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

Application <u>G-16915</u>	Township <u>16 S</u>
Priority Date 8.15.207	Range22 <i>E</i>
Use(s)	Section 22, 23, 26
Rate 3.33 ef	POD Loc SE SE 22, Sw NW 26
County Crook	POU Loc
W.M. Jarshy GIFFIN #11	Caseworker Korky K.
Applicant/Organization Name, Mailir	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 mailing address must	the 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	age 2, Section 3 and/or Page 3, Section 2) or a well log report.
Proposed use of water. If supplementa	al, list primary water right acreage if applicable.
© Enclosed Supplemental Form for each	n 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 ex	stimate if the water system has not been designed).
Resource Protection Section (Page 6,	Section 5).

Ø	Project schedule (If system is already completed, indicate "existing").		
MA.	For reservoir applications storing more than 9.2 acre feet, and a dam height of more than 10 feet, preliminary plans and specifications for dam and impoundment are required.		
,	If the above is statement is checked, the r	nap must be prepared by a CWRE.	
Ø	All applicants (or the authorized agent with title or authority if for an organization or corporation), must sign the application in ink.		
	other government survey description. A copy can provide this information, or you may substitute the provided that it is not accept a copy of the tax is a copy of tax is a copy o		
9	A completed Land-Use Form or receipt signed officials. Date of signature must be within the	and dated by the appropriate planning department e past 6 months.	
The map must meet all the minimum requirements of OAR 690-310-0050.			
	Township, Range, Section	Tocation of main canals, ditches, pipelines or flumes	
	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.)	
	Cocation 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 ACROPAGE ON MOD = 268 App = 265.9 5	
	Reference corner on map		
	Each point of diversion coordinate		
O Fees: Amount of water requested 3.33 cfc			
	Base Fee \$ 500 €	Total Exam Fee \$ 1200	
	1st CFS/AF 20000	Total Paid \$ 1500 [NCLUMES Kiscoreanic	
	3 Addtn'l CFS/ AF @ 100 = 300 =	Amount Due \$	
	1_Addtn' POD @ 200 = 200 000		
	Reviewed by	Date 8.16.2007	