## Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff

	•					
Use(s)	Application	87353	Township	16	2	-
Rate 14.5 A F POD Loc See MAN  W.M. Dr 57 # 2 Caseworker Joez P  Applicant/Organization Name, Mailing Address and Telephone Number.  Source of water. If stored water, is the stored water component filed out, including a non-exp agreement for stored water must be included. (ORS 537.400) NOTE: A surface water application be filled at the same time as a Reservoir or Alt Reservoir if it will be for the use of the stored water PROPOSED Reservoir application (E2).  The proposed source is or is not circle one) withdrawn from further appropriation, or Divising it is, return application and fees.  Property ownership indicated.  O If applicant does not own all the land, the affected landowner's name and mailing address must be listed.  O If applicant does not own all the land, a statement declaring the existence of either	Priority Date D	EC 2 2008	Range	2 €		
County	Use(s) IRMG	STORES WATER	Section	30	6	
Applicant/Organization Name, Mailing Address and Telephone Number.  Source of water. If stored water, is the stored water component filed out, including a non-expagreement for stored water must be included. (ORS 537.400) NOTE: A surface water application be filled at the same time as a Reservoir or Alt Reservoir if it will be for the use of the stored water the PROPOSED Reservoir application (E2).  The proposed source is or is not (circle one) withdrawn from further appropriation, or Division it is, return application and fees.  O If applicant does not own all the land, the affected landowner's name and mailing address must be listed.  O If applicant does not own all the land, a statement declaring the existence of either	Rate 14,5	AF	POD Loc	N	- 5€	_
Applicant/Organization Name, Mailing Address and Telephone Number.  Source of water. If stored water, is the stored water component filed out, including a non-expagreement for stored water must be included. (ORS 537.400) NOTE: A surface water application be filled at the same time as a Reservoir or Alt Reservoir if it will be for the use of the stored water the PROPOSED Reservoir application (E2).  The proposed source is dr is not circle one) withdrawn from further appropriation, or Divising it is, return application and fees.  Property ownership indicated.	County	LANE	POU Loc	SeE	and	
Source of water. If stored water, is the stored water component filed out, including a non-expagreement for stored water must be included. (ORS 537.400) NOTE: A surface water application be filled at the same time as a Reservoir or Alt Reservoir if it will be for the use of the stored water the PROPOSED Reservoir application (E2).  The proposed source is or is not circle one) withdrawn from further appropriation, or Division it is, return application and fees.  Property ownership indicated.	W.M. Dest =	# 2	Caseworker	JOEZ	7	-
canal or other work must be submitted.	Source of water agreement for store be filled at the same the PROPOSED For The proposed it is, return approperty owner.  O If apple mailing of the property owner.	er. If stored water, is to red water must be included time as a Reservoir Reservoir application source is or is not ciplication and fees.  The stored water, is to red water, is to red water application and fees.  The stored water, is to red water, is to red water and fees.  The stored water, is to red water, is to red water and fees.	the stored water couded. (ORS 537.4 r or Alt Reservoir (E2).  Trele one) withdraw  I the land, the affected.  I the land, a statemeasement permitting	mponent filed 00) NOTE: A if it will be for on further ted landowned tent declaring to	out, including surface water the use of the sampropriation, appropriation, the existence of	application etored water or Division
	1			,		<b>a</b>
Oroundwater 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	1		-	ater right acrea	де и аррисаок	
Proposed use of water. If supplemental, list primary water right acreage if applicable.			•	unicipal or Ou	asi-Municipal)	
Proposed use of water. If supplemental, list primary water right acreage if applicable.  Enclosed Supplemental Form for each proposed use.				-		
Proposed use of water. If supplemental, list primary water right acreage if applicable.  Enclosed Supplemental Form for each proposed use.  Form I (Irrigation)  O Form M (Municipal or Quasi-Municipal)		ζ ο,	O Form Q (Co	ommercial of i	ndustriai)	
Proposed use of water. If supplemental, list primary water right acreage if applicable.  Enclosed Supplemental Form for each proposed use.  Form I (Irrigation)  O Form M (Municipal or Quasi-Municipal)  O Form R (Mining)  O Form Q (Commercial or Industrial)		-				
Proposed use of water. If supplemental, list primary water right acreage if applicable.  Enclosed Supplemental Form for each proposed use.  Form I (Irrigation)  O Form M (Municipal or Quasi-Municipal)			n gallons per minu	ite (GPM), cub	oic feet per seco	ond (CFS),
Proposed use of water. If supplemental, list primary water right acreage if applicable.  Enclosed Supplemental Form for each proposed use.  Form I (Irrigation)  O Form M (Municipal or Quasi-Municipal)  O Form R (Mining)  O Form Q (Commercial or Industrial)  O Spring Description Sheet  Amount of water from each source in gallons per minute (GPM), cubic feet per second (CFS)	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").
O 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.
O 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.
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.)
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 Other of CARC WITH ATTY  irrigation, nursery, or agriculture REPARCH  DAVID MOON - REPARCH  Reference corner on map  Reference corner on map  Reference corner on map
Each point of diversion coordinate
Fees: Amount of water requested 14.5 AT
Base Fee \$ 250
Reviewed by: Date: Dec 2 2008
groups/ym/Customer Service Group/App charlist standard1 dec 05.00.2008 iles

