Alternate Reservoir Application Completeness Checklist Minimum Requirements (ORS 537.409)

For use by WRD staff only

Application #:	R-89885	Receipt #:	144922
Applicant Name:	Tyce Nelson/Duckcreek LLC	Amount Requested:	6.6575
Priority Date:	3/27/25-Amended Map.	Proposed Use:	multipurpose
County:	Marion	POD TRS & TL:	8S 3W 5;2400
WM #:	16	Caseworker:	Adam
Reviewed by:	Corie	Reviewed Date:	3/27/25
Landowner nam	e source withdrawn by ORS 538? ne, mailing address and telephone	e number provided.	s, return application and fees]
	utary listed. Notes: <u>NO WELLS-MUST HA</u> age application at the same time.	AVE GW APP TO USE A WELL A	AS A SOURCE. Cannot accept an E2
Reservoir Locat	ion. TRSQQ and tax lot provided.	Note: only 1 reservoir/pond	per application
Dam height, if a	applicable: 0		
Property owner	ship indicated?		
<u> </u>	es <u>not</u> own all the land is the affect NO (Note: this includes lands not owned by diversion works, and any roads or right	applicant, upon which the so	_
Application sign	ned by the landowner(s)? All parti	es noted as applicant	s must sign the application.
■ Completed Wa	itermaster review sheet, signed	and dated. Note: Must be	completed within last 12 months.
Will the rese	ervoir injure an existing water righ	t? 🗌 YES 🗹 🛭	10 .
If YES, can co	onditions be applied to mitigate i	njury? 🗌 YES 🔲 🏻	10
■ Completed OD	FW review sheet, signed and da	ted. Note: Must be complete	ed within last 12 months.
Will reservoi	ir pose a significant detrimental ir	npact to an existing fi	shery resource? YES NO
If YES, can co	onditions be applied to mitigate t	he impact? 🗹 YES 🗆] NO □ N/A
	nd-Use Form or receipt signed by on land-use form match the proposed use on t		ning department official enclosed? ed within the last 12 months.
_	I Description of all the property in title insurance meets this require		lication. A copy of a deed, land

■ Acc	eptable Map. Note: Requirement	ts set forth by the Cor	nmission; causes fatal fl	aw if not provided by the applicant.	
	Reservoir Location - noti Scale of the Map, even so Reference corner on map North directional symbol 1/41/4's clearly identified Reservoir clearly identified	cale such as 1" =	_		
Dam, or POD (if off-channel), coordinates referenced to a government land survey corner Note: If no dam, use coordinates to the center of reservoir. Fees: Amount of Water Requested: 6.6575 Name on Check: Aaron Court LLC					
	Exam Fee Due:	\$767			

Exam Fee Due:	\$767		
Exam Fee Submitted:	\$767		
Difference:	\$0		
Recording Fee Paid?	□Yes ✓No \$ 0		
Total:	\$ 767		

Oregon Water Resources Department Alternate Reservoir Application

🔏 Main

Help

Return

Contact Us

For impoundments less than 10 feet in height or storing less than 9.2 acre feet of water.

Today's Date: Thursday, March 27, 2025

Base Application Fee.		\$480.00
Proposed Dam Height in feet.	1 0	
Proposed Reservoir volume in Acre Feet.	6.6575	\$287.00
	, Subtotal:	\$767.00
Permit Recording Fee. ***		\$610.00
*** the Permit Recording Fee is not required when the application is submitted but, must be paid before a permit will be issued. It is fully refundable if a permit is not issued. If the recording fee is not paid prior to issuance of the Final Order, permit issuance will be delayed.	Recalculate	
Estimated cost of Permit Application		\$1,377.00

MONEY SLIP

DATE: 3.25	-25 RI	ECEIPT #:	144922	
RECEIVED FROM Ad /	von Cour	146	APPLICATION PERMIT TRANSFER	R-89885
CASH CHECK#//	- OTH	IER (IDENTIFY)		
CASH CHECK#/6	§	1	TOTAL REC'D	\$ 767.00
1083 TREASURY	4170 MISC	CASH ACCT.		
0407 COPIES OTHER:	(IDENTIFY)			\$
0243 Instream Lease	0244 Muni-	Water Mgmt. Plan	0245 Cd	ons. Water
1083 TREASURY	4270 WRD	OPERATING AC	CT.	
0407 COPY & TAPE F 0410 RESEARCH FEE 0408 MISC REVENUE TC162 DEPOSIT LIAB. 0240 EXTENSION OF WATER RIGHTS 0201 SURFACE WATE 0203 GROUND WATE 0205 TRANSFER WELL CONSTRE	EES SS ((IDENTIFY) (IDENTIFY) TIME SER SR \$ \$	EXAM FEE	0202	\$
0218 WELL DRILL CO LANDOWNER'S	NSTRUCTOR \$	LAMITEL	0219 0220	\$
0607 TREASURY 0467 HYDROELECTRIC				
	E FEE (FW/WRD)		LIC NUMBER	\$
HYDRO APPLICA				\$

SPECIAL INSTRUCTIONS:

RECEIVED OVER THE COUNTER

	RETURN	TO APPLICA	NT L	ETTER A	TTACHED
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