Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff EXICAL TEXT

Application 87240	Township	32			
Priority Date 7-24- 2008	Range	4 w			
Use(s) IRRIG ARRES	Section	75	36		
Rate 8 AF	POD Loc	35 SE	SE	-	
County YAMH	POU Loc	SEE	our	_	
W.M	Caseworker	JEANA	\in	-	
Applicant/Organization Name, Mailin	g Address and T	elephone Numb	er.		
Source of water. If stored water, is the agreement for stored water must be included be filled at the same time as a Reservoir of the PROPOSED Reservoir application (Example 1). The proposed source is or is not circuit is, return application and fees. Property ownership indicated.	ded. (ORS 537.4) or Alt Reservoir (E2). ele one) withdraw	00) NOTE: A s if it will be for th	urface water he use of the s	application cannot stored water under	
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 (Pa	ge 3 and 4, Secti	ion B) or a well-	log report.		
Proposed use of water. If supplementa	ıl, list primary wa	ater right acreag	e if applicable	e.	
Enclosed Supplemental Form for each	proposed use.				
Form I (Irrigation)	O Form M (M	Iunicipal or Qua	si-Municipal))	
O Form R (Mining)	O Form Q (Co	ommercial or Inc	dustrial)		
O Spring Description Sheet				~8	
Amount of water from each source in feet (AF)	gallons per minu	ute (GPM), cubic	c feet per seco	ond (CFS), or acre	
Period of use Water management section (Please estimate if the water system has not been designed).					

X	Resource Protection Section (Page 6, Section	5).			
b	Project schedule (If system is already completed, indicate "existing").				
0	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 elecked, the map must be prepared by a CWRE.				
4	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.				
À	other government survey description. A copy	of the deed, land sales contract or title insurance policy nit a lot book report prepared by a title company. The bill.			
4	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.				
9	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 Reference corner on map	O Other Curle BALL			
G	Fees: Amount of water requested STERENT WATER ONLY EXP. IFECUME				
	Base Fee \$ 250	Additional Use @			
	1st CFS/AF	Total Exam Fees \$ 37a			
	S Addtn'l CFS/ AF @ 15 = 120 Addtn' POD @=	Total Paid \$ 565 Amount Due \$ PARTAZ REC FEE 19 REC FEE DUE - 145			
	Reviewed by: 4711	Date: 7-25-2008			

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 93446

725 Summer St. N.E. Ste. A SALEM, OR 97301-4172

INVOICE #_

(503) 986-0900 / (503) 986-0904 (fax) **APPLICATION** RECEIVED FROM: Columbia Empire Farm Inc PERMIT BY: TRANSFER CASH: CHECK:# OTHER: (IDENTIFY) TOTAL REC'D 201105 4170 WRD MISC CASH ACCT RECEIVED 1083 TREASURY 0407 COPIES **OVER THE COUNTER** 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 \$ MISC REVENUE: (IDENTIFY) 0408 DEPOSIT LIAB. (IDENTIFY) TC162 \$ EXTENSION OF TIME 0240 RECORD FEE WATER RIGHTS: **EXAM FEE** 0201 SURFACE WATER 0202 0203 GROUND WATER 0204 TRANSFER 0205 LICENSE FEE **EXAM FEE** WELL CONSTRUCTION \$ 0219 0218 WELL DRILL CONSTRUCTOR 0220 LANDOWNER'S PERMIT OTHER 0536 **TREASURY** 0437 WELL CONST. START FEE 0211 WELL CONST START FEE CARD # CARD# 0210 MONITORING WELLS \$ OTHER (IDENTIFY) 0467 HYDRO ACTIVITY LIC NUMBER 0607 TREASURY \$ 0233 POWER LICENSE FEE (FW/WRD) \$ HYDRO LICENSE FEE (FW/WRD) 0231 \$ HYDRO APPLICATION TREASURY OTHER / RDX _____ TITLE VENDOR # OBJ. CODE \$ DESCRIPTION DATED: 7 24 08 RECEIPT: Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal