

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87345 County Doug SE SW
Priority Date 11-20-2008 Township 26 S Range 6W Section 16 Taxlot 1800
Use MULTI-P Caseworker JANA E
Amount (AF) 3 Watermaster DIST #15

*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: 3 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'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
ONE CHECK plus\$ _____
2 AFS plus\$ 60 3x20

Total Paid \$ 140

Total Fees \$ 140

Completeness Check by: HJM Date: 11-21-2008

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **94985**

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

INVOICE # _____
R 87345

RECEIVED FROM: Edward C. + Amy E
BY: Laughlin

APPLICATION	R 87346
PERMIT	
TRANSFER	

CASH: CHECK:# 1313 OTHER: (IDENTIFY)

TOTAL REC'D \$ 340.00

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 **46111**

0407 COPY & TAPE FEES \$ _____
0410 RESEARCH FEES \$ _____
0408 MISC REVENUE: (IDENTIFY) _____ \$ _____
TC162 DEPOSIT LIAB. (IDENTIFY) _____ \$ _____
0240 EXTENSION OF TIME \$ _____

WATER RIGHTS:

EXAM FEE		RECORD FEE
0201 SURFACE WATER ALT RES \$ 340.00	0202	\$ _____
0203 GROUND WATER 87345 = \$140	0204	\$ _____
0205 TRANSFER 87346 = \$200		

WELL CONSTRUCTION

EXAM FEE		LICENSE FEE
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: **94985**

DATED: 11/20/08 BY: X Bell

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