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

•						
Application G_17091	Township	2	N		_	
Priority Date 8-8-2008	Range	13	E			
Use(s)	_ Section		٥			
Rate Grm CFS 4 AF	PO <b>P</b> Loc	5 m	K/e		_	
County WASCO	POU Loc	SEE	<u> </u>	W	_	
W.M	Caseworker_	KERR	<u>'</u>	<u> </u>	-	
Applicant/Organization Name, Mailing Source of water. If stored water, is the agreement for stored water must be inclused be filled at the same time as a Reservoir the PROPOSED Reservoir application (Source is or is not circuit is, return application and fees.  Property ownership indicated.  O If applicant does not own all mailing address must be listed.  O If applicant does not own all written authorization or an ecanal or other work must be	the land, the affects assement permitti	omponent filed 100) NOTE: if it will be for what will be for what from further ected landown ment declaring	d out, is A surfa r the us er appro	ce water se of the sopriation, me and	application constored water under the stored water under the store of	annot inder 538. If
Groundwater development section (Pa	age 3 and 4, Sect	tion B) or a we	ell log 1	eport.		
Proposed use of water. If supplement	al, list primary w	ater right acre	age if a	applicable	e.	
Enclosed Supplemental Form for each	h proposed use.					
Form I (Irrigation)	O Form M (M	Aunicipal or Q	uasi-M	(unicipal)	)	
O Form R (Mining)	O Form Q (C	commercial or	Industi	rial)		
O Spring Description Sheet						
Amount of water from each source in feet (AF)	n gallons per min	ute (GPM), cu	ibic fee	t per seco	ond (CFS), or	acre
Deriod of use						

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

W	Resource Protection Section (Page 6, Section	5).						
P	Project schedule (If system is already completed, indicate "existing").							
Ó	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.							
٠.	O If the above is statement is checked, the r	nap must be prepared by a CWRE.						
J.	All applicants (or the authorized agent with the sign the application in ink. Signature must be	tle or authority if for an organization or corporation), must e an original "wet" signature.						
À	other government survey description. A copy	roperty involved that includes a metes and bounds, or of the deed, land sales contract or title insurance policy mit a lot book report prepared by a title company. The bill.						
	· •	d and dated by the appropriate planning department e past 12 months. Signature must be an original "wet"						
de	The map must meet all the minimum requiren	nents of OAR 690-310-0050.						
\	O Township, Range, Section	O Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU)						
	O Place of use, 1/4, 1/4's and tax lot clearly identified	O Even map scale not less than $4'' = 1$ mile (example: $1'' = 100$ ft, $1'' = 200$ ft, etc.)						
	O Location of each diversion point well or dam by reference to a recognized public land survey corner	O North Directional Symbol						
	O Number of acres per 1/4, 1/4, if irrigation, nursery, or agriculture	O Other CURE LARRY TOLL TERMESON ENGRG						
	O Reference corner on map							
<b>O</b>	O Each point of diversion coordinate  Z (a)  Fees: Amount of water requested G-rm	CHECK SENT 15 1446 JUNE INCORRECT AMOUNT FS F AF REQUIRES 1320 EXAM						
	Base Fee \$	Additional Use @ 200 = 600  Total Exam Fees \$ 1320  Total Paid \$ Firest Cyter \$1020.  Amount Due \$ Pre FEES PAID  BY PHONE JANA WEBS AUG 11  2008  Date: Aug 11, 2008  CK#2						

## STATE OF OREGON

## WATER RESOURCES DEPARTMENT

RECEIPT # 93659

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

INVOICE # \_\_\_

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	HECK:# ✓ 4249	OTHER: (ID	ENTIFY)		TOTAL		\$1020.0
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0407	COPIES						\$
	OTHER:	(IDENTIFY)				_	\$
0243 I/S Le	ase 024	4 Muni Wate	er Mgmt. Pla	ın 02	245 Cons. W	ater	_
	V to reduce to	4270	WRD O	PERATING	ACCT		4.305.54-3
	MISCELLANEOU	IS					
0407	COPY & TAPE FE	ES					\$
0410	RESEARCH FEE	S					\$
0408	MISC REVENUE:	(IDENTIFY	()				\$
TC162	DEPOSIT LIAB.	(IDENTIFY)				_	\$
0240	EXTENSION OF	TIME					\$
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0205	TRANSFER			\$			
	WELL CONSTRU	ICTION		EXAM FEE			LICENSE FEI
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	LANDOWNER'S	PERMIT			022	0	\$
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STATE OF OREGON WATER RESOURCES DEPARTMENT 725 Summer St. N.E. Ste. A RECEIPT # 93715 INVOICE #\_ SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-Q904 (fax) **APPLICATION** RECEIVED FROM: PERMIT BY: TRANSFER CHECK:# OTHER: (IDENTIFY) CASH: TOTAL REC'D WRD MISC CASH ACCT 1083 TREASURY 4170 \$ 0407 COPIES \$ (IDENTIFY) OTHER: 0244 Muni Water Mgmt. Plan\_\_ 0245 Cons. Water 0243 I/S Lease\_ 4270 WRD OPERATING ACCT **MISCELLANEOUS** \$ 0407 **COPY & TAPE FEES** \$ 0410 RESEARCH FEES \$ 0408 MISC REVENUE: (IDENTIFY) \$ DEPOSIT LIAB. (IDENTIFY) TC162 EXTENSION OF TIME 0240 RECORD FEE WATER RIGHTS: EXAM FEE 0201 SURFACE WATER 0202 \$ 300,00 \$300<u>.U</u> 0203 **GROUND WATER** 0204 **TRANSFER** 0205 LICENSE FEE **EXAM FEE WELL CONSTRUCTION** \$ 0219 WELL DRILL CONSTRUCTOR 0218 \$ 0220 LANDOWNER'S PERMIT OTHER (IDENTIFY) 0437 WELL CONST. START FEE 0536 TREASURY

0211	WELL CONST STA	RT FEE	\$	CARD #	
0210	MONITORING WE	LLS	\$	CARD #	
	OTHER	(IDENTIFY)			
0607	TREASURY	0467 HYD	RO ACTIVITY	LIC NUMBER	
0233	POWER LICENSE	FEE (FW/WRD)			\$
0231	HYDRO LICENSE		\$		
	HYDRO APPLICAT	ION			\$
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DESCRIPTION \_

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DATED:

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