Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff

•	12				
Application G 17280	County_	WAZ	Priority D	ate Id-	23-2009
Township 25	Range	44 E	Section	3	\$4
Amount Cis Gran Us	e Comr	7	Watermaster Dis	st.# 6	120
Caseworker Assigned					
□ Brook Geffen Jeana Eas	tman 🗆 Joe	l Plahn	□ Kerry Kavanagh	□ Miche	ele McAleer
Applicant/Organization Name	e, Mailing Addres	ss, and Tele	phone Number.		
Source of water. If stored wa agreement for stored water must be filed at the same time as a Rest the PROPOSED Reservoir appli	be included. (OR: servoir or Alt Res	S 537.400)	NOTE: A surface was	ter applica	tion cannot
The proposed source is of is ORS 538, then return application negative IR will be issued.					
Property ownership indicated			•		
O If applicant does not	own all the land, t	he affected	landowner's name and	l mailing ac	idress must be list
	asement permittin		tement declaring the ex land crossed by the pr		
Groundwater development sec	ction (Page 3 and	4, Section I	3) or a well log report.		
Proposed use of water. If supp	lemental, list prin	nary acreag	e.		
Enclosed Supplemental Form	for each proposed	l use.			
O Form I (Irrigation)	O Form	n M (Munic	ipal or Quasi-Municip	al)	
O Form R (Mining)	Form	n Q (Comm	ercial or Industrial)		
O Spring Description Sh	eet				
Amount of water from each so	ource in gallons pe	er minute (C	3PM), cubic feet per se	econd (CFS	s), or acre feet (AF
Period of use					
Water management section (P	lease estimate if t	he water sy	stem has not been desi	gned).	
Resource Protection Section (Page 6, Section 5).			
of Project schedule (If system is	already complete	d indicate "	evictina")		•

0		to store more than 9.2 acre feet, and a dam lieis fam and impoundment are required. In addition	· ·
Þ	must sign the application in ink. Signature mu	ent (include title or authority if for an organizatiust be an original "wet" signature. Copies can	not be accepted.
4	The Legal description includes a metes and bo	e properties involved where water is diverted, crounds, or other government survey description. icy can provide this information, or you may suftenent will not accept a copy of the tax bill.	A copy of the
p	Please be certain that the Land-Use form lists	and dated by the appropriate planning department all lands involved and all uses proposed. Date be an original "wet" signature. Copies cannot	of signature must
1	The map must meet all the minimum requirement		
	Place of use, 1/4, 1/4's and tax lot clearly Even map scale not less than 4" = 1 mile (Location of each diversion point, well or of survey corner Reference corner on map North Directional Symbol	es or flumes (if POA/POD is outside of POU) identified (example: 1" = 100 ft, 1" = 200 ft, etc.) 400 dam by reference to a recognized public land	
-	O Number of acres per 1/4, 1/4, if for irrigate Each point of diversion coordinate	ton, nursery, or agriculture	
	O Other 172	AMIC BT SHORE	hy Russ M.
0	G. 668 Fees: Amount of water requested CF3	Grm	
	Base Fee \$ 1000	Additional Use @	1250
	1st CFS/AF 250	Total Exam Fees \$ 1250	400.
	Addtn'i CF S/ AF @ = Addtn' POD @ =	Total Paid \$ 1650 Amount Due \$ Azz Fzz AD	1650
	Reviewed by: # ///	Date: 10-26-2049	

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT# 98342

8342 725 Summe

725 Summer St. N.E. Ste. A SALEM, OR 97301-4172

INVOICE # __

(503) 986-0900 / (503) 986-0904 (fax)										
RECEIVED FROM:	10-14	APPLIC	ST 5105, 2005, 7 410	17280						
BY:	100	wrer		PER	71, 71, 72					
CASH: CHEC	CK:# OT	HER: (IDENTIFY)		TRAN	SFER					
	1 58422 []		TOTAL R	EC'D	\$1650.00				
1083 TF	REASURY	4170 WRD M	ISC CASH A	CCT	0,00					
0407 C	OPIES					\$				
0	OTHER: (IDE	ENTIFY)			_ l	\$				
0243 I/S Lease	9 0244 M	uni Water Mgmt. Pla	n 024	5 Cons. Wa	ter					
		4270 WRD OI	PERATING A	CCT						
N	MISCELLANEOUS	46111			Г					
0407 C	OPY & TAPE FEES					\$				
0410 R	RESEARCH FEES					\$				
0408 M	0408 MISC REVENUE: (IDENTIFY)				_	\$				
TC162 D	DEPOSIT LIAB. (IDE	NTIFY)			_	\$				
0240 E	EXTENSION OF TIME	E			Į	\$				
v	VATER RIGHTS:		EXAM FEE	7,29		RECORD FEE				
0201 S	SURFACE WATER		\$	0202	<u> </u>	\$.				
0203 G	ROUND WATER		\$125000	0204	, [\$4-00,00				
0205 T	RANSFER		\$							
	VELL CONSTRUCTI	ON	EXAM FEE	717		LICENSE FEE				
-	VELL CONSTI		\$	0219	, [\$				
	ANDOWNER'S PER			0220	,	\$				
	OTHER ((IDENTIFY)								
0536 TF	TEASURY	0437 WELL C	ONST. STAI	IT REE						
0211 V	VELL CONST START	Γ FEE	\$		CARD#					
0210 N	MONITORING WELL	s	\$		CARD#					
c	OTHER ((IDENTIFY)								
0607 TF	REASURY	0467 HYDRO	ACTIVITY	LIC NUME	BER .	4 4				
0233 P	POWER LICENSE FE	EE (FW/WRD)				\$				
0231 H	YDRO LICENSE FE	E (FW/WRD)				\$				
	HYDRO APPLICATIO	, ,			[\$				
	REASURY	OTHER	/RDX							
		TITLE			110	(8) (8) (8) (8) (8) (8) (8) (8) (8) (8)				
		VENDOR #								
DESCRIPTION		VLINDON #				\$				
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RECEIPT: 98	342	DATED: 90	23-04 BY:	29	٦					

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