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

Application R 87481 County Priority Date 6-26-269 Township 22	1ALHEUR 200
Priority Date 6-26-209 Township 22	Range 46 E Section 14 Taxlot 300
	KERRY K
Amount (AF) watermaster	Dist # 9
*Minimum Requireme	ents (ORS 537.409)
Landowner Name, Mailing Address* and Telephon	ne Number.
Source* and tributary listed. NO WELLS-MUST H	
SOURCE!!	,
Reservoir Location- Township, Range, Section, Qua	arter Ouarter, Taxlot
Dam height*, if applicable	
Total Quantity * of Storage Requested: 9.2	AF
Proposed Use of the waterCannot accept applicate	
(E2)	101 101 450 01 1110 STOLEN THE STOLEN STOLEN
Property ownership indicated? * If applicant does	not own all the land, is the affected landowner's
name and mailing address listed? (Including: lands not o	-
locatedor that are crossed by the diversion works	
Environmental Impact section completed? Not fate	
Application signed by the landowner(s)? All part	ies noted as applicants must sign the application.
Must be an original "wet" signature.	
Completed Land-Use Form * or receipt signed by t	
ehclosed? Does the use on land-use form match the pro	posed use on the application? Must be an original
"wet" signature within the last 12 months.	
Acceptable map ** Indicates requirements of sta	adards set forth by the Commission and causes
fatal flaw if not provided by the applicant.	
□ Reservoir Location - noting Township, Rang	
□ Scale of the Map (not less than 1"-1320')	**
□ Reference corner on map	□ North Directional Symbol **
□ 1/41/4's clearly identified	□ Reservoir clearly identified *
□ Dam or POD (If off channel) Location coordi	•
survey corner* If no dam, use coordinates to ce	nter of reservoir.**
Fees enclosed*? Base	e Fee\$ 80 / 10 × 20
CINE CHEEK	plus 200 / 10 x 20
3 AMLIC(S)	
	plus\$
Total Paid \$ 280 Total I Completeness Check by: \(\forall T \to Y \)	Fees \$ 280
Completeness Check by:	Date: 6-29-2009
Groups/wr/Customer Service Group/Alt Povicey choolel	

STATE OF OREGON

WATER RESOURCES DEPARTMENT

96922

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

INVOICE # ____

ECEIVED FROM (:	for Adrian Ranch PE	cation see below rmit
ASH: CH	HECK:# OTHER: (IDENTIFY) TOTAL I	REC'D \$ 880.00
1083	TREASURY 4170 WRD MISC CASH ACCT	
0407	COPIES	\$
	OTHER: (IDENTIFY)	
0243 I/S Le	ase 0244 Muni Water Mgmt. Plan 0245 Cons. W	ater
	4270 WRD OPERATING ACCT	
	MISCELLANEOUS COPY & TAPE FEES RESEARCH EFES RESEARCH EFES R \$7482 \$260.00	-
0407	COPY & TAPE FEES R 47482 # 2/00.00	\$
0410	RESEARCH FEES	\$
0408	MISC REVENUE: (IDENTIFY) R-87483 # 840.00	\$
TC162	DEPOSIT LIAB. (IDENTIFY)	\$
0240	EXTENSION OF TIME	\$
	WATER RIGHTS:	RECORD FEE
0201	SURFACE WATER ALT RES \$ 980.00 020	\$
0203	OROLIND WATER	\$
0205	TRANSFER 4611	
	WELL CONSTRUCTION EXAM FEE	LICENSE FEE
0218	WELL DRILL CONSTRUCTOR \$ 021	9 \$
0210	LANDOWNER'S PERMIT 022	Δ.
	LANDOWINER 3 PERIVITI	
	OTHER (IDENTIFY)	
0536	TREASURY 0437 WELL CONST. START FEE	A CONTRACTOR OF THE STATE OF TH
0211	WELL CONST START FEE \$	CARD#
0210	MONITORING WELLS \$	CARD#
	OTHER (IDENTIFY)	
0607	TREASURY 0467 HYDRO ACTIVITY LIC NUM	BER
0233	POWER LICENSE FEE (FW/WRD)	\$
0231	HYDRO LICENSE FEE (FW/WRD)	\$
0201	HYDRO APPLICATION	\$
ohd a sa sa tagain		
	TREASURY OTHER / RDX	
FUND	TITLE	
OBJ. CODE	VENDOR #	
DESCRIPT	ION	\$

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