

# Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87510 / County WASH /  
Priority Date AUG 5 2009 / Township 1N Range 1W Section 28 Taxlot 6600  
Use MULTI-P / Caseworker KERRY K /  
Amount (AF) 1.580 / 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: 1.580 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 located .....or..... 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'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 AF /  
plus\$ 400 Rec Fee /  
Total Paid \$ 725 / Total Fees \$ 725 /

Completeness Check by: HFM / Date: AUG 6 2009 /

**STATE OF OREGON  
WATER RESOURCES DEPARTMENT**

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

RECEIPT # **97387**

INVOICE # \_\_\_\_\_

RECEIVED FROM: <u>Lakeshore Estates</u>	APPLICATION <u>R 87510</u>
BY: <u>Homeowners Assn.</u>	PERMIT _____
CASH: <input type="checkbox"/> CHECK:# <u>899</u> OTHER: (IDENTIFY) <input type="checkbox"/>	TRANSFER _____
<b>TOTAL REC'D \$ 725<sup>00</sup></b>	

**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 <u>ALT. RES.</u>	EXAM FEE	RECORD FEE	
0203	GROUND WATER	\$ <u>325<sup>00</sup></u>	\$ <u>400<sup>00</sup></u>	0202
0205	TRANSFER	\$	\$	0204

**WELL CONSTRUCTION**

0218	WELL DRILL CONSTRUCTOR	EXAM FEE	LICENSE FEE	
_____	LANDOWNER'S PERMIT	\$	\$	0219
_____	OTHER (IDENTIFY) _____	\$	\$	0220

**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 _____				\$

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DATED: 8.5.09 BY: LAG

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