

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87534 County LANE
Priority Date 10-2-2009 Township 19 S Range 4 W Section 31 Taxlot 400
Use M-P Caseworker KERRY K
Amount (AF) 3.53 AF Watermaster DIST #2

*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 8 FEET
- ☒ Total Quantity * of Storage Requested: 3.530 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. NORM WL. - SENDING ORIGINAL L.U. (GREEN INK). REVIEWED ON OCT 5 2009.
- ☒ 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') ** 200 FEET
 - ☒ 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

AF plus\$ 100

plus\$ Rec Fee 400

Total Paid \$ 800

Total Fees \$ 800 Rec Fee 400

Completeness Check by: HTM Date: OCT 2 2009

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **98074**

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

INVOICE # _____

RECEIVED FROM: <u>St. George & Associates, Inc.</u>		APPLICATION <u>287534</u>
BY: _____		PERMIT _____
		TRANSFER _____
CASH: ☐	CHECK: # <u>5206</u> ☒	OTHER: (IDENTIFY) _____
		TOTAL REC'D <u>\$800.00</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	<u>46111 / 46111</u>	\$ _____
0410 RESEARCH FEES		\$ _____
0408 MISC REVENUE: (IDENTIFY) _____		\$ _____
TC162 DEPOSIT LIAB. (IDENTIFY) _____		\$ _____
0240 EXTENSION OF TIME		\$ _____

WATER RIGHTS:		EXAM FEE	RECORD FEE
0201 SURFACE WATER <u>ALT RES</u>	\$ <u>400.00</u>	0202	\$ <u>400.00</u>
0203 GROUND WATER	\$ _____	0204	\$ _____
0205 TRANSFER	\$ _____		
WELL CONSTRUCTION		EXAM FEE	LICENSE FEE
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: **98074**

DATED: 10-2-09 BY: LSG

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