Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400)

Application <u>6-16890</u>	Township 35
Priority Date June 29, 2007	Range / W
Use(s)	Section 32 ? 33
Rate	POD Loc Guapper
County Hazion	POU Loc
W.M	Caseworker ALYSA Hucket
Applicant/Organization Name, Mailin	ng Address and Telephone Number, application signed in ink.
Source of water. If stored water, is the agreement for stored water must	e stored water component filed out, including a non-expired be included. (ORS 537.400)
Property ownership indicated.	
O If applicant does not own all t mailing address must	he land, the affected landowner's name and be listed.
	the land, a statement declaring the existence of either assement permitting access to land crossed by the proposed ditch submitted.
Groundwater development section (Pa	ge 2, Section 3 and/or Page 3, Section 2) or a well log report.
Proposed use of water. If supplementa	ıl, list primary water right acreage if applicable.
Enclosed Supplemental Form for each	proposed use.
Form I (Irrigation)	O Form M (Municipal or Quasi-Municipal)
O Form R (Mining)	O Form Q (Commercial or Industrial)
O Spring Description Sheet	
Amount of water from each source in feet (AF)	gallons per minute (GPM), cubic feet per second (CFS), or acre
Period of use	
Water management section (Please es	stimate if the water system has not been designed).
Resource Protection Section (Page 6,	Section 5).

9	Project schedule (If system is already complet	ed, indicate "existing").	
1/pa	For reservoir applications storing more than 9 preliminary plans and specifications for dam a	.2 acre feet, and a dam height of more than 10 feet, and impoundment are required.	
	O If the above is statement is checked, the m	nap must be prepared by a CWRE.	
8	All applicants (or the authorized agent with titl sign the application in ink.	le or authority if for an organization or corporation), must	
S.	You must include a Legal description of the property involved that includes a metes and bounds, or other government survey description. A copy of the deed, land sales contract or title insurance policy can provide this information, or you may submit a lot book report prepared by a title company. The Department will not accept a copy of the tax bill.		
9	A completed Land-Use Form or receipt signed officials. Date of signature must be within the	and dated by the appropriate planning department past 6 months.	
5	The map must meet all the minimum requirem	ents of OAR 690-310-0050.	
	Township, Range, Section	O Location of main canals, ditches, pipelines or flumes	
	O Place of use, 1/4, 1/4's and tax lot clearly identified	Even map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.)	
	O Location of each diversion point well or dam by reference to a recognized public land survey corner	North Directional Symbol	
	Number of acres per 1/4, 1/4, if irrigation, nursery, or agriculture	Other	
	Reference corner on map		
	S Each point of diversion coordinate		
0	Fees: Amount of water requested <u>667</u>	CA2	
	Base Fee \$	Total Exam Fee \$	
	1st CFS/AF	Total Paid \$	
	Addtn'l CFS/ AF @ =	Amount Due \$	
	Addtn' POD @		
	Reviewed by	Date Clarkm7	