

# Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application 12 87391 County Polk SW 1/4  
Priority Date 2-17-2009 Township 98 Range 5W Section 5 Taxlot 100  
Use MULTI-P Caseworker JEANNA E  
Amount (AF) 9 Watermaster DIST # 16  
RESERVOIR # 1

## \*Minimum Requirements (ORS 537.409)

- Landowner Name, Mailing Address\* and Telephone Number.
- Source\* and tributary listed. NO WELLS-MUST HAVE GW APP TO USE A WELL AS A SOURCE !!
- Reservoir Location- Township, Range, Section, Quarter Quarter, Taxlot
- Dam height\*, if applicable
- Total Quantity \* of Storage Requested: 9 AF
- Proposed Use of the water....Cannot accept application for use of this stored water at the same time (E2)
- Property ownership indicated? \* If applicant does not own all the land, is the affected landowner's name and mailing address listed? (Including: lands not owned by applicant, upon which the source is located .....or..... that are crossed by the diversion works. This includes any roads or rights-of-way.)
- Environmental Impact section completed? Not fatal if omitted
- Application signed by the landowner(s)? All parties noted as applicants must sign the application. *Must be an original "wet" signature.*
- Completed Land-Use Form \* or receipt signed by the appropriate planning department official enclosed? *Does the use on land-use form match the proposed use on the application? Must be an original "wet" signature within the last 12 months.*
- Acceptable map \*\* Indicates requirements of standards set forth by the Commission and causes fatal flaw if not provided by the applicant. DEVELOPED @ FRONT COUNTER

- Reservoir Location - noting Township, Range, Section, 1/4 1/4 and Tax Lot number(s)\*
- Scale of the Map (not less than 1"-1320') \*\*
- Reference corner on map  North Directional Symbol \*\*
- 1/4 1/4's clearly identified  Reservoir clearly identified \*
- Dam or POD (If off channel) Location coordinates referenced to a government land survey corner\* If no dam, use coordinates to center of reservoir.\*\*

Fees enclosed\*  
ONE CHECK  
3 FILES

Base Fee\$ 80  
plus\$ 180  
plus\$ ?

Total Paid \$ 260 Total Fees \$ 260

Completeness Check by: HFW Date: 2-17-2009

STATE OF OREGON  
**WATER RESOURCES DEPARTMENT**

RECEIPT # **95646**

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

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

RECEIVED FROM: Cherry City Plumbing, Inc.  
 BY: \_\_\_\_\_

APPLICATION	R-87311 → 3
PERMIT	
TRANSFER	

CASH:  CHECK:# 19412 OTHER: (IDENTIFY)

TOTAL REC'D \$ 780.00

**1083 TREASURY 4170 WRD MISC CASH ACCT**

0407	COPIES		\$
	OTHER: (IDENTIFY)		\$
0243	I/S Lease		
0244	Muni Water Meter		
0245	Cons. Water		

**RECEIVED  
 OVER THE COUNTER**

**4270 WRD OPERATING ACCT**

<b>MISCELLANEOUS</b>			
0407	COPY & TAPE FEES		\$
0410	RESEARCH FEES		\$
0408	MISC REVENUE: (IDENTIFY)		\$
TC162	DEPOSIT LIAB. (IDENTIFY)		\$
0240	EXTENSION OF TIME		\$
<b>WATER RIGHTS:</b>			
0201	SURFACE WATER <u>ALT RES</u>	EXAM FEE \$ <u>780.00</u>	0202 \$
0203	GROUND WATER	\$	0204 \$
0205	TRANSFER	\$	
<b>WELL CONSTRUCTION</b>			
0218	WELL DRILL CONSTRUCTOR	EXAM FEE \$	0219 \$
	LANDOWNER'S PERMIT		0220 \$
	OTHER (IDENTIFY)		

46111 87311 \$260.00  
 87392 \$260.00  
 87393 \$260.00

**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: **95646** DATED: 2/17/09 BY: L Bell

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