

Standard Application Completeness Checklist

Minimum Requirements (OAR 690-310-0040)(ORS 537.400)

This is the checklist used by WRD staff

Application S-87178 Township T 28 S
Priority Date May 23, 2008 Range R 5 W
Use(s) DOMESTIC Section 22
Rate 0.002 cfs POD Loc NE 1/4, SE 1/4
County DOUGLAS POU Loc _____
W.M. 15 Caseworker K GRAY

☒ Applicant/Organization Name, Mailing Address and Telephone Number.

☒ Source of water. If stored water, is the stored water component filed out, including a non-expired agreement for stored water must be included. (ORS 537.400) **NOTE: A surface water application cannot be filled at the same time as a Reservoir or Alt Reservoir if it will be for the use of the stored water under the PROPOSED Reservoir application (E2).**

☐ The proposed source is ^{with exception for this use} or is not (circle one) withdrawn from further appropriation, or Division 538. If it is, return application and fees.

☒ Property ownership indicated.

☐ If applicant does not own all the land, the affected landowner's name and mailing address must be listed.

☐ If applicant does not own all the land, a statement declaring the existence of either written authorization or an easement permitting access to land crossed by the proposed ditch canal or other work must be submitted.

☒ Groundwater development section (Page 3 and 4, Section B) or a well log report.

☐ Proposed use of water. If supplemental, list primary water right acreage if applicable.

☐ Enclosed Supplemental Form for each proposed use.

☐ Form I (Irrigation)

☐ Form M (Municipal or Quasi-Municipal)

☐ Form R (Mining)

☐ Form Q (Commercial or Industrial)

☐ Spring Description Sheet

☒ Amount of water from each source in gallons per minute (GPM), cubic feet per second 0.002 (CFS), or acre feet (AF)

☒ Period of use

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

☒ Resource Protection Section (Page 6, Section 5).

☒ Project schedule (If system is already completed, indicate "existing").

☒ 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 statement is checked, the map must be prepared by a CWRE.

☒ All applicants (or the authorized agent with title or authority if for an organization or corporation), must sign the application in ink. *Signature must be an original "wet" signature.*

☒ 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.

☒ A completed Land-Use Form or receipt signed and dated by the appropriate planning department officials. *Date of signature must be within the past 12 months. Signature must be an original "wet" signature.*

☒ The map must meet all the minimum requirements of OAR 690-310-0050.

☒ Township, Range, Section

☒ Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU)

☒ 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

☐ Other _____

☒ Reference corner on map

☒ Each point of diversion coordinate

☐ Fees: Amount of water requested 0.002 cfs

Base Fee \$ 500

Additional Use @ _____ = _____

1st CFS/AF 200

Total Exam Fees \$ 700⁰²

~~Addn'l CFS/ AF @ _____ = _____~~

Total Paid \$ _____

~~Addn' POD @ _____ = _____~~

Amount Due \$ _____

Reviewed by: JS

Date: 5-23-2008

STATE OF OREGON
WATER RESOURCES DEPARTMENT

725 Summer St. N.E. Ste. A
SALEM, OR 97301-4172
(503) 986-0900 / (503) 986-0904 (fax)

RECEIPT # **92609**

INVOICE # _____

RECEIVED FROM: Hans Beck

BY: _____

APPLICATION	587178
PERMIT	
TRANSFER	

CASH: ☐ CHECK:# 12646 OTHER: (IDENTIFY) ☐ _____

TOTAL REC'D \$ 700.00

1083 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES	\$
OTHER: (IDENTIFY) _____	\$

0243 I/S Lease _____ 0244 Muni Water Mgmt. Plan _____ 0245 Cons. Water _____

4270 WRD OPERATING ACCT

MISCELLANEOUS

0407 COPY & TAPE FEES	\$
0410 RESEARCH FEES	\$
0408 MISC REVENUE: (IDENTIFY) _____	\$
TC162 DEPOSIT LIAB. (IDENTIFY) _____	\$
0240 EXTENSION OF TIME	\$

WATER RIGHTS:

0201 SURFACE WATER	EXAM FEE \$ <u>700.00</u>	0202	RECORD FEE \$
0203 GROUND WATER	\$	0204	\$
0205 TRANSFER	\$		

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR	EXAM FEE \$	0219	LICENSE FEE \$
LANDOWNER'S PERMIT		0220	\$

OTHER (IDENTIFY) _____

0536 TREASURY 0437 WELL CONST. START FEE

0211 WELL CONST START FEE	\$	CARD #	
0210 MONITORING WELLS	\$	CARD #	
OTHER (IDENTIFY) _____			

0607 TREASURY 0467 HYDRO ACTIVITY LIC NUMBER

0233 POWER LICENSE FEE (FW/WRD)		\$
0231 HYDRO LICENSE FEE (FW/WRD)		\$
HYDRO APPLICATION		\$

TREASURY OTHER / RDX

FUND _____ TITLE _____
OBJ. CODE _____ VENDOR # _____
DESCRIPTION _____

\$ _____

RECEIPT: **92609**

DATED: 5/23/08 BY: Lisa Paddle

NEW APPLICATIONS (GROUND WATER, RESERVOIR, & SURFACE) ROUTE SLIP

RECEIPTING ☒ 5/23/08
POST CARD SENT ☐
DATA CENTER ☐

GEOLOGY REVIEW YES ☐ NO ☐
ENFORCEMENT YES ☐ NO ☐

WATER RIGHTS SUPPORT ☐

Caseworker:

Brook Geffen	986-0808	☐
Jeana Eastman	986-0859	☐
Joel Plahn	986-0815	☐
Kerry Kavanagh	986-0816	☒

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 name.
Route file to Caseworker.**

