

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87351 County CURRY NW SE
Priority Date 11-17-2008 Township 31S Range 15W Section 33 Taxlot 1400
Use INTENDS CRANBERRY Caseworker JOEL P
Amount (AF) 5 Watermaster DIST #19

*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: 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') 400'
 - 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\$ 20

plus\$ 100

5 x 20

plus\$ _____

Total Paid \$ 180

Total Fees \$ 180

Completeness Check by: HJM

Date: 11-18-2008

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

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

RECEIPT # **94950**

INVOICE # _____

RECEIVED FROM: Pacific Bags, LLC.
BY: Daryl Robison

APPLICATION	
PERMIT	
TRANSFER	

CASH: CHECK:# 1235 OTHER: (IDENTIFY)

TOTAL REC'D \$ 180.00

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 <u>ALTRES</u>	EXAM FEE \$ <u>180.00</u>	0202	RECORD FEE \$
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: **94950**

DATED: 11/17/08 BY: LSB