

# Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87249 County UMAT  
Priority Date AUG 4 2008 Township SN Range 36E Section 22 Taxlot 100  
Use MULTI-P Caseworker BRAD G.  
Amount (AF) 5 Watermaster 5

## \*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: 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 located .....or..... 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. Revised

- 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'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\$ 100(5+10)  
plus\$ \_\_\_\_\_

REAR BY EMAIL  
AUG 5, 2008  
WITH APPLIC  
RESPONSE

Total Paid \$ 180

Total Fees \$ 180

Completeness Check by: HTM

Date: AUG 5 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 # **93590**

INVOICE # \_\_\_\_\_

RECEIVED FROM: Matthew + Markene Steiner  
BY: \_\_\_\_\_

APPLICATION	R 87249
PERMIT	
TRANSFER	

CASH:  CHECK:#  2622 OTHER: (IDENTIFY)

TOTAL REC'D \$ 180.00

**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	RECORD FEE
<i>Att Res</i>	\$ 180.00	\$
0203 GROUND WATER	\$	\$
0205 TRANSFER	\$	

**WELL CONSTRUCTION**

0218 WELL DRILL CONSTRUCTOR	EXAM FEE	LICENSE FEE
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 (FWWRD)	\$
0231 HYDRO LICENSE FEE (FWWRD)	\$
HYDRO APPLICATION	\$

**TREASURY OTHER / RDX**

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

RECEIPT: **93590**

DATED: 8/4/08 BY: J. Passalunghi

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