Standard Applica	tion Comp	oleteness	Checkl	ist 🗡	
Standard Applica Minimum Requireme This is the ch	nts (OAR 690-310-0 necklist used by W	040)(ORS 537.4 /RD staff رومی	00) こくい F	2/Cour	Ter
		2	BOATWRIG LISA	J. & Jos	er P.
Application 87207	Township	SEE	MAP		
Priority Date 6-25-208	Range	See	MAC_		
Use(s) Quyri - Muni	Section	SEE	MAC		
Rate (1.36 CF5	POD Loc 🦪	STRING	s SECTN	33 65 8	3~
County TAMH & POZIK	POU Loc	Service	- Boux	DARIES	
W.M.	Caseworker	Juez	P		

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The proposed source is or (is not (circle one) withdrawn from further appropriation, or Division 538.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

Property ownership indicated. FTATES NO.

Let 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.

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

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

Genclosed Supplemental Form for each proposed use.

O Form I (Irrigation) Form M (Municipal or Quasi-Municipal)

- O Form R (Mining)
- O Form Q (Commercial or Industrial)
- O 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.

O If the above is 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. <u>The Department will not accept a copy of the tax bill.</u>

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

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

O Place of use, 1/4, 1/4's and tax lot clearly identified

O Even map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.)

Ó North Directional Symbol

O Other CWRE ROATWRIGHT

O Location of each diversion point well or dam by reference to a recognized public land survey corner

Number of acres per 1/4, 1/4, if irrigation, nursery, or agriculture

O Reference corner on map

• Each point of diversion coordinate

Fees: Amount of water requested \_\_\_\_\_\_\_ 9.36\_\_\_\_\_

Base Fee \$\_\_\_\_\_

1st CFS/AF

 $\underline{ Addtn'l CFS/ AF @ } = \underline{ Addtn' POD @ } =$ 

CFS	می م
Additional Use @_	
Total Exam Fees \$	700
Total Paid \$	700

Amount Due \$ Rec. Fee DUE

Reviewed by: ATM

Date: 6-25-2008

JOEZ CLATHAN groups/wr/Customer Service Group/App-checklist-standard1.doc

05-09-2008 jks

STATE OF OREGON   WATER RESOURCES DEPARTMENT   725 Summer St. N.E. Ste. A   SALEM, OR 97301-4172   INVOICE #   (503) 986-0900 / (503) 986-0904 (fax)								
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