

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

REPAIR OF A RETURN.

Application R 87498 County HOOD RIVER
Priority Date 7-20-2009 Township 2N Range 10E Section 3 Taxlot 1000
Use M-P Caseworker KERRY K
Amount (AF) 0.3000 Watermaster DIST # 3

*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
- Total Quantity * of Storage Requested: 0.300 AF
- 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. RECEIVED Pg 1 BY FAX 7-20-2009
- 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\$ 300
plus\$ 25
plus\$ _____

Total Paid \$ 725 Total Fees \$ 325 EXAM \$ 400 R.F.

Completeness Check by: NTM Date: 7-20-2009

STATE OF OREGON
WATER RESOURCES DEPARTMENT

RECEIPT # **97218**

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

INVOICE # _____

RECEIVED FROM: **HPC Properties, Inc.**
 BY: _____

APPLICATION	287498
PERMIT	
TRANSFER	

CASH: CHECK:# **X 1016** OTHER: (IDENTIFY)

TOTAL REC'D \$ **725⁰⁰**

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	46111	\$
0410	RESEARCH FEES		\$
0408	MISC REVENUE: (IDENTIFY)		\$
TC162	DEPOSIT LIAB. (IDENTIFY)		\$
0240	EXTENSION OF TIME		\$
WATER RIGHTS:			
0201	SURFACE WATER	Alt Res	\$
0203	GROUND WATER		\$
0205	TRANSFER		\$
WELL CONSTRUCTION			
0218	WELL DRILL CONSTRUCTOR		\$
	LANDOWNER'S PERMIT		\$
	OTHER (IDENTIFY)		\$

EXAM FEE
\$ 325⁰⁰
\$
\$
EXAM FEE
\$

RECORD FEE
\$ 400⁰⁰
\$

LICENSE FEE
\$
\$

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: **97218**

DATED: **7.20.09** BY: **LSG**

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