Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400)

Minimum Requireme This is the c					
SUB	MITES	70	REG	QUEST	DIFFERENT AQUITER
Application G 17161	Township		4	N	-
Priority Date JAN 12 2009					
PRIM Use(s) (RRIG C1.568 255 Rate CF5 G-PM	Section		7	<u></u>	
Rate CFS G-PM	PO J Loc_		NE	NE	-
County UMAT	POU Loc _	_ 14	1/2	NE 1/2	<u>+</u>
W.M. DIST # 5	Caseworker		JEAN	A E	-
Applicant/Organization Name, Mailin	ng Address and	l Teleph	one Numb	er.	
Source of water. If stored water, is the agreement for stored water must be included be filled at the same time as a Reservoir the PROPOSED Reservoir application (In The proposed source is or is not circ	ded. (ORS 537 or Alt Reservoi E2).	'.400) N ir if it wi	N OTE: A st ill be for th	urface water he use of the s	application cannot tored water under
it is, return application and fees.	cie one) withdi	awii iioi	ii tuttilei a	ірргорпаноп, /	of Division 338. If
Property ownership indicated.	STATES	7	E5.	'	
O If applicant does not own all mailing address must be listed		fected la	andowner's	s name and	
O If applicant does not own all written authorization or an ecanal or other work must be	asement permi		_		
Groundwater development section (Pa	age 3 and 4, Se	ction B)	or a well	log report.	
Proposed use of water. If supplement	al, list primary	water ri	ght acreage	e if applicable	e.
Enclosed Supplemental Form for each	n proposed use			45	ARRES
Form I (Irrigation)	O Form M	(Munici)	oal or Qua	si-Municipal)	•
O Form R (Mining)	O Form Q (Comme	rcial or Inc	dustrial)	
O Spring Description Sheet					
Amount of water from each source in feet (AF)	gallons per mi	inute (G	PM), cubic	c feet per seco	ond (CFS), or acre
A Paris I of any					

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

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 cheeked, the map must be prepared by a CWRE.	
All applicants (or the authorized agent with title or authority if for an organization or corporation), mu sign the application in ink. Signature must be an original "wet" signature.	ıst
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.)	FT
Location of each diversion point well or dam by reference to a recognized public land survey corner North Directional Symbol North Directional Symbol	
Number of acres per 1/4, 1/4, if Other Chire # 57194 irrigation, nursery, or agriculture PAUL WATTEN BURGE	R
Reference corner on map	
Each point of diversion coordinate Q. 5 6 8 2 5 5 Fees: Amount of water requested CF5 G-17	
Base Fee \$ Sold Additional Use @=	
1st CFS/AF 200 Total Exam Fees \$ 700	
Addtn'I CFS/ AF@ Total Paid \$ 2 a a a? Addtn' POD@ Amount Due \$ OVER PAID BY ORIGINAL CHECK 2000	3 00
Reviewed by: $17M$ Date: $14N 2 2019$	

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 95267

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

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