Alternate Reservoir Application Completeness Checklist This is the checklist used by WRD staff

Application 17 87462 County Jose						
Priority Date 5-29-2009 Township 36 S Range Gw Section 22 Taxlot 1202						
Use M-P Caseworker Jeans E-						
Amount (AF) Q, 11 Watermaster 15 15 T # 14						
*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: Q. 11 A=						
Proposed Use of the waterCannot 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						
ocatedor 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. TeAR - OFF						
Acceptable map ** Indicates requirements of standards set forth by the Commission and causes						
faital 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 **						
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\$						
Fees enclosed*? Base Fee\$ plus\$ 20						
plus\$						
Total Paid \$ a a Total Fees \$ a a						
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Groups/wer/Customer Service Group/Alt Deviews absoluted des 11.26.2007 iles						

STATE OF OREGON

WATER RESOURCES DEPARTMENT

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725 Summer St. N.E. Ste. A **SALEM, OR 97301-4172**

INVOICE #_ (503) 986-0900 / (503) 986-0904 (fax) **APPLICATION** Vunn < PERMIT BY: TRANSFER CHECK:# OTHER: (IDENTIFY) CASH: TOTAL REC'D X 4813 \$ 100.00 TREASURY 4170 WRD MISC CASH ACCT \$ 0407 COPIES \$ OTHER: (IDENTIFY) 0244 Muni Water Mgmt. Plan ____ 0243 I/S Lease _ 0245 Cons. Water **4270 WRD OPERATING ACCT MISCELLANEOUS** 0407 **COPY & TAPE FEES** \$ 0410 RESEARCH FEES \$ MISC REVENUE: (IDENTIFY) 0408 \$ TC162 **DEPOSIT LIAB. (IDENTIFY)** 0240 EXTENSION OF TIME RECORD FEE WATER RIGHTS: EXAM FEE SURFACE WATER 0D00 0202 0201 \$ 0203 GROUND WATER 0204 TRANSFER 0205 \$ LICENSE FEE **EXAM FEE** WELL CONSTRUCTION 0219 WELL DRILL CONSTRUCTOR 0218 \$ 0220 LANDOWNER'S PERMIT OTHER TREASURY 0437 WELL CONST. START FEE 0536 WELL CONST START FEE CARD# 0211 MONITORING WELLS \$ CARD# 0210 OTHER (IDENTIFY) 0467 HYDRO ACTIVITY LIC NUMBER 0607 TREASURY POWER LICENSE FEE (FW/WRD) 0233 \$ 0231 HYDRO LICENSE FEE (FW/WRD) \$ HYDRO APPLICATION TREASURY OTHER / RDX FUND _ TITLE OBJ. CODE **VENDOR#** DESCRIPTION

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