

## Application for a Permit to

# Store Water in a Reservoir

(Alternate Review)

Alternate Review Process (ORS 537.409): You may use this form for any reservoir storing less than 9.2 acre-feet or with a dam less than 10 feet high.

#### Use a separate form for each reservoir

Please type or print in dark ink. If your application is found to be incomplete or inaccurate, we will return it to you. If any requested information does not apply, insert "n/a". A summary of review criteria and procedures that are generally applicable to these applications is available at www.wrd.state.or.us/OWRD/PUBS/forms.shtml.

1. APPLICANT INFORMATION

| Applicant:   | RON                     |                                | MUNN  |                               |            |
|--|-------------------------|--------------------------------|---|-------------------------------|------------|
| Mailing Address:                                   | 1151 WIL                | LOW LAN                        | Last  |                               |            |
| GRANTS City  | PASS                    | ORE(                           | 0N  | 97527                         |            |
| Phone: 541-47                                      | 19-4178<br>Home         | State 541 - 476 Work           | -152 <u>5</u>                               | Zip<br>41~ 660 ~ 015<br>Other | <u>0</u>   |
| *Fax: 591-9  | 16-8557                 | *Email Address:                |   |                               |            |
| *optional information                              |                         |                                |   |                               |            |
|  | 2. L                    | OCATION AND SO                 | URCE  |                               |            |
| A. Reservoir Name:                                 | .          ນ            | A                              |   |                               |            |
|  |                         | body or other source           |   |                               |            |
|  | (                       | te if source is run-off,       | seepage, or an unnan                        | ned stream or spring.         |            |
|  |                         | Tributary to:                  | M A M                                       |                               |            |
| C. Reservoir Locati                                | on '                    |                                |   |                               |            |
| Township<br>(N or S)                               | Range<br>(E or W)       | Section                        | quarter/quarter                             | tax lot number                |            |
| 34   | 6                       | 22                             | 2   | 1202                          |            |
| D. County of Use:                                  | JOSEF                   | HINE                           |   |                               |            |
|  | nt of water to be store | feet. If excava                | ted, write "excavated'<br>naximum capacity. |                               |            |
| List quantity in Acre-                             | -Feet:                  |                                |   | APR <b>06</b>                 | 2009       |
|  |                         | 3. WATER USE                   |   | WATER RESOUR                  |            |
| Indicate the proposed                              | use(s) of the stored w  | ater. NOTE: You ma             | y wish to consider fil                      | ling for "Multipurpo          | EGON<br>Se |
| use" for your reserve                              | oir. Muitipurpose u     | se does not limit the i        | types of future uses is                     | or the stored water.          |            |
| Multipurpose covers                                | •                       |                                |   | _                             |            |
| agriculture, fire prot<br>the type of storage list | -                       | _                              |   | _                             |            |
| and type or everage men                            | ,                       |                                |   | HEULI                         | V LD       |
| MULTIP   | UZPOSE                  |                                |   | MAY 2 9                       |            |
|  |                         |                                |   | WATER RESOU<br>SALEM, O       | REGON      |
| App. No. 2-87                                      |                         | 'or Department Us<br>ermit No. | e<br>Date                                   | SALEM, O                      | Lacit      |
| Last updated: 11/24/2008                           |                         | olication to Store Water in    |   | WR                            | ]          |

### 4. PROPERTY OWNERSHIP

| Do you own all the land where you propose to divert, transport, and use water?   |
|--|
| X Yes (please check appropriate box below then skip to section 5)  |
| There are no encumbrances  |
| This land is encumbered by easements, rights of way, roads or other encumbrances (please provide a copy of the recorded deed(s))   |
| No (Please check the appropriate box below)  |
| ☐ I have a recorded easement or written authorization permitting access.   |
| ☐ I do not currently have written authorization or easement permitting access.   |
| Written authorization or an easement is not necessary, because the only affected lands I do not own are state-owned submersible lands, and this application is for irrigated and/or domestic use only (ORS 274.040). (Do not check this box is you described your use as "Mulitpurpose" in #3 above  |
| List Name and mailing addresses of all affected land owners:   |
| NA   |
| 5. ENVIRONMENTAL IMPACT  |
| A. Channel: is the reservoir ( In Stream or Soff channel?  |
| B. Wetland: is the project in a wetland? (Yes No Don't know  |
| C. Existing: is this an existing reservoir? Ves No   |
| If yes how long has it been in place? 35 years   |
|  |
| If yes, how much? The fish habitat upstream from the proposed structure? Yes No Don't know miles   |
| E. Partnerships: Have you been working with other agencies? Yes No   |
| Indicate agency, staff and phone numbers of those involved. Also indicate any agencies that are cost sharing in this project.  RECEIVED  |
| APR 06 2009  |
| 6. SIGNATURE WATER RESOURCES DEPT  |
| SALEM, OREGON swear that all statements made and information provided in this application are true and correct to the best of my knowledge.  |
| Donud e A 4-02-09  |
| Landowner Signature Date   |
| Before you submit your application be sure you have:   |
| <ul> <li>Answered each question completely.</li> <li>Included a legible map that includes Township, Range, Section, quarter-quarter and tax lot number RECEIVED</li> <li>The map must meet map requirements to be accepted.</li> </ul>   |
| - The state of the |
| <ul> <li>Included a land use form or receipt stub signed by a local planning official.</li> <li>Included a check payable to Oregon Water Resources Department for the appropriate amount.</li> </ul>   |
| FEE STRUCTURE: The fee is based on the number of acre-feet proposed to be stored. The baseless RESOURCES DEPT is \$80. In addition, there is a fee of \$20 per acre-foot or fraction thereof. Example: 0.3 AF= \$ 100; SALEM, OREGON 1.5 AF= \$ 120; 20.0 AF= \$ 480; 30.0 AF= \$ 680.   |

## For Local Government Use Only

The following section must be completed by a planning official from each county and city listed unless the project will be located entirely within the city limits. In that case, only the city planning agency must complete this form. This deals only with the local land-use plan. Do not include approval for activities such as building or grading permits.

| Please check the appropriate | box below and | provide the rec | uested information |
|------------------------------|---------------|-----------------|--------------------|
|------------------------------|---------------|-----------------|--------------------|

| Type of Land-Use Approval Needed (e.g. plan amendments, rezones, conditional-use permits, etc.)  | Cite Most Significant, Applicable Plan<br>Policies & Ordinance Section References  | Land-   | Use Approval:  |
|--|--|---|--|
|  |  | Obtained Denied                                 | Being pursued  |
|  | -  | Obtained  | Not being pursued Being pursued  |
|  |  | Denied  | Not being pursued  |
|  |  | Obtained  | Being pursued  |
|  |  | Denied  | Not being pursued  |
|  |  | Obtained Denied                                 | Being pursued Not being pursued  |
|  | -  | Obtained  | Being pursued  |
|  |  | Denied  | Not being pursued  |
|  | water below, or on a separate sheet.   |   | RECEIVE<br>APR 0 6 200   |
|  |  |   | APR 0 6 200<br>WATER RESOURCES<br>SALEM, OREGO   |
| e:   | Title:   |   | APR 0 6 200<br>WATER RESOURCES<br>SALEM, OREGO   |
|  | Title:   |   | APR 0 6 200<br>WATER RESOURCES<br>SALEM, OREGO   |
| e:eture:ernment Entity:eto local government representative: usign the receipt, you will have 30 day Use Information Form or WRD may p                | Title: Phone: Please complete this form or sign the strong the Water Resources Departments   | e receipt belo                                  | APR 0 6 200 WATER RESOURCES SALEM, OREGO  Date:  w and return it to the late to return the con   |
| e:ernment Entity:  to local government representative: usign the receipt, you will have 30 day Use Information Form or WRD may promprehensive plans. | Title: Phone: Please complete this form or sign the strom the Water Resources Department or summer the land use associated with the strong the land use associated with the land use as a land | e receipt belo<br>ent's notice d<br>he proposed | APR 0 6 200 WATER RESOURCES SALEM, OREGO  Date:  w and return it to the late to return the compuse of water is compuse of water is compuse of water is compused. |
| e:ernment Entity:  to local government representative: usign the receipt, you will have 30 day Use Information Form or WRD may promprehensive plans. | Title: Phone: Please complete this form or sign the strong the Water Resources Departments   | e receipt belo<br>ent's notice d<br>he proposed | APR 0 6 200 WATER RESOURCES SALEM, OREGO  Date:  w and return it to the late to return the consuse of water is commuse of water is communicated.                 |