## Alternate Reservoir Application Completeness Checklist This is the checklist used by WRD staff

Application 12 87515 County Pock
Priority Date 8-20-2009 Township 75-Range 5 W Section 26 Taxlot 409
Use Mucti- P Caseworker Michael M. —
Amount (AF) G Watermaster $\frac{71.57}{21.57} $ # 16
Amount (Ar) watermaster watermaster
*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 10 1===7
Total Quantity * of Storage Requested: G AF
Proposed Use of the waterCannot 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 **
1/41/4'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\$ 150 6 x 25
plus\$
Total Paid \$ 450 Rec. Fee. Due.
Completeness Check by: HTM Date: 8-21-2009
Groung/xxr/Customer Service Groun/Alt Peview checklist doc 11.26.2007 ike

**STATE OF OREGON** WATER RESOURCES DEPARTMENT 725 Summer St. N.E. Ste. A RECEIPT # 97529 INVOICE # . SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-0904 (fax) RECEIVED FROM: EVENT **APPLICATION** PERMIT BY: TRANSFER CASH: CHECK:# OTHER: (IDENTIFY) **M71100** TOTAL REC'D PRO MISC CASH ACCI 0407 **COPIES RECEIVED** OTHER: (IDENTIFY) OVER THE COUNTER 0243 I/S Lease 0244 Muni Water Mgmt. Plan 4278 THIS OPERATING ACCT MISCELLANEOUS 0407 **COPY & TAPE FEES** 0410 **RESEARCH FEES** 0408 MISC REVENUE: (IDENTIFY) DEPOSIT LIAB. (IDENTIFY) TC162 **EXTENSION OF TIME** 0240 RECORD FEE **WATER RIGHTS:** SURFACE WATER ATT RPS 0202 0201 \$ **GROUND WATER** 0204 0203 0205 **TRANSFER** LICENSE FEE **EXAMPLE WELL CONSTRUCTION** 0219 WELL DRILL CONSTRUCTOR 0218 0220 LANDOWNER'S PERMIT OTHER 0536 TREASURY 0437 WELL CONST. START FEE 0211 WELL CONST START FEE CARD# \$ CARD# 0210 MONITORING WELLS OTHER (IDENTIFY) 0607 TREASURY 0467 HYDRO ACTIVITY LIC NUMBER \$ 0233 POWER LICENSE FEE (FW/WRD) \$ HYDRO LICENSE FEE (FW/WRD) 0231 \$ HYDRO APPLICATION

TREASURY OTHER/RDX FUND TITLE

OBJ. CODE **VENDOR #** DESCRIPTION .

**RECEIPT: 97529** 

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