

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87505 County MARION
Priority Date 8 4 09 Township 9 S Range 2 W Section 20 Taxlot 800
Use MULTI-P Caseworker BRAD G
Amount (AF) 0.245 AF Watermaster DIST #

*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: 0.245 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 landowners 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 JR
- 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 \$ _____

Total Fees \$ 325

RECEIVED

AUG 04 2009

WATER RESOURCES DEPT
SALEM, OREGON

Completeness Check by: JOE P

Date: AUG 4 2009

STATE OF OREGON
WATER RESOURCES DEPARTMENT

RECEIPT # **97375**

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

INVOICE # _____

RECEIVED FROM: James L & Jayne Miller

APPLICATION	R-87505
PERMIT	
TRANSFER	

BY: _____

CASH: CHECK: # 7322 OTHER: (IDENTIFY)

TOTAL REC'D \$ 325⁰⁰

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			
0410 RESEARCH FEES			
0408 MISC REVENUE: (IDENTIFY)			
TC162 DEPOSIT LIAB. (IDENTIFY)			
0240 EXTENSION OF TIME			

4/6/11

WATER RIGHTS:

0201 SURFACE WATER	EXAM FEE	\$ <u>325⁰⁰</u>	0202	RECORD FEE	\$
0203 GROUND WATER		\$	0204		\$
0205 TRANSFER		\$			

ALT RES

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: **97375**

DATED: 8.4.09 BY: LSTG

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