

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

BY ENGINEER
STEVE BRUCE

Application R 87487 / County CLATSOP /
 Priority Date 6-30-2009 / Township 5S Range 10 Section 18 Taxlot 500 & 700
 Use M-P / Caseworker JANA E
 Amount (AF) 11.0 / Watermaster 20

RECEIVED

*Minimum Requirements (ORS 537.409)

JUN 30 2009

WATER RESOURCES DEPT
SALEM, OREGON

- 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: 11.0
- Proposed Use of the water....Cannot 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 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 OK.
- Acceptable map ** Indicates requirements of standards set forth by the Commission and causes fatal 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 **
- 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.**

Fees enclosed*? ✓

Base Fee\$ 80

SEPARATE
CITEK

plus\$ 220

11420 = 220

plus\$ _____

Total Paid \$ 300

Total Fees \$ 300

Completeness Check by: HAM

Date: 6-30-2009

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **96961**

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

INVOICE # _____

RECEIVED FROM: Alldente Properties, LLC

APPLICATION	587487
PERMIT	
TRANSFER	

BY: _____

CASH: CHECK:# 1044 OTHER: (IDENTIFY)

TOTAL REC'D \$ 300⁰⁰

1083 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES			\$
OTHER: (IDENTIFY)			\$
0243 I/S Lease		0244 Muni Water Mgmt. Plan	
		0245 Cons. Water	

**RECEIVED
OVER THE COUNTER**

4270 WRD OPERATING ACCT

MISCELLANEOUS

0407 COPY & TAPE FEES	<u>46111</u>	\$
0410 RESEARCH FEES		\$
0408 MISC REVENUE: (IDENTIFY)		\$
TC162 DEPOSIT LIAB. (IDENTIFY)		\$
0240 EXTENSION OF TIME		\$

WATER RIGHTS:

0201 SURFACE WATER <u>ALT. RES.</u>	EXAM FEE \$ <u>300⁰⁰</u>	0202	RECORD FEE \$
0203 GROUND WATER	\$	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: **96961**

DATED: 6-30-09 BY: LTB

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