SH: CHE		4170 4170 4170 0ENTIFY) Muni Wate 4270	WRD M	ISC CASH A	TRAN TOTAL		<b>R - 8735</b> <b>\$ (80.00</b> <b>\$</b> <b>\$</b> <b>\$</b> <b>\$</b>
1083 Ti   0407 0   0243 I/S Lease 0   0407 0   0407 0   0407 0   0407 0   0407 0   0407 0   0407 0   0408 0   0200 0   0201 0   0203 0		THER: (IDI   4170   DENTIFY)   Muni Wate   4270	WRD M	ISC CASH A In 024 PERATING A	TRAN TOTAL	REC'D	\$ \$
1083 TI   0407 0   0243 I/S Lease 0   0407 0   0407 0   0407 0   0407 0   0407 0   0407 0   0407 0   0408 M   TC162 0   0240 E   0201 S   0203 0		4170 DENTIFY) Muni Wate 4270	WRD M	an 024 <b>PERATING A</b>	TOTAL : CCT 5 Cons W	REC'D	\$ \$
1083 TI   0407 0   0243 I/S Lease 0   0407 0   0407 0   0407 0   0407 0   0407 0   0407 0   0408 M   TC162 0   0240 E   0201 S   0203 0		4170 DENTIFY) Muni Wate 4270	WRD M	an 024 <b>PERATING A</b>	CCT 5 Cons W		\$ \$
0407 0 0243 I/S Lease 0407 0 0407 0 0410 F 0408 M TC162 0 0240 E 0240 E 0201 S 0203 0	COPIES DTHER (ID e 0244 M MISCELLANEOUS COPY & TAPE FEES RESEARCH FEES MISC REVENUE: (D DEPOSIT LIAB (ID)	DENTIFY) Muni Wate <b>4270</b>	r Mgmt. Pla	an 024 <b>PERATING A</b>	5 Cons W		\$
0243 I/S Lease 0407 0 0410 F 0408 M TC162 0 0240 F 0201 S 0201 S	MISCELLANEOUS COPY & TAPE FEES RESEARCH FEES MISC REVENUE: ( DEPOSIT LIAB (ID)	Muni Wate 4270	WRD O	PERATING A	_		\$
0243 I/S Lease 0407 00 0410 F 0408 M TC162 00 0240 F 0201 S 0201 S	MISCELLANEOUS COPY & TAPE FEES RESEARCH FEES MISC REVENUE: ( DEPOSIT LIAB (ID)	Muni Wate 4270	WRD O	PERATING A	_		
0407 (0 0410 F 0408 M TC162 (0 0240 F 0201 S 0203 (0	MISCELLANEOUS COPY & TAPE FEES RESEARCH FEES MISC REVENUE: ( DEPOSIT LIAB (ID)	<b>4270</b>	WRD O	PERATING A	_	ater	
0407 00 0410 F 0408 M TC162 00 0240 F 0201 S 0203 00	COPY & TAPE FEES RESEARCH FEES MISC REVENUE <sup>+</sup> ( DEPOSIT LIAB (IDI	5			ССТ		
0407 00 0410 F 0408 M TC162 00 0240 F 0201 S 0203 00	COPY & TAPE FEES RESEARCH FEES MISC REVENUE <sup>+</sup> ( DEPOSIT LIAB (IDI		41	011			
0410 F 0408 M TC162 C 0240 F 0201 S 0203 C	RESEARCH FEES MISC REVENUE <sup>-</sup> ( DEPOSIT LIAB (IDI		14				
0408 M TC162 C 0240 E 0201 S 0203 C	MISC REVENUE ( DEPOSIT LIAB (IDI	IDENTIFY					\$
TC162 0 0240 E 0201 5 0203 0	DEPOSIT LIAB (ID	IDENTIFY					\$
0240 E 0201 S 0203 O			<b>`</b> )				\$
0240 E 0201 S 0203 O		ENT(FY)					\$
0201 S	EXTENSION OF TIM						\$
0201 S	NATER RIGHTS:				-		RECORD FEE
0203 0			160	EXAM FEE	020	2	\$
		ALT		\$ 180.00	020		\$
0205				\$		14	-
	TRANSFER			\$	_		
	WELL CONSTRUCT			EXAM FEE		n	\$
	WELL DRILL CONSTRUCTOR LANDOWNER'S PERMIT		2	\$	021		\$
(	OTHER	(IDENTIF	FY)				
0536 T	REASURY	0437	WELL (	CONST. STAI	RT FEE		
	WELL CONST STAF			\$		CARD #	
				\$		CARD #	
•=·•	OTHER		T)	•			
0607 T	REASURY	,				IRER	
							\$
				F			\$
0231	HYDRO LICENSE F		VRD)	L			
I	HYDRO APPLICATI	ON					\$
T	REASURY		OTHER	RDX			
FUND		TITLE _					
OBJ. CODE		VENDOF	R#				
DESCRIPTIO	N						\$

## Alternate Reservoir Application Completeness Checklist This is the checklist used by WRD staff

Application R 87358	County JACKSON	SW SE
Priority Date Dec 3 2008	Township <u>40</u> SRange <u>3</u> V Section	18 Taxlot $\underline{Z443}$
Use MULTI P	Caseworker BROOK G	
Amount (AF) <u>4.5</u>	Watermaster $N_{1}s_{7} \# 13$	

## \*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 & Feet **Total Quantity** \* of Storage Requested: 4. 5 Proposed Use of the water....Cannot accept application for use of this stored water at the same time 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 located .....or..... 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 المراجع fatal flaw if not provided by the applicant. Revared & Instituted 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 \*\* 1/41/4'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.\*\* Revances Fees enclosed\*? Base Fee\$ 20 plus\$ 1007 plus\$ **Total Fees \$** 180 Completeness Check by:\_\_\_\_\_\_ Date: DEC 4 2008 Groups/wr/Customer Service Group/Alt-Review-checklist.doc 11-26-2007 iks