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

Application 6-1711	Township	45
Priority Date 9-10-2008	Range	IW
Use(s) Newsony	Section	8
Rate Oils els	POD Loc	muly, Sin 1/4
County Harrow	POU Loc	· · · · · · · · · · · · · · · · · · ·
W.M	Caseworker_	Brook
Applicant/Organization Name, Mailing	g Address and	Telephone Number.
agreement for stored water must be included be filled at the same time as a Reservoir of the PROPOSED Reservoir application (E	led. (ORS 537. or Alt Reservoir (2).	component filed out, including a non-expired 400) NOTE: A surface water application cannot r if it will be for the use of the stored water under two from further appropriation, or Division 538. If
it is, return application and fees.		
Property ownership indicated.		
 If applicant does not own all the mailing address must be listed 		ected landowner's name and
	sement permit	ment declaring the existence of either ting access to land crossed by the proposed ditch
O Groundwater development section (Page	ge 3 and 4, Sec	etion B) or a well log report.
O Proposed use of water. If supplementa	l, list primary v	water right acreage if applicable.
Enclosed Supplemental Form for each	proposed use.	
Form I (Irrigation)	O Form M (Municipal or Quasi-Municipal)
O Form R (Mining)	O Form Q (Commercial or Industrial)
O Spring Description Sheet		
Amount of water from each source in feet (AF)	gallons per mi	nute (GPM), cubic feet per second (CFS), or acre
Period of use 7-1 > 10-3/ Water management section (Please es	timate if the w	ater system has not been designed).

Resource Protection Section (Page 0, Section	011 5).							
Project schedule (If system is already comp	Project schedule (If system is already completed, indicate "existing").							
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 checked, the	O If the above is statement is checked, the map must be prepared by a CWRE.							
All applicants (or the authorized agent with sign the application in ink. Signature must	title or authority if for an organization or corporation), must be an original "wet" signature.							
other government survey description. A co	e property involved that includes a metes and bounds, or py of the deed, land sales contract or title insurance policy ubmit a lot book report prepared by a title company. The x bill.							
•	ned and dated by the appropriate planning department the past 12 months. Signature must be an original "wet"							
The map must meet all the minimum requir	ements of OAR 690-310-0050.							
Township, Range, Section	The 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	O Other							
Reference corner on map								
O Each point of diversion coordinate								
O Fees: Amount of water requested	3 cfe							
Base Fee \$	Additional Use @							
1st CFS/AF 200	Total Exam Fees \$ 700°							
Addtn'l CFS/ AF @ = Addtn' POD @ =	Total Paid \$Amount Due \$							
Reviewed by:	Date: 9.10.2008							

STATE OF OREGON WATER RESOURCES DEPARTMENT

RECEIPT # 94055

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

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