Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400)
This is the checklist used by WRD staff REPAIR OF A RETURN
Application 87472 County County Per MAP Priority Date 6 15 2009
Township Range Section Surre #10872,4
AmountMaisture - 60CFSUse IRRIG ACRES Watermaster Dist. # 5
OTAZZIOCES & RAISING / PENDLETON
Caseworker Assigned Soil MaisTure
□ Brook Geffen □ Jeana Eastman □ Joel Plahn □ Kerry Kavanagh Michele McAleer
Applicant/Organization Name, Mailing Address, and Telephone Number.
Source of water. If stored water, is the stored water component filed out, including a non-expired
agreement for stored water must be included. (ORS 537.400) NOTE: A surface water application cannot be filed at the same time as a Reservoir or Alt Reservoir if it will be for the use of the stored water under the PROPOSED Reservoir application (E2).
The proposed source is or is not (circle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.
Property ownership indicated.
O If applicant does not own all the land, the affected landowner's name and mailing address must be listed.
O If applicant does not own all the land, a signed statement declaring the existence of either written authorization or an easement permitting access to land crossed by the proposed ditch canal or other work must be submitted.
D. Groundwater development section (Page 3 and 4, Section B) or a well-log report.
Proposed use of water. If supplemental, list primary acreage.
Enclosed Supplemental Form for each proposed use.
Form I (Irrigation) O Form M (Municipal or Quasi-Municipal)
O Form R (Mining) O Form Q (Commercial or Industrial)
O Spring Description Sheet
Amount of water from each source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF)
Period of use 2 SEMPRATE USES; 2 UNIQUE PERIODS of USE.
Water management section (Please estimate if the water system has not been designed).
Resource Protection Section (Page 6, Section 5).

Project schedule (If system is already completed, indicate "existing").

feet, preliminary plans and specifications for dam and impoundment are required. In addition, the map multiprepared by a CWRE. All applicants or the applicant's authorized agent (include title or authority if for an organization or corpora must sign the application in ink. Signature must be an original "wet" signature. Copies cannot be accept to you must include a Legal description of all the properties involved where water is diverted, crossed, and us The Legal description includes a metes and bounds, or other government survey description. A copy of the deed, land sales contract or title insurance policy can provide this information, or you may submit a lot boo report prepared by a title company. The Department will not accept a copy of the tax bill. A completed Land-Use Form or receipt signed and dated by the appropriate planning department officials. Please be certain that the Land-Use form lists all lands involved and all uses proposed. Date of signature be within the past 12 months. Signature must be an original "wet" signature. Copies cannot be accepted. To be Description in Acceptant Forms JG. The map must meet all the minimum requirements of OAR 690-310-0050. O Township, Range, Section O Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU) Place of use, 1/4, 1/4's and tax lot clearly identified O Even map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.) O Location of each diversion point, well or dam by reference to a recognized public land survey corner O Reference corner on map North Directional Symbol Number of acres per 1/4, 1/4, if for irrigation, nursery, or agriculture Each point of diversion coordinate O Other Place Secription in the past 12 months of the properties involved where water is diverted, crossed, and use in the properties in the properties involved where water is diverted, crossed, and use in the properties in the propertie		
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The Legal description includes a metes and bounds, or other government survey description. A copy of the deed, land sales contract or title insurance policy can provide this information, or you may submit a lot bor report prepared by a title company. The Department will not accept a copy of the tax bill. A completed Land-Use Form or receipt signed and dated by the appropriate planning department officials. Please be certain that the Land-Use form lists all lands involved and all uses proposed. Date of signature be within the past 12 months. Signature must be an original "wet" signature. Copies cannot be accepted. To be Developed by Apaluant Founds To the map must meet all the minimum requirements of OAR 690-310-0050. O Township, Range, Section O Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU) O Place of use; 1/4, 1/4's and tax lot clearly identified O Even map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.) O Location of each diversion point, well or dam by reference to a recognized public land survey corner O Reference corner on map O North Directional Symbol O Number of acres per 1/4, 1/4, if for irrigation, nursery, or agriculture O Each point of diversion coordinate O Other Passe Fees Amount of water requested Total Zia Total Exam Fees Zia Additional Use @ Zoo = Zoo	+	All applicants or the applicant's authorized agent (include title or authority if for an organization or corporation), must sign the application in ink. Signature must be an original "wet" signature. Copies cannot be accepted.
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Reviewed by:	_	Addtn' POD @ Amount Due \$
Reviewed by: Y/W Date: 6-15-2009		
		Reviewed by:

STATE OF OREGON

WATER RESOURCES DEPARTMENT RECEIPT # 96780 725 Summer St. N.E. Ste. A INVOICE #_ SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-0904 (fax) **APPLICATION** RECEIVED FROM: STANFIELD IRRIGATION PERMIT DISTRICT BY: TRANSFER CHECK:# OTHER: (IDENTIFY) CASH: TOTAL REC'D M 18126 **TREASURY** 4170 WRD MISC CASH ACCT \$ COPIES 0407 \$ OTHER: (IDENTIFY) 0244 Muni Water Mgmt. Plan_ 0245 Cons. Water 4270 WRD OPERATING ACCT **MISCELLANEOUS** 0407 **COPY & TAPE FEES** \$ 0410 RESEARCH FEES \$ 0408 MISC REVENUE: (IDENTIFY) \$ TC162 DEPOSIT LIAB. (IDENTIFY) 0240 EXTENSION OF TIME RECORD FEE WATER RIGHTS: EXAM FEE SURFACE WATER 0202 0201 0203 **GROUND WATER** 0204 \$ **TRANSFER** 0205 LICENSE FEE **EXAM FEE WELL CONSTRUCTION** 0219 WELL DRILL CONSTRUCTOR 0218 \$ LANDOWNER'S PERMIT OTHER (IDENTIFY) TREASURY 0437 WELL CONST. START FEE 0536 WELL CONST START FEE 0211 CARD# MONITORING WELLS \$ CARD# 0210 OTHER (IDENTIFY) 0607 TREASURY 0467 HYDRO ACTIVITY LIC NUMBER \$ POWER LICENSE FEE (FW/WRD) 0233 \$ HYDRO LICENSE FEE (FW/WRD) 0231 \$ HYDRO APPLICATION TREASURY OTHER / RDX

RECEIPT:

FUND _ OBJ. CODE

DESCRIPTION

96780

____ TITLE

VENDOR #

DATED: 6-15-00 BY:

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