

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **96061**

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

INVOICE # _____

RECEIVED FROM: <u>Berton + Joan A.</u>	APPLICATION <u>R 87433</u>
BY: <u>Dummer</u>	PERMIT
	TRANSFER
CASH: <input type="checkbox"/> CHECK:# <u>1200</u> OTHER: (IDENTIFY) <input type="checkbox"/>	TOTAL REC'D \$ <u>100.00</u>

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	<u>46111</u>	\$	
0410 RESEARCH FEES		\$	
0408 MISC REVENUE: (IDENTIFY)		\$	
TC162 DEPOSIT LIAB. (IDENTIFY)		\$	
0240 EXTENSION OF TIME		\$	
WATER RIGHTS:			
0201 SURFACE WATER	<u>ALT RES</u>	EXAM FEE \$ <u>100.00</u>	0202 RECORD FEE \$
0203 GROUND WATER		\$	0204 RECORD FEE \$
0205 TRANSFER		\$	
WELL CONSTRUCTION			
0218 WELL DRILL CONSTRUCTOR		EXAM FEE \$	0219 LICENSE FEE \$
LANDOWNER'S PERMIT		\$	0220 LICENSE FEE \$
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: **96061** DATED: 4/16/09 BY: L. Bell

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

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87433 / County JOSEPHINE /
Priority Date APR 6 2009 / Township 385 Range 5W Section 22 Taxlot 702
Use MULTI-P / Caseworker KERRY K /
Amount (AF) 002 / Watermaster DIST # 14

ASSIST WM KATHY SMITH

*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: 0.02 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 locatedor..... 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.* RECEIPT ONLY SIGNED BY JOSEPHINE CO.
- 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 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*? Base Fee\$ 80
plus\$ 20
plus\$ _____
Total Paid \$ 100 Total Fees \$ 100

Completeness Check by: HTM Date: 4-7-2009