

Standard Application Completeness Checklist

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

This is the checklist used by WRD staff

Application S-87395 Township 15 S
Priority Date 2-17-2009 Range 4 W
Use(s) MUNI Section 9 10 15 16
Rate 2.61 CFS POD Loc SEE MAP
County LINN POU Loc BOUNDARY SEE MAP
W.M. DIST # 2 Caseworker MICHELE M

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☒ The proposed source is is not (circle one) From WITHDRAWN MAP withdrawn from further appropriation, or Division 538.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

☒ Property ownership indicated. STARTS 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 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.

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|--|---|
| ☒ 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 <i>This makes a 6-ORDINATE</i> | ☒ North Directional Symbol |
| ☒ Number of acres per 1/4, 1/4, if irrigation, nursery, or agriculture | ☐ Other <u>GSI MAP</u> |
| ☒ Reference corner on map | |
| ☒ Each point of diversion coordinate | |

☒ Fees: Amount of water requested 2.61 CFS

Base Fee \$ <u>500</u>	Additional Use @ <u> </u> = <u> </u>
1st CFS/AF <u>200</u>	Total Exam Fees \$ <u>900</u>
<u>2</u> Addtn'l CFS/AF @ <u>100</u> = <u>200</u>	Total Paid \$ <u>900</u>
<u> </u> Addtn' POD @ <u> </u> = <u> </u>	Amount Due \$ <u>Rec Fee Due</u>

Reviewed by: HTM Date: 2-18-2009

RECEIVED FROM: City of Harrisburg
BY: _____
CASH: ☐ CHECK: # 472 OTHER: (IDENTIFY) ☐
APPLICATION 87395
PERMIT
TRANSFER
TOTAL REC'D \$ 900.00

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 \$
0203 GROUND WATER \$
0205 TRANSFER \$

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR \$
LANDOWNER'S PERMIT \$
OTHER (IDENTIFY)

EXAM FEE

\$ 900.00

RECORD FEE

0202 \$
0204 \$

EXAM FEE

\$

LICENSE FEE

0219 \$
0220 \$

0536 TREASURY 0437 WELL CONST. START FEE

0211 WELL CONST START FEE \$
0210 MONITORING WELLS \$
OTHER (IDENTIFY)

CARD #

CARD #

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: 95640 DATED: 2/17/09 BY: LAG

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