

Standard Application Completeness Checklist

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

This is the checklist used by WRD staff

Application G 17152 Township 15 S
Priority Date 12-15-2008 Range 12 E
Use(s) PRIM 4.83 Section 2
IRRIG ACRES
Rate 0.0604 27.1 POA Loc NW NW
CFS GPM
County Deschutes POU Loc NW NW
W.M. 11 Caseworker Brink G

☒ 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☒ The proposed source is or is not (circle one) GW withdrawn from further appropriation, or Division 538. If it is, return application and fees.

☒ Property ownership indicated. STATES YES!

☐ 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 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.*
- ☒ 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.
- ☒ 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.) 1320' |
| ☒ 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 <u>WM ASSIST</u> |
| ☒ Reference corner on map | |
| ☒ Each point of diversion coordinate | |

☒ Fees: Amount of water requested 0.0604 CFS 27.1 GPM

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>Net Fee Due</u>

Reviewed by: HTM Date: 12-19-2008

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **95180**

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

INVOICE # _____

RECEIVED FROM: Lazy A Trailer Plaza
BY: _____

APPLICATION	G-17152
PERMIT	
TRANSFER	

CASH: ☐ CHECK: # 1308 ☒ OTHER: (IDENTIFY) ☐

TOTAL REC'D \$ 700.00

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

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

WATER RIGHTS:

0201	SURFACE WATER	\$	0202	\$
0203	GROUND WATER	\$ <u>700.00</u>	0204	\$
0205	TRANSFER	\$		

WELL CONSTRUCTION

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: **95180**

DATED: 12/15/08 BY: L. Beep

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