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

•		•	•					
Application	87292	Township	26 S		-			
Priority Date	9-22-2008	Range	_G w					
Use(s)	m Exf	Section	_23					
Rate <u>0,01</u>	<u>CFS</u>	POD Loc	Mw	NE	-			
County	Douce	POU Loc	Mw	NE	- -			
W.M		Caseworker _	BROOK	G	-			
Source of water. agreement for stored be filled at the same the PROPOSED Re	nization Name, Mailing. If stored water, is the dwater must be included time as a Reservoir exervoir application (Exervoir application)	e stored water co ded. (ORS 537.4 or Alt Reservoir E2).	omponent filed ou 100) <i>NOTE:</i> A su if it will be for th	it, including a surface water of the s	application cannot tored water under			
	lication and fees.		/					
Property owners	ship indicated.	MIES	ES!					
 If applicant does not own all the land, the affected landowner's name and mailing address must be listed. 								
O 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 (Page 3 and 4, Section B) or a well-log report.								
Proposed use of	water. If supplementa	al, list primary w	ater right acreage	if applicable	2 .			
O Enclosed Supplemental Form for each proposed use.								
O Form I	(Irrigation)	O Form M (M	Iunicipal or Quas	si-Municipal)				
O Form R	(Mining)	O Form Q (C	ommercial or Ind	lustrial)				
O Spring Description Sheet								
Amount of water from each source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF)								
Period of use Water manager	ment section (Please es	stimate if the wa	ter system has no	t been design	ned).			

X	Resource Protection Section (Page 6, Section 5).								
4	Project schedule (If system is already complet	ed, 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 cheeked, the map must be prepared by a CWRE.								
b	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.								
.\	You must include a Legal description of the property involved that includes a metes and bounds, or other government survey description. A copy of the deed, land sales contract or title insurance policy can provide this information, or you may submit a lot book report prepared by a title company. The Department will not accept a copy of the tax bill. 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.	F 122 - 2 117 117 117 117 117 117 117 117 117 1							
d	The map must meet all the minimum requirem	ents 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							
14/1	O Number of acres per 1/4, 1/4, if irrigation, nursery, or agriculture	Doug County							
	Reference corner on map								
	Each point of diversion coordinate								
5	Fees: Amount of water requested	CFS							
	Base Fee \$ 500	Additional Use @							
	Base Fee \$ 500 1st CFS/AF 200	Total Exam Fees \$ 700							
	Addtn'l EFS/ AF @ = Addtn'-POD @ =	Total Paid \$ 1000 Amount Due \$ Ac Fees PAD							
	Reviewed by: 74714	Date: 9-24-2008							

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 94248

725 Summer St. N.E. Ste. A SALEM, OR 97301-4172 3) 986-0900 / (503) 986-0904 (fax)

INVOICE # _

				7 (303) 900-0904 (18		NAA
REC	EIVED FRO	om: gewe		37292		
BY:						
CAS	SH: C	CHECK:#	OTHER: (IDENTIF)	v)	TRANSFER	
		X 222			TOTAL REC'D	\$1,000-02
_	1083	TREASURY	4170 WRD	MISC CASH	ACCT	
	0407	COPIES	an 100 100 100 100 100 100 100 100 100 10			\$
			(IDENTIFY)			\$
			,			
	0243 I/S L	ease 02			245 Cons. Water	
		> / 5	4270 WRD	OPERATING	ACCT	
		MISCELLANEO	us			
	0407	COPY & TAPE F	EES			\$
	0410	RESEARCH FE	ES			\$
	0408	MISC REVENUE	: (IDENTIFY)			\$
	TC162	DEPOSIT LIAB.	(IDENTIFY)			\$
	0240	EXTENSION OF	TIME			\$
		WATER RIGHTS	S :	EXAM FEI	<u> </u>	RECORD FEE
	0201	SURFACE WATE	ΕR	\$700°2		\$3000
	0203	GROUND WATE	:R	\$	0204	\$
	0205	TRANSFER		\$		
		WELL CONSTR	LICTION	EXAM FEI	1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	LICENSE FEE
	0218	WELL DRILL CO		\$	0219	\$
	0210	LANDOWNER'S		Ψ	0220	\$
		OTHER	(IDENTIFY)			
	0536	TREASURY	0437 WEL	L CONST. ST	ART FEE	ann tha tha tha ann am airtean tha ann an airtean airte
	0211	WELL CONST S	THE RESERVE		19-1	E
	0211	MONITORING V		\$ \$	CARD (
	0210			Ψ	CARD	7
		OTHER	(IDENTIFY)			
	0607	TREASURY	0467 HYD	RO ACTIVITY	LIC NUMBER	
	0233	POWER LICENS	SE FEE (FW/WRD)			\$
	0231	HYDRO LICENS	E FEE (FW/WRD)			\$
		HYDRO APPLIC	ATION			\$
		_		THE REAL PROPERTY OF THE PERSON NAMED IN COLUMN 1	- i. e. o'nkb. sës e es danësanes.	
		TREASURY	OTH	ER/RDX	Arri. Tri	But I :
	FUND		TITLE			
			VENDOR #			
		TION			-	\$
	DEGUNIP				•	

94248 RECEIPT:

DATED: 9/22/08 BY: Codettames

Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal