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

Application 12 87546 County Dou G Priority Date 11-12-09
Township 26 S Range 7 W Section 34
Amount (AF) 5.0 Use M-P Watermaster Dist # 15
□ Brook Geffen □ Jeana Eastman □ Joel Plahn Kerry Kavanagh □ Michele McAleer
*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
Total Quantity * of Storage Requested:
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 **
7/41/4'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\$ 12 5 5 x 2 5
Permit Recording Fee \$ Not PA
Total Paid \$ 425 Total Fees \$ 425
Completeness Check by: 47ml Date: 11-16-2009

STATE OF OREGON

WATER RESOURCES DEPARTMENT

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

RECEIPT # 98494 INVOICE #_ (503) 986-0900 / (503) 986-0904 (fax) RECEIVED FROM: Celebration Runch APPLICATION WaShbUