

Standard Application Completeness Checklist

Minimum Requirements (OAR 690-310-0040)(ORS 537.400)

Application 86939 Township 18S
Priority Date June 29, 2007 Range 8E
Use(s) Herbaceous Consumption Section 32
Rate 0.005 POD Loc _____
County Desch. POU Loc _____
W.M. 11 Caseworker Alyssa

- ☒ Applicant/Organization Name, Mailing Address and Telephone Number, application signed in ink.
- ☒ Source of water. If stored water, is the stored water component filed out, including a non-expired agreement for stored water must be included. (ORS 537.400)
- ☒ Property ownership indicated.
 - ☒ If applicant does not own all the land, the affected landowner's name and mailing address must be listed.
 - ☒ If applicant does not own all the land, a statement declaring the existence of either written authorization or an easement permitting access to land crossed by the proposed ditch canal or other work must be submitted.
- ☒ Groundwater development section (Page 2, Section 3 and/or Page 3, Section 2) or a well log report.
- ☒ Proposed use of water. If supplemental, list primary water right acreage if applicable.
- ☒ Enclosed Supplemental Form for each proposed use.
 - ☐ Form I (Irrigation) ☐ Form M (Municipal or Quasi-Municipal)
 - ☐ Form R (Mining) ☐ Form Q (Commercial or Industrial)
 - ☐ Spring Description Sheet
- ☒ Amount of water from *each* source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF)
- ☒ Period of use
- ☒ Water management section (Please estimate if the water system has not been designed).
- ☒ Resource Protection Section (Page 6, Section 5).

☒ Project schedule (If system is already completed, indicate "existing").

☒ For reservoir applications storing more than 9.2 acre feet, and a dam height of more than 10 feet, preliminary plans and specifications for dam and impoundment are required.

☐ If the above is statement is checked, the map must be prepared by a CWRE.

☒ All applicants (or the authorized agent with title or authority if for an organization or corporation), must sign the application in ink.

☒ You must include a Legal description of the property involved that includes a metes and bounds, or other government survey description. A copy of the deed, land sales contract or title insurance policy can provide this information, or you may submit a lot book report prepared by a title company. The Department will not accept a copy of the tax bill.

☒ A completed Land-Use Form or receipt signed and dated by the appropriate planning department officials. *Date of signature must be within the past 6 months.*

☒ The map must meet all the minimum requirements of OAR 690-310-0050.

☒ Township, Range, Section

☒ Location of main canals, ditches, pipelines or flumes

☒ Place of use, 1/4, 1/4's and tax lot clearly identified

☒ Even map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.)

☒ Location of each diversion point well or dam by reference to a recognized public land survey corner

☒ North Directional Symbol

☒ Number of acres per 1/4, 1/4, if irrigation, nursery, or agriculture

☒ Other _____

☒ Reference corner on map

☒ Each point of diversion coordinate

☐ Fees: Amount of water requested 0.005 cfs

Base Fee \$ 300

Total Exam Fee \$ 500 + 250 + 250

1st CFS/AF 200

Total Paid \$ 750 + 1000 = 1750

Addn'l CFS/ AF @ _____ = _____

Amount Due \$ 0 - Refund \$250 = 250

Addn' POD @ _____ = _____

Reviewed by JS

Date 7/02/2007

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **88445**

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

INVOICE # _____

RECEIVED FROM: <u>Jerry D. Giesy</u>		APPLICATION <u>86939</u>
BY: <u>Barbara Giesy</u>		PERMIT _____
		TRANSFER _____
CASH: ☐	CHECK: # <u>1906</u> ☒	OTHER: (IDENTIFY) _____
		TOTAL REC'D \$ <u>750.00</u>

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	EXAM FEE \$ <u>500.00</u>	0202 RECORD FEE \$ <u>250.00</u>
0203 GROUND WATER	\$ _____	0204 \$ _____
0205 TRANSFER	\$ _____	

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: **88445**

DATED: 6/29/07 BY: Diana Duchi

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

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **88447**

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

INVOICE # _____

RECEIVED FROM: Jerry D. Giesy
BY: Barbara Giesy

APPLICATION	<u>86939</u>
PERMIT	
TRANSFER	

CASH: ☐ CHECK: # 1907 OTHER: (IDENTIFY) ☐

TOTAL REC'D \$ 250.00

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	\$	0202	RECORD FEE	\$ <u>250.00</u>
0203 GROUND WATER	\$	0204		\$
0205 TRANSFER	\$			

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR	\$	0219	LICENSE FEE	\$
LANDOWNER'S PERMIT		0220		\$

OTHER (IDENTIFY) _____

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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: **88447**

DATED: 6/27/07 BY: Diana Duchi

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