

Standard Application Completeness Checklist

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

Application G-16934 Township 35 S
 Priority Date 9-21-2007 Range 2 W
 Use(s) IRRIG Section 12
 Rate 0.15 CFS POA Loc (2) NW SE
 County JACKSON POU Loc SEE MAP
 W.M. _____ Caseworker JEANA EASTMAN

- Applicant/Organization Name, Mailing Address and Telephone Number, application signed in ink.
- 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)
- 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 2, Section 3 and/or Page 3, Section 2) 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 (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.
- 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 6 months.*

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

- Township, Range, Section
- Location 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.)
- 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 CONSULTANT
HOLLIE CANNON
- Reference corner on map
- Each point of diversion coordinate

Fees: Amount of water requested _____

| | |
|----------------------------------|--|
| Base Fee \$ _____ | Total Exam Fee \$ <u>900</u> |
| 1st CFS/AF _____ | Total Paid \$ <u>1000</u> |
| ___ Addn'l CFS/ AF @ ___ = _____ | Amount Due \$ <u>200 MORE FOR RECORD FEE</u> |
| ___ Addtn' POD @ ___ = _____ | |
| Reviewed by <u>HJM</u> | Date <u>9-24-2007</u> |

**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 # **89791**

INVOICE # _____

RECEIVED FROM: Leonard + Carol Ferrara

APPLICATION 17-16934

BY: _____

PERMIT _____

TRANSFER _____

CASH: CHECK:# 205D OTHER: (IDENTIFY)

TOTAL REC'D \$ 1000.00

1083 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES PCA 46111 \$ _____
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) _____ \$ _____
TC-162 DEPOSIT LIAB. (IDENTIFY) _____ \$ _____
0240 EXTENSION OF TIME \$ _____

WATER RIGHTS:

| | | | |
|--------------------|------------------|------|------------------|
| 0201 SURFACE WATER | EXAM FEE | 0202 | RECORD FEE |
| 0203 GROUND WATER | \$ <u>900.00</u> | 0204 | \$ <u>100.00</u> |
| 0205 TRANSFER | EXAM FEE | | |

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: **89791**

DATED: 9/21/07 BY: [Signature]

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