

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87737 County UNION NW NE
Priority Date 11-14-2008 Township 45 Range 35E Section 15 Taxlot 2100
Use STOCK, FIRE, FISH/WILDLIFE Caseworker JOEL P
Amount (AF) 7 AF Watermaster DIST #6

*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: 7 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') ** 500 feet
 - ☒ 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\$ 140

plus\$ _____

Total Paid \$ 220

Total Fees \$ 220

Completeness Check by: NFW

Date: 11-17-2008

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **94919**

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

INVOICE # _____

RECEIVED FROM: W. G. Tsatsos
BY: Donna D. Tsatsos

APPLICATION	R 87337
PERMIT	
TRANSFER	

CASH: ☐ CHECK:# 27844 OTHER: (IDENTIFY) ☐

TOTAL REC'D \$ 220.00

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 46111 \$
0410 RESEARCH FEES \$
0408 MISC REVENUE: (IDENTIFY) \$
TC162 DEPOSIT LIAB. (IDENTIFY) \$
0240 EXTENSION OF TIME \$

WATER RIGHTS:

0201 SURFACE WATER <u>ALT RES</u>	EXAM FEE	0202	RECORD FEE
	\$ <u>220.00</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: **94919**

DATED: 11/14/08 BY: L. Bell

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