

Standard Application Completeness Checklist

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

This is the checklist used by WRD staff

Application 87104 Township 9S
Priority Date 3-3-2008 Range 5W
Use(s) IRRIG RESRVR MUTC Section 25 & 36
3 COMM AQUATIC LIFE
Rate(s) LRG RES 150 AF SM RES 9.19 AF SHEET FLOW 2 CFS POD Loc SEE MAP
County POLK POU Loc SEE MAP
W.M. 16 Caseworker BROOK G

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)

The proposed source is is not (circle one) withdrawn from further appropriation, or Division 538. If it is, return application and fees. WITHDRAWN 2 MAP

Property ownership indicated. YES!

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 (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 ERIC U.
CWRE

Reference corner on map

Each point of diversion coordinate

Fees: Amount of water requested REFER Pg 4

Base Fee \$ _____

Additional Use @ _____ = _____

1st CFS/AF _____

Total Exam Fees \$ _____

_____ Addtn'l CFS/ AF @ _____ = _____

Total Paid \$ _____

_____ Addtn' POD @ _____ = _____

Amount Due \$ _____

ONE CHECK
4 APPLIC

ADDITIONAL CHECK
BEING SUBMITTED
BY STUNTNER

Reviewed by: XPM
ALSO WITH BROOK G.

Date: JUL 6 2008

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **91719**

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

INVOICE # _____

RECEIVED FROM: STUNTZNER ENGINEERING & FORESTRY LLC	APPLICATION Sublow
BY: _____	PERMIT _____
	TRANSFER _____

CASH: CHECK.# **X 1500** OTHER: (IDENTIFY) TOTAL REC'D **\$ 1470.00**

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 6-17017 = \$600.00	\$	
0410 RESEARCH FEES 5-87104 = \$870.00	\$	
0408 MISC REVENUE: (IDENTIFY) _____	\$	
TC162 DEPOSIT LIAB. (IDENTIFY) _____	\$	
0240 EXTENSION OF TIME _____	\$	
WATER RIGHTS:		RECORD FEE
0201 SURFACE WATER	EXAM FEE	\$
0203 GROUND WATER	\$ 870.00	\$
0205 TRANSFER	\$ 600.00	\$
	\$	
WELL CONSTRUCTION	EXAM FEE	LICENSE FEE
0218 WELL DRILL CONSTRUCTOR	\$	\$
LANDOWNER'S PERMIT		\$
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: **91719** DATED: **3/12/08** BY: *[Signature]*

STATE OF OREGON
WATER RESOURCES DEPARTMENT

RECEIPT # **91617**

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

INVOICE # _____

RECEIVED FROM: Olsen Agricultural
 BY: Company

APPLICATION	<u>See Below</u>
PERMIT	
TRANSFER	

CASH: CHECK:# X 27157 OTHER: (IDENTIFY)

TOTAL REC'D \$ 2,800.00

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		<u>R-87105 ATRES 280 Exam</u>	
0407	COPY & TAPE FEES	<u>87104 Irr+3 870 Exam</u>	\$
0410	RESEARCH FEES	<u>R 87103 stan Res 1030 Exam</u>	\$
0408	MISC REVENUE: (IDENTIFY)	<u>G 17017 700 Exam</u>	\$
TC162	DEPOSIT LIAB. (IDENTIFY)		\$
0240	EXTENSION OF TIME		\$
WATER RIGHTS:			
0201	SURFACE WATER	EXAM FEE \$ <u>2180</u>	0202 RECORD FEE \$
0203	GROUND WATER	\$ <u>700.00</u>	0204 RECORD FEE \$
0205	TRANSFER	\$	
WELL CONSTRUCTION			
0218	WELL DRILL CONSTRUCTOR	EXAM FEE \$	0219 LICENSE FEE \$
	LANDOWNER'S PERMIT		0220 LICENSE FEE \$
	OTHER (IDENTIFY)		

0536 TREASURY 0437 WELL CONST. START FEE

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

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

TREASURY OTHER / RDX

FUND	TITLE	
OBJ. CODE	VENDOR #	
DESCRIPTION		\$

RECEIPT: **91617**

DATED: 3/3/08 BY: L. Paulle

Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal

5- 87104