

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

WM ERIC U.
PROTECT

Application R 87233

County GRANT

NW SW

Priority Date 7-17-2008

Township 13 S Range 30 E Section 18 Taxlot 1900

Use MULTI - P

Caseworker BROOK G

Amount (AF) 1.5 AF

Watermaster 4

*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: 1.5 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 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

plus\$

Total Paid \$ 120

Total Fees \$ 120

Completeness Check by: HTM

Date: 7-25-2008

**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 # **93351**

INVOICE # _____

RECEIVED FROM: JOHNE STINER
BY: _____

APPLICATION	<u>R87233</u>
PERMIT	
TRANSFER	

CASH: ☐ CHECK: # 1128 ☒ OTHER: (IDENTIFY) ☐

TOTAL REC'D \$ 120.00

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 46111

0407	COPY & TAPE FEES	\$
0410	RESEARCH FEES	\$
0408	MISC REVENUE: (IDENTIFY) _____	\$
TC162	DEPOSIT LIAB. (IDENTIFY) _____	\$
0240	EXTENSION OF TIME	\$

WATER RIGHTS:

0201	SURFACE WATER <u>ALT RES</u>	<u>\$ 120.00</u>	0202		\$
0203	GROUND WATER	\$	0204		\$
0205	TRANSFER	\$			

WELL CONSTRUCTION

0218	WELL DRILL CONSTRUCTOR	\$	0219		\$
	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: **93351**

DATED: 7/17/08 BY: [Signature]

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