

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87455 County YAMA
Priority Date 5-12-2009 Township 3 S Range 3 W Section 17 Taxlot 101
Use M-P Caseworker BROOK G
Amount (AF) 9.10 AF Watermaster DIST #

*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 OK
- ☒ 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)* CWIRE
- ☒ 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*?
- Base Fee\$ 80
- ONE CHECK
- plus\$ 200
- 3 APP(S)
- plus\$ 0
- Total Paid \$ 280
- Total Fees \$ 280

Completeness Check by: 247M 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: <u>Revana Family Partners, LP</u>	APPLICATION <u>see below</u>
BY: _____	PERMIT _____
	TRANSFER _____

CASH: ☐	CHECK: # ☒ <u>3038</u>	OTHER: (IDENTIFY) ☐	TOTAL REC'D \$ <u>2060.00</u>
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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>4611</u>	<u>R 87454 \$280.00 ALT RES</u>	\$ _____
0407 COPY & TAPE FEES	<u>R 87455 \$280.00 ALT RES</u>	\$ _____
0410 RESEARCH FEES	<u>S 87456 \$1500.00</u>	\$ _____
0408 MISC REVENUE: (IDENTIFY) _____		\$ _____
TC162 DEPOSIT LIAB. (IDENTIFY) _____		\$ _____
0240 EXTENSION OF TIME		\$ _____

WATER RIGHTS:	EXAM FEE	RECORD FEE
0201 SURFACE WATER <u>ALT RES 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

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