

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87484 County UNION
Priority Date 6-26-2009 Township 1N Range 40E Section 33 Taxlot 7800
Use M-P Caseworker MICHAEL M
Amount (AF) 9 Watermaster DIST #6

*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 10 FT
- ☒ Total Quantity * of Storage Requested: 9 AF
- ☒ Proposed Use of the water....Cannot accept application for use of this stored water at the same time (E2) REQUIRED BT CORRESPONDENCE
- ☒ 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 O.K. JS
- ☒ Acceptable map ** Indicates requirements of standards set forth by the Commission and causes fatal flaw if not provided by the applicant. SUBMITTED 2 MAPS

☒ 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 **

☒ 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.** REQUIRED & APPROVED

☒ Fees enclosed*?

Base Fee\$ 80

plus\$ 180

plus\$

Total Paid \$ 280

Total Fees \$ 260

Completeness Check by: HTM

Date: 6-26-2009

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 96923

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

INVOICE # _____

RECEIVED FROM: Scotty B Hindman
BY: _____

APPLICATION	R-87484
PERMIT	
TRANSFER	

CASH: ☐ CHECK: # 1134 OTHER: (IDENTIFY) ☐TOTAL REC'D \$ 280.00**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**

0407 COPY & TAPE FEES	\$
0410 RESEARCH FEES	\$
0408 MISC REVENUE: (IDENTIFY)	\$
TC162 DEPOSIT LIAB. (IDENTIFY)	\$
0240 EXTENSION OF TIME	\$

WATER RIGHTS:

0201 SURFACE WATER	EXAM FEE	0202	RECORD FEE
0203 GROUND WATER	\$ 280.00	0204	\$
0205 TRANSFER	\$		\$

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR	EXAM FEE	0219	LICENSE FEE
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: 96923

DATED: 6-26-09 BY: A. Bell

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