

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87509 County WASH
Priority Date AUG 5 2009 Township IN Range 1W Section 28 Taxlot 6500
Use MULTI-P Caseworker KERRY K
Amount (AF) 1.160 Watermaster DIST #18

*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 4
- Total Quantity * of Storage Requested: 1.160 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.*
- 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\$ 50
plus\$ 400 REC FEE

Total Paid \$ 750

Total Fees \$ 750

Completeness Check by: HFM

Date: AUG 6, 2009

STATE OF OREGON
WATER RESOURCES DEPARTMENT

RECEIPT # **97386**

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

INVOICE # _____

RECEIVED FROM: Lakeshore Estates
 BY: Homeowners Assoc.

APPLICATION	<u>R 87509</u>
PERMIT	
TRANSFER	

CASH: CHECK:# 898 OTHER: (IDENTIFY)

TOTAL REC'D \$ 750⁰⁰

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 46111/46111 \$
 0410 RESEARCH FEES \$
 0408 MISC REVENUE: (IDENTIFY) \$
 TC162 DEPOSIT LIAB. (IDENTIFY) \$
 0240 EXTENSION OF TIME \$

WATER RIGHTS:

0201 SURFACE WATER ALT. RES. \$ 350⁰⁰ 0202 \$ 400⁰⁰
 0203 GROUND WATER \$ 0204 \$
 0205 TRANSFER \$

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR \$ 0219 \$
 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: **97386**

DATED: 8.5.09 BY: LAG

Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal