containing the following information for each water right covered under the plan: Water right number, authorized diversion amount, beneficial use(s), priority, owner name, phone number, email address, mailing address, and assessor's parcel number(s) covering the place of use.				
<b><i>All sections of the form below must be completed – An incomplete form does not excuse non-compliance with the regulation or release you from the obligation to measure</i></b>				
<b>B. BASIS FOR ALTERNATIVE COMPLIANCE</b>				<input type="checkbox"/> Response Includes Attached Document(s) (List all attachments in Section H of this form)
Alternative Compliance Plans must include alternative, objective measurement and performance standards that achieve the closest attainable compliance, including Plans claiming that strict compliance is unreasonably expensive. A claim that strict compliance is unreasonably expensive shall be accompanied by a supporting cost analysis. The alternative compliance plan may not be used to avoid measurement and monitoring.				
Plan participants qualify because strict compliance with the requirements for measuring (check all that apply):				
<input type="checkbox"/> Is not feasible <input type="checkbox"/> Would unreasonably affect public trust resources				
<input type="checkbox"/> Is unreasonably expensive <input type="checkbox"/> Would result in the waste or unreasonable use of water				
Provide a detailed explanation and attach substantiating documentation to support each box checked above.				
Summarize the request for alternative compliance:				
<div style="border: 1px solid black; padding: 10px; margin: 10px auto; width: 80%;"> <p style="color: red; font-weight: bold; font-size: 1.2em;">DRAFT FOR PUBLIC REVIEW AND COMMENT</p> <p style="color: blue;">The State Water Board has released this draft form for public review and comment. Comments on the draft form should be emailed to:  <a href="mailto:dwr-measurement@waterboards.ca.gov">dwr-measurement@waterboards.ca.gov</a> by September 2, 2016.</p> </div>				

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The Plan requests alternative compliance under the following categories (check all that apply):

- |  |   |
|--|---|
| <input type="checkbox"/> Highly variable flow rate at point of diversion | <input type="checkbox"/> Point of diversion is inaccessible a portion of the year due to snow                         |
| <input type="checkbox"/> Point of diversion is under tidal influence     | <input type="checkbox"/> There is an existing measuring device or measurement method in use                           |
| <input type="checkbox"/> Water is corrosive to measurement equipment     | <input type="checkbox"/> The diversion is measured by another entity (identify entity and method of measurement used) |
| <input type="checkbox"/> Other (provide complete description)            |   |

Provide a detailed explanation and attach substantiating documentation to support each box checked above.

Summarize the request for alternative compliance under all selected categories:

Diverter is seeking alternative compliance from the requirement(s) checked below. Diverter shall submit a detailed explanation and substantiating documentation – including a description of all substitute measures which will be implemented - for each of the boxes checked below:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Monitoring frequency                 | <input type="checkbox"/> Telemetry                    | <input type="checkbox"/> Required accuracy         |
| <input type="checkbox"/> Certification of accuracy            | <input type="checkbox"/> Installation and maintenance | <input type="checkbox"/> Measuring device location |
| <input type="checkbox"/> Other (provide complete explanation) |   |  |

Summarize the reason for requesting alternative compliance for each box checked above:

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### **C. AREA COVERED BY THE PLAN**

☐ Response Includes Attached Document(s)

(List all attachment in Section H of this Form)

**Summarize the following for each water right covered by the Plan. Attach maps, aerial photographs, or other renderings of the Plan area showing the area covered by the Plan and delineating the acreage of each place of use served. Attach photos and Excel spreadsheets, as needed.**

General Description of Area

Describe the Point(s) of Diversion

Describe the Methods(s) of Diversion

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Describe the Conveyance Facilities	Describe the Beneficial Use(s)						
Describe the Place of Use (Including a description of any irrigated acreage):							
Note: For the area covered by the plan include a list of assessor's parcel numbers and the current owner of each parcel.							
<b>D. MEASUREMENT AND MONITORING</b> <div style="float: right;"> <input type="checkbox"/> Response Includes Attached Document(s)              (List all attachment in Section H of this Form)           </div>							
<p>Indicate the type of measurement used (check all that apply). For all equipment, the Plan participant must provide the following: manufacturer, model name and/or number, serial number, date installed, name of installer, qualifications of installer.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Flow Meter  <input type="checkbox"/> Propeller  <input type="checkbox"/> Vortex  <input type="checkbox"/> Electromagnetic  <input type="checkbox"/> Ultrasonic  <input type="checkbox"/> Positive Displacement  <input type="checkbox"/> Pressure transducer and storage capacity curve           </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Flume  <input type="checkbox"/> Weir  <input type="checkbox"/> Sluice/Slide Gate  <input type="checkbox"/> Staff gage and floodable acreage  <input type="checkbox"/> Staff gage and storage capacity curve  <input type="checkbox"/> Measurement Method  <input type="checkbox"/> Other (provide description)           </td> </tr> </table> <p>Summarize the type(s) of measurement used.</p> <div style="border: 1px solid black; padding: 10px; text-align: center; margin: 10px 0;"> <p style="color: red; font-weight: bold; font-size: 1.2em;">DRAFT FOR PUBLIC REVIEW AND COMMENT</p> <p style="color: blue; font-size: 0.9em;">The State Water Board has released this draft form for public review and comment. Comments on the draft form should be emailed to:  <a href="mailto:dwr-measurement@waterboards.ca.gov">dwr-measurement@waterboards.ca.gov</a> by September 2, 2016.</p> </div>		<input type="checkbox"/> Flow Meter <input type="checkbox"/> Propeller <input type="checkbox"/> Vortex <input type="checkbox"/> Electromagnetic <input type="checkbox"/> Ultrasonic <input type="checkbox"/> Positive Displacement <input type="checkbox"/> Pressure transducer and storage capacity curve	<input type="checkbox"/> Flume <input type="checkbox"/> Weir <input type="checkbox"/> Sluice/Slide Gate <input type="checkbox"/> Staff gage and floodable acreage <input type="checkbox"/> Staff gage and storage capacity curve <input type="checkbox"/> Measurement Method <input type="checkbox"/> Other (provide description)				
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<p>Indicate the type of monitoring device(s) to be employed under the Plan (check all that apply):</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><input type="checkbox"/> Flow Totalizer</td> <td style="width: 33%;"><input type="checkbox"/> Data Logger</td> <td style="width: 33%;"><input type="checkbox"/> Telemetry</td> </tr> <tr> <td colspan="3"><input type="checkbox"/> Other (Identify monitoring device type)</td> </tr> </table> <p>Summarize the type(s) of monitoring used.</p>		<input type="checkbox"/> Flow Totalizer	<input type="checkbox"/> Data Logger	<input type="checkbox"/> Telemetry	<input type="checkbox"/> Other (Identify monitoring device type)		
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<input type="checkbox"/> Other (Identify monitoring device type)							
<b>E. BUDGET (Attach Budget Description)</b> <div style="float: right;"> <input type="checkbox"/> Response Includes Attached Document(s)              (List all attachment in Section H of this Form)           </div>							
<p>Provide the budget for the Plan. The budget should provide sufficient detail to show the cost of the measuring devices, cost of obtaining any necessary permits, cost of installation and identify sources of funding.</p>							

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## **F. IMPLEMENTATION SCHEDULE**

☐ Response Includes Attached Document(s)

(List all attachment in Section H of this Form)

Describe the implementation schedule, including objective milestones from date of filing through final implementation. Milestones should include date of completion for construction and testing, expected dates of issuance of required permits, and expected date for compliance with the California Environmental Quality Act (if applicable).

The Alternative Compliance Plan must be implemented by the established regulatory deadlines (see form instructions for additional information) unless a Request for Additional Time has been granted.

## **G. OTHER PERMITS REQUIRED**

☐ Response Includes Attached Document(s)

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Describe any other permits required to implement the alternative compliance plan. Include information on the agency that will issue the permit, and the expected date of issuance.

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## **H. ATTACHMENTS**

List all attachments submitted to support the Alternative Compliance Plan

Description	Section of the Plan the document applies to	File Name

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**I. SIGNATURE AND IMPORTANT INFORMATION**
☐ Response Includes Attached Document(s)

(List all attachment in Section F of this Form)

Each participant in a Plan must sign this form or an "opt-in" form which must be retained by the Plan manager. (Attach an excel spreadsheet listing of participants, as needed). By signing this form or the Plan's "opt-in" form, each Plan participant acknowledges that the Plan will be timely implemented and that the measurement of diversions will substantially comply with the Measurement Regulation. Further, each Plan participant acknowledges that the water rights covered by the Plan will not be exercised outside the scope of the Plan. Each Plan participant is responsible for promptly informing the Division of Water Rights or Delta Watermaster, as appropriate, if the participant withdraws from the Plan. The Plan manager is responsible for promptly informing the Division of Water Rights or the Delta Watermaster, as appropriate, if the Plan is modified or abandoned or if the Implementation Schedule is adjusted.

I hereby certify that the information in this Plan is true to the best of my knowledge and belief and that the Plan is in compliance with the requirements of Title 23, Division 3, Chapter 2.8, Section 931 through 938 of the California Code of Regulations.

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SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

 PRINTED  
NAME: \_\_\_\_\_

(first name)

(last name)

Signature of All Plan participants (including single-party Plans):

FOR ADDITIONAL INFORMATION,

[http://www.waterboards.ca.gov/waterrights/water\\_issues/programs/diversion\\_use/](http://www.waterboards.ca.gov/waterrights/water_issues/programs/diversion_use/)

This form is only accepted electronically for filing.