

Standard Application Completeness Checklist

Minimum Requirements (OAR 690-310-0040)(ORS 537.400)

This is the checklist used by WRD staff

Doug Woodcock PRE-APP.

Application G 17149 Township 17 S
Priority Date DEC 4 2008 Range 4 W
Use(s) COMM / INDUSTRIAL Section 4
Rate 9.891 400 GPM POD Loc SEE MAP
County LANE POU Loc SEE MAP
W.M. DIST # 2 Caseworker KERRY K

Applicant/Organization Name, Mailing Address and Telephone Number.

Source of water. If stored water, is the stored water component filed out, including a non-expired agreement for stored water must be included. (ORS 537.400) *NOTE: A surface water application cannot be filled at the same time as a Reservoir or Alt Reservoir if it will be for the use of the stored water under the PROPOSED Reservoir application (E2).*

The proposed source is or (circle one) GW withdrawn from further appropriation, or Division 538. If it is, return application and fees.

Property ownership indicated. STATES EASEMENTS EXIST

If applicant does not own all the land, the affected landowner's name and mailing address must be listed.

If applicant does not own all the land, a statement declaring the existence of either written authorization or an easement permitting access to land crossed by the proposed ditch canal or other work must be submitted.

Groundwater development section (Page 3 and 4, Section B) or a well log report.

Proposed use of water. If supplemental, list primary water right acreage if applicable.

Enclosed Supplemental Form for each proposed use.

Form I (Irrigation)

Form M (Municipal or Quasi-Municipal)

Form R (Mining)

Form Q (Commercial or Industrial)

Spring Description Sheet

Amount of water from each source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF)

Period of use

Water management section (Please estimate if the water system has not been designed).

Resource Protection Section (Page 6, Section 5).

Project schedule (If system is already completed, indicate "existing").

For reservoir applications storing more than 9.2 acre feet, and a dam height of more than 10 feet, preliminary plans and specifications for dam and impoundment are required.

If the above is statement is checked, the map must be prepared by a CWRE.

All applicants (or the authorized agent with title or authority if for an organization or corporation), must sign the application in ink. Signature must be an original "wet" signature.

REC'D CENTER OF AUTH
12-15-08

RICHARD SIGNATURE

You must include a Legal description of the property involved that includes a metes and bounds, or other government survey description. A copy of the deed, land sales contract or title insurance policy can provide this information, or you may submit a lot book report prepared by a title company. The Department will not accept a copy of the tax bill.

SEVERAL DOCUMENTS

A completed Land-Use Form or receipt signed and dated by the appropriate planning department officials. Date of signature must be within the past 12 months. Signature must be an original "wet" signature.

The map must meet all the minimum requirements of OAR 690-310-0050.

Township, Range, Section

Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU)

Place of use, 1/4, 1/4's and tax lot clearly identified

Even map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.)

Location of each diversion point well or dam by reference to a recognized public land survey corner

North Directional Symbol

REMAINED - NEW MAPS 12-15-08

N/A Number of acres per 1/4, 1/4, if irrigation, nursery, or agriculture

Other _____

Reference corner on map

Each point of diversion coordinate

Fees: Amount of water requested 0.891 CFS 400 GPM

Base Fee \$ 5000

Additional Use @ _____

1st CFS/AF 200

Total Exam Fees \$ 900

900
+ 300

1200

_____ Addtn'l CFS/ AF @ _____

Total Paid \$ 1200

1 Addtn' POD @ 200 = 200

Amount Due \$ ALL FEES PAID

Reviewed by: HLM

Date: DEC. 4, 2008

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **95098**

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

INVOICE # _____

RECEIVED FROM: Seneca Sawmill Company

APPLICATION 6-17149

BY: _____

PERMIT _____

CASH: CHECK:# OTHER: (IDENTIFY)

TRANSFER _____

94705

TOTAL REC'D \$ 1200.00

1083 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES _____ \$
 OTHER: (IDENTIFY) _____ \$
RECEIVED OVER THE COUNTER
 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:

0201 SURFACE WATER	EXAM FEE \$	0202	RECORD FEE \$
0203 GROUND WATER	\$ <u>900.00</u>	0204	\$ <u>300.00</u>
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 (FWWRD) _____ \$
 0231 HYDRO LICENSE FEE (FWWRD) _____ \$
 HYDRO APPLICATION _____ \$

TREASURY OTHER / RDX

FUND _____ TITLE _____
 OBJ. CODE _____ VENDOR # _____
 DESCRIPTION _____ \$ _____

RECEIPT: **95098**

DATED: 12.4.08 BY: L Bell

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