

Standard Application Completeness Checklist

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

This is the checklist used by WRD staff

E-II

E-II

EXPEDITED SECONDARY

Application 87206 Township 28 S
 Priority Date 6-24-2008 Range 7 W
 Use(s) IRRIG 2 Section 27
PRIM ACRES
 Rate 5 AF STORED WATER POD Loc NE SW
 County DOUG POU Loc NW SW
 W.M. 15 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) *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The proposed source is or is not (circle one) withdrawn from further appropriation, or Division 538.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. STORED WATER

Property ownership indicated. STATES NO!

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) 2 ACRES

Period of use

Water management section (Please estimate if the water system has not been designed).

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 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. SIGNATURES

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. Call for legal & recording fee (for ab 705)

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 DOUG CNTT W/M OFFICE MAP ASSIST
Reference corner on map
Each point of diversion coordinate

Fees: Amount of water requested 5 AF

Base Fee \$
Additional Use @ =
1st CFS/AF
Total Exam Fees \$ 325
Addtn'l CFS/ AF @ =
Total Paid \$ 325
Addtn' POD @ =
Amount Due \$ REC FEE DUE

Reviewed by: HMM Date: 6-25-2008

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **93011**

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

INVOICE # _____

RECEIVED FROM: Brian & Carolyn
BY: McCutbough

APPLICATION	87206
PERMIT	
TRANSFER	

CASH: CHECK.# 1015 OTHER: (IDENTIFY)

TOTAL REC'D \$ 325.00

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	EXAM FEE \$ <u>325.00</u>	0202	RECORD FEE \$
0203	GROUND WATER	\$	0204	\$
0205	TRANSFER	\$		

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

TREASURY OTHER / RDX

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

RECEIPT: **93011**

DATED: 10/24/08 BY: J. Paul

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