

Standard Application Completeness Checklist

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

This is the checklist used by WRD staff

ASSIST BY M. MATTHEW WAM

CRESCENT LAKE
SPRING

Application 87362 Township 23 S
Priority Date 12-12-2018 Range 6 E
Use(s) DOM / HUMAN CONSUMPTION Section 14
Rate 0.01 CFS POD Loc SE SW
County KLAM POU Loc SE SW
W.M. DIST # 2 Caseworker KERRT 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☒ The proposed source is or is not (circle one) withdrawn from further appropriation, or Division 538. If it is, return application and fees.

☒ Property ownership indicated.

☒ 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.

N/R ☐ 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.
- ☐ ^{Occupancy Permit} 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.
- ☐ ^{FEDERAL LAND} 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

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

☐ Other SEVERAL MAPS

☒ Reference corner on map

☒ Each point of diversion coordinate

☒ Fees: Amount of water requested 11.11 CFS

Base Fee \$ <u>500</u>	Additional Use @ <u> </u> = <u> </u>
1st CFS/AF <u>200</u>	Total Exam Fees \$ <u>700</u>
Addn'l CFS/ AF @ <u> </u> = <u> </u>	Total Paid \$ <u>700</u>
Addn' POD @ <u> </u> = <u> </u>	Amount Due \$ <u>REC FEE DUE</u>

Reviewed by: H. J. M. Date: 12-15-08

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **95166**

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

INVOICE # _____

RECEIVED FROM: Pat + Nancy Cross
BY: _____

APPLICATION	87362
PERMIT	
TRANSFER	

CASH: ☐ CHECK:# 736 OTHER: (IDENTIFY) ☐

TOTAL REC'D \$ 700.00

1003 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 46111 \$ _____
0410 RESEARCH FEES \$ _____
0408 MISC REVENUE: (IDENTIFY) _____ \$ _____
TC162 DEPOSIT LIAB. (IDENTIFY) _____ \$ _____
0240 EXTENSION OF TIME \$ _____

WATER RIGHTS:

0201 SURFACE WATER	EXAM FEE \$ <u>700.00</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: **95166**

DATED: 12/12/08 BY: L Beep

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