## STATE OF OREGON

WATER RESOURCES DEPARTMENT 725 Summer St. N.E. Ste. A RECEIPT # 95076 INVOICE #\_ SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-0904 (fax) Moon Firm - David C. Moon **APPLICATION** RECEIVED FROM: PERMIT BY: TRANSFER CASH: OTHER: (IDENTIFY) CHECK:# X 1999 TOTAL REC'D 4170 WRD MISC CASH ACCT 1083 TREASURY \$ 0407 **COPIES** \$ OTHER: (IDENTIFY) 0244 Muni Water Mgmt. Plan\_\_\_\_\_ 0243 I/S Lease \_ 0245 Cons. Water \_ 4270 WRD OPERATING ACCT **MISCELLANEOUS** 0407 **COPY & TAPE FEES** \$ 0410 RESEARCH FEES \$ MISC REVENUE: (IDENTIFY) 0408 \$ TC162 DEPOSIT LIAB. (IDENTIFY) 0240 EXTENSION OF TIME RECORD FEE **WATER RIGHTS:** EXAM FEE \$ 300.00 SURFACE WATER 0202 0201 0203 **GROUND WATER** 0204 TRANSFER 0205 \$ LICENSE FEE EXAM FEE **WELL CONSTRUCTION** 0219 WELL DRILL CONSTRUCTOR 0218 0220 \$ LANDOWNER'S PERMIT OTHER (IDENTIFY) 0437 WELL CONST. START FEE 0536 **TREASURY** 

0211	WELL CONST ST	ART FEE	\$	CARD #	<b>!</b>
0210	MONITORING WE	ELLS	\$	CARD #	
	OTHER	(IDENTIFY)			
0607	TREASURY	0467 HYDR	O ACTIVITY	LIC NUMBER	
0233	POWER LICENSE	FEE (FW/WRD)			\$
0231	HYDRO LICENSE	FEE (FW/WRD)	L		\$
	HYDRO APPLICA	TION			\$
	TREASURY	OTHE	R / RDX		

FUND \_\_\_\_\_ TITLE \_\_ \_\_\_\_\_ VENDOR # OBJ. CODE \_\_\_

DESCRIPTION \_\_\_

RECEIPT:

DATED: 12/01

Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal

## STATE OF OREGON

## WATER RESOURCES DEPARTMENT

RECEIPT # 95026

725 Summer St. N.E. Ste. A SALEM, OR 97301-4172

INVOICE # \_\_\_\_\_

		(503) 986-0900	/ (503) 986-0904 (fax	<u> </u>	
ECEIVED FR	OM: RUSSE	11 Cament	w	APPLICATION	87353
<b>Y</b> :				PERMIT	
	0.1=0.4.4		0	TRANSFER	
ASH:	CHECK:# <b>1948</b>	OTHER: (IDENTIF)	<u> </u>	TOTAL REC'D	\$ 270.00
1083	TREASURY	4170 WRD	MISC CASH A	CCT	A STATE OF THE STA
0407	COPIES				\$
		(IDENTIFY)			\$
0243 I/S	Lease 024	4 Muni Water Mgmt	. Plan 024	5 Cons. Water	
		4270 WRD	OPERATING A	ICCT_	
	MISCELLANEOU	s u	U_1   1		
0407	COPY & TAPE FE	ES	16111		\$
0410	RESEARCH FEES	3			\$
0408	MISC REVENUE:	(IDENTIFY)			\$
TC162	DEPOSIT LIAB. (	IDENTIFY)			\$
0240	EXTENSION OF 1	Ί <b>Μ</b> Ε			\$
	WATER RIGHTS:		EXAM FEE		RECORD FEE
0201	SURFACE WATER	3	\$ 270.0	ρ 0202	\$
0203	GROUND WATER	l	\$	0204	\$
0205	TRANSFER		\$		
	WELL CONSTRU	CTION	EXAM FEE		LICENSE FEE
0218	WELL DRILL CON	ISTRUCTOR	\$	0219	\$
	LANDOWNER'S F	PERMIT		0220	\$
	_ OTHER	(IDENTIFY)			
0536	TREASURY	0437 WEL	L CONST. STA	RTFEE	
0211	WELL CONST ST	ART FEE	\$	CARD#	
0210	MONITORING WE	LLS	\$	CARD #	
	_ OTHER	(IDENTIFY)			
0607	TREASURY	0467 HYD	RO ACTIVITY	LIC NUMBER	
0233	POWER LICENSE				\$
0231	HYDRO LICENSE	,			\$
	HYDRO APPLICA	,	_		\$
	TREASURY	OIH	ER / RDX	1.45.5	
FUND _		TITLE			
OBJ. CO	DE	_ VENDOR #			
DESCRI	PTION				\$
•	)Enge		12,10	10-10	
	95026	DATED: <u>\( \lambda \) </u>	, , , , , , , , , , , , , , , , , , , ,	-X DOLY	
Di	stribution - White Copy	/ - Customer, Yellow	Copy - Fiscal, Blue C	Copy - File, Buff Cop	y - Fiscal