

# Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87398  
Priority Date 2-25-2009  
Use MULTI-P  
Amount (AF) 8

County CROOK SE NW  
Township 17S Range 19E Section 11 Taxlot 103  
Caseworker JERANA E  
Watermaster 11 JEREMY GIFFIN

## \*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: 8 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. LAND USE OK. J.M.S.
- Acceptable map \*\* Indicates requirements of standards set forth by the Commission and causes fatal flaw if not provided by the applicant.
  - 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 NW Sec. 11  North Directional Symbol \*\*
  - 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\*? \$720 Base Fee\$ 80  
ONE CHECK plus\$ 160 8 x 20  
4 ADA(S) plus\$ \_\_\_\_\_

Total Paid \$ 240 Total Fees \$ 240

Completeness Check by: HTM Date: 2-26-2009

STATE OF OREGON  
**WATER RESOURCES DEPARTMENT**

RECEIPT # **95729**

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

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

RECEIVED FROM: Rance + Nancy Kastor  
 BY: Land + Cattle Account

APPLICATION	R-87398 +
PERMIT	(see below)
TRANSFER	

CASH:  CHECK:#  4304 OTHER: (IDENTIFY)

TOTAL REC'D \$ **720.00**

**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	PCA 46111	R 87398	\$240.00	\$
0410	RESEARCH FEES		R 87399	\$180.00	\$
0408	MISC REVENUE: (IDENTIFY)		R 87400	\$160.00	\$
TC162	DEPOSIT LIAB. (IDENTIFY)		R 87401	\$140.00	\$
0240	EXTENSION OF TIME				\$

**WATER RIGHTS:**

0201	SURFACE WATER	ALT RES	EXAM FEE	\$ 720.00	0202	RECORD FEE	\$
0203	GROUND WATER				0204		\$
0205	TRANSFER						

**WELL CONSTRUCTION**

0218	WELL DRILL CONSTRUCTOR		EXAM FEE	\$	0219	LICENSE FEE	\$
	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: **95729** DATED: 2/25/09 BY: A. Bell

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