

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R-87105 County WASHINGTON
Priority Date 5-27-2008 Township 2S Range 1W Section 3 Taxlot _____
Use MULTI-PURPOSE Caseworker JESSICA EASTMAN
Amount (AF) 4.6 AF Watermaster 18

*Minimum Requirements (ORS 537.409)

- Landowner Name, Mailing Address* and Telephone Number.
- Source* and tributary listed. **NO WELLS-MUST HAVE GW APP TO USE A WELL AS A SOURCE !!**
- Reservoir Location- Township, Range, Section, Quarter Quarter, Taxlot
- Dam height*, if applicable
- Total Quantity * of Storage Requested: 4.6
- Proposed Use of the water....Cannot accept application for use of this stored water at the same time (E2)
- Property ownership indicated? * If applicant does not own all the land, is the affected landowner's name and mailing address listed? (Including: lands not owned by applicant, upon which the source is locatedor..... that are crossed by the diversion works. This includes any roads or rights-of-way.)
- Environmental Impact section completed? Not fatal if omitted
- Application signed by the landowner(s)? All parties noted as applicants must sign the application. *Must be an original "wet" signature.*
- Completed Land-Use Form * or receipt signed by the appropriate planning department official enclosed? *Does the use on land-use form match the proposed use on the application? Must be an original "wet" signature within the last 12 months.*
- Acceptable map ** Indicates requirements of standards set forth by the Commission and causes fatal flaw if not provided by the applicant.

Reservoir Location - noting Township, Range, Section, 1/4 1/4 and Tax Lot number(s)* _____

Scale of the Map (not less than 1"-1320') **

Reference corner on map

North Directional Symbol

1/4 1/4's clearly identified

Reservoir clearly identified

Dam or POD (If off channel) Location coordinates referenced to a government survey corner* If no dam, use coordinates to center of reservoir.**

Fees enclosed*?

Base Fee\$ 80

plus\$ 100

plus\$ _____

Total Paid \$ 180

Total Fees \$ 180

Completeness Check by: KS Date: 5-28-2008

Groups/wr/Customer Service Group/Alt-Review-checklist.doc 11-26-2007 jks

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**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 # **92627**

INVOICE # _____

RECEIVED FROM: Lake Terrace
BY: _____

APPLICATION	<u>R87155</u>
PERMIT	
TRANSFER	

CASH: CHECK:# 541 OTHER: (IDENTIFY)

TOTAL REC'D \$ 180.00

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:			RECORD FEE
0201	SURFACE WATER	\$ <u>120.00</u>	0202 \$
0203	GROUND WATER	\$	0204 \$
0205	TRANSFER	\$	
WELL CONSTRUCTION			LICENSE FEE
0218	WELL DRILL CONSTRUCTOR	\$	0219 \$
	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: **92627**

DATED: 5/27/08 BY: [Signature]