

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87325 County WITTEZER ANW NE
Priority Date 10-30-2008 Township 6S Range 22E Section 29 Taxlot 601
Use M-P & OR STOCK POND Caseworker JENNA E
Amount (AF) 0.5 Watermaster 4

*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: 0.5 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 locatedor..... 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.

- ☐ 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 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\$ 20

plus\$

Total Paid \$ 100

Total Fees \$ 100

Completeness Check by: ATM

Date: 10-30-2008

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **94770**

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

INVOICE # _____

RECEIVED FROM: James O + June Waggoner
BY: _____

APPLICATION	R 87325
PERMIT	
TRANSFER	

CASH: ☐ CHECK: # 1162 ☒ OTHER: (IDENTIFY) ☐

TOTAL REC'D \$ 100.00

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	Alt Res.	\$ 100.00	0202	
0203	GROUND WATER		\$	0204	
0205	TRANSFER		\$		

WELL CONSTRUCTION

0218	WELL DRILL CONSTRUCTOR	\$	0219	
	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: **94770**

DATED: 10/30/08 BY: L. Bell

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