

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R-87187
Priority Date 5-30-2008
Use MULTI
Amount (AF) 2

County Bent
Township 10S Range 4W Section 26 Taxlot _____
Caseworker S. KERRY
Watermaster POC

*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: 2 AF
- 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's clearly identified
 - Reservoir clearly identified *
 - Dam or POD (If off channel) Location coordinates referenced to a government land survey corner* If no dam, use coordinates to center of reservoir.**

Fees enclosed*?

Base Fee\$ 80

plus\$ 40 (2x20)

plus\$ _____

Total Paid \$ 120

Total Fees \$ 120⁰⁰

Completeness Check by: [Signature]

Date: 5-30-2008

**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 # **92689**

INVOICE # _____

RECEIVED FROM: Scenic Hill Farm
BY: _____

APPLICATION	
PERMIT	
TRANSFER	

CASH: CHECK:# X2260 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	\$
0203 GROUND WATER	\$
0205 TRANSFER	\$
WELL CONSTRUCTION	
0218 WELL DRILL CONSTRUCTOR	\$
LANDOWNER'S PERMIT	\$
OTHER (IDENTIFY)	\$

Handwritten notes:
R-87187 - 120.00
S-87188 280.00 exam
300.00 Recording

EXAM FEE	RECORD FEE
\$ 400.00	\$ 300.00
\$	\$
EXAM FEE	LICENSE FEE
\$	\$
\$	\$

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 (FWWRD)	\$
0231 HYDRO LICENSE FEE (FWWRD)	\$
HYDRO APPLICATION	\$

TREASURY OTHER / RDX

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

RECEIPT: **92689**

DATED: 5/30/08 BY: [Signature]