

# Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87257  
Priority Date 8-14-2008  
Use MULTI-P  
Amount (AF) TWO

County JACKSON SE SW  
Township 38 S Range 2 W Section 31 Taxlot 200  
Caseworker SEANA EASTMAN  
Watermaster 13

## \*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: Two

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. MAP REPAIRED BY FAX INITIALED.

Reservoir Location - noting Township, Range, Section, 1/4 1/4 and Tax Lot number(s)\* 8-15-08

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

2 x 20

plus\$ \_\_\_\_\_

Total Paid \$ 120

Total Fees \$ 120

Completeness Check by: HTM

Date: 8-15-2008

**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 # **93738**

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

RECEIVED FROM: John + Susan  
BY: Mainwaring

APPLICATION	R87257
PERMIT	
TRANSFER	

CASH:  CHECK:# 4825 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**

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>Att Res</u>	EXAM FEE	0202	RECORD FEE
	\$ <u>120.00</u>		\$
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 (FW/WRD)	\$
0231 HYDRO LICENSE FEE (FW/WRD)	\$
HYDRO APPLICATION	\$

**TREASURY OTHER / RDX**

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

RECEIPT: **93738**

DATED: 8/14/08 BY: [Signature]

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