

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87347 County WASCO NE NW
Priority Date 11-21-2008 Township 4S Range 12E Section 8 Taxlot 1700
Use MULTI-P Caseworker BRAD G
Amount (AF) 6.2 Watermaster DIST #

*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: 6.2
 - 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. *SEE FAX LETTER APPROVAL OF SCALE*
 - 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*?
BY TRANSFER OF FUNDS AGENCY/AGENCY

Base Fee\$ <u>80</u>	
plus\$ _____	
plus\$ <u>140</u>	<u>7 x 20</u>
- Total Paid \$ 220** **Total Fees \$ 220**

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