Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff

tical.	Transfer of Manager			,
Application G (705)	Township	SEE	mar	
Priority Date 5-13-2008	Range	SEE	ares	
Use(s) PRIM IRRIG 148,53	A Section	SEE	mas	
Rate 2.11 CF3	POP Loc	565	MAC	
County JEFFERSON	POU Loc C	HART	on MA	Pare 1/4 1/4
W.M	Caseworker	BROOM	K G	
Applicant/Organization Name, Mai	ling Address and T	Telephone Nu	nber.	a bolidardo / /
Source of water. If stored water, is agreement for stored water must be incibe filled at the same time as a Reservoit the PROPOSED Reservoir application	luded. (ORS 537.4 ir or Alt Reservoir	100) NOTE:	A surface water app	lication cannot
The proposed source is or is not it is, return application and fees.	ircle one) withdray	vn from furthe	er appropriation, or	Division 538. If
Property ownership indicated.	THIES YOU	= 5		
O If applicant does not own a mailing address must be list		ected landown	er's name and	ord halps a
If applicant does not own a written authorization or an canal or other work must be	easement permitti	ng access to la		proposed ditch
Groundwater development section (Page 3 and 4, Sect	ion B) or a we	ell log report.	ZI CITE
Proposed use of water. If supplement				
Enclosed Supplemental Form for ea	ach proposed use.		HAT SEE	- THIS IS TROBA
Form I (Irrigation)	O Form M (M	funicipal or Q	uasi-Municipal)	ALC RIGHT
O Form R (Mining)	O Form Q (C	ommercial or	Industrial)	
O Spring Description Sheet		VSN.		
Amount of water from each source feet (AF)	in gallons per min	ute (GPM), cu	bic feet per second	(CFS), or acre
Period of use			and the state	

Water management section (Please estimate if the water system has not been designed).

De	Resource Protection Section (Page 6, Section	5).			
\$	Project schedule (If system is already completed, indicate "existing").				
0	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.				
	O If the above is statement is ehecked, the r	map must be prepared by a CWRE.			
4	All applicants (or the authorized agent with the sign the application in ink. Signature must be	tle or authority if for an organization or corpora e an original "wet" signature.	ation), mus		
4	other government survey description. A copy	roperty involved that includes a metes and bout of the deed, land sales contract or title insurant mit a lot book report prepared by a title compabill.	ice policy		
4		d and dated by the appropriate planning depart e past 12 months. Signature must be an original			
W	The map must meet all the minimum requiren	nents of OAR 690-310-0050.			
	Township, Range, Section	Location of main canals, ditches, pipelines flumes (if POA/POD is outside of POU)	s or		
	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.)			
	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	O Other TYE ENGRG	T. T.		
	Reference corner on map				
	Each point of diversion coordinate				
A	Fees: Amount of water requested 2	II CFS	ton la T		
	Base Fee \$ 500	Additional Use @=			
	1st CFS/AF 200	Total Exam Fees \$ 900			
	Addtn'l CFS/ AF @ = Addtn' POD @ =	Total Paid \$ 1200 Amount Due \$ Acc Feet PAD			
	Reviewed by: #/m	Date: 5-15-2008			

STATE OF OREGON '

WATER RESOURCES DEPARTMENT

RECEIPT# 92484

725 Summer St. N.E. Ste. A SALEM, OR 97301-4172

INVOICE # _

			-	3) 986-0904 (tax	3)			
ECEIVED FRO	M: (MONE)	Rive	r Kar	nch	APPLI	CATION	617	251
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CASH: C	CHECK:#	OTHER, (IF	NENTIEV)		TRAN	ISFER		
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0407	_ OTHER:	(IDENTIFY)					\$	
0243 I/S L	ease 024			ın 02	45 Cons. W	ater		
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	MISCELLANEOU	JS						
0407	COPY & TAPE FE	EES					\$	
0410	RESEARCH FEE	S					\$	
0408	MISC REVENUE	: (IDENTIFY	Y)				\$	
TC162	DEPOSIT LIAB.	(IDENTIFY)					\$	
0240	EXTENSION OF	TIME					\$	
	WATER RIGHTS:	:		EXAM FEE	3.0		RECOR	RD FEE
0201	SURFACE WATE	R		\$	020	2	\$	
0203	GROUND WATER	R		\$9000	020)4	\$300	$\mathcal{O}_{\mathcal{O}_{\mathcal{O}}}$
0205	TRANSFER			\$				
	WELL CONSTRU	ICTION		EXAM FEE			LICEN	SE FEE
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52.0	LANDOWNER'S				022	20	\$	
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	OTHER							
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Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal

Payment

24831

1,200.00

Original Amt.

Balance Due

1,200.00

5/7/2008

Check Amount

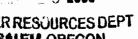
Discount











WATER RESOURCES DEPT SALEM OREGON

Date

4/28/2008

Type

Bill

Reference

08 Water









1.200.00



NEW APPLICATIONS (GROUND WATER, RESERVOIR, & SURFA	(CE) ROUTE SLIP
RECEIPTING POST CARD SENT SOUNCE & Hom 5-14-2008 DATA CENTER GEOLOGY REVIEW ENFORCEMENT YES NO NO OTHER	Caseworker: Brook Geffen 986-0808 Jeana Eastman 986-0859 Joel Plahn 986-0815 Kerry Kavanagh 986-0816
WATER RIGHTS SUPPORT	-
A "Standard Reservoir" storing 9.2 acre-feet or more of Water & has a dam height of 10.0 feet or greater needs to have a copy of the application & supplemental forms routed to "DAM SAFETY"	
ATTN: WATER RIGHTS SUPPORT>>>> Mark contents of file with application number; Update the WRIS Database with caseworkers in Route file to Caseworker.	Files