

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87454 County YAMH NE NE
Priority Date 5-12-2009 Township 3 S Range 3 W Section 20 Taxlot 101
Use M-P Caseworker BROOK C
Amount (AF) 9.10 AF Watermaster DIST # 16

*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: 9.10 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.* Land-use form
- ☒ Acceptable map ** Indicates requirements of standards set forth by the Commission and causes fatal flaw if not provided by the applicant. STUNTNER CIVIL BILL KNESS CWIRE

- ☒ Reservoir Location - noting Township, Range, Section, 1/4 1/4 and Tax Lot number(s)*
- ☒ Scale of the Map (not less than 1"-1320') ** 400 FEET
- ☒ Reference corner on map
- ☒ 1/4's clearly identified
- ☒ North Directional Symbol **
- ☒ 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

ONE CHECK
3 FILES

plus\$ 200

plus\$

Total Paid \$ 280

Total Fees \$ 280

Completeness Check by: H TM

Date: 5-12-2009

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 96407

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

INVOICE #

RECEIVED FROM: Revana Family Partners, LP
BY:

APPLICATION	<u>see below</u>
PERMIT	
TRANSFER	

CASH: ☐ CHECK.# 3038 OTHER: (IDENTIFY) ☐TOTAL REC'D \$ 2060.00**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 <u>46111</u>		
0407	COPY & TAPE FEES	<u>R 87454 \$280.00 ALT RES</u>
0410	RESEARCH FEES	<u>R 87455 \$280.00 ALT RES</u>
0408	MISC REVENUE: (IDENTIFY)	<u>S 87456 \$1500.00</u>
TC162	DEPOSIT LIAB. (IDENTIFY)	
0240	EXTENSION OF TIME	

WATER RIGHTS:		EXAM FEE	RECORD FEE
0201	SURFACE WATER <u>ALTRES X2</u>	\$ <u>2060.00</u>	0202 \$
0203	GROUND WATER	\$	0204 \$
0205	TRANSFER	\$	
WELL CONSTRUCTION		EXAM FEE	LICENSE FEE
0218	WELL DRILL CONSTRUCTOR	\$	0219 \$
	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: 96407 DATED: 5/12/09 BY: L. Bell

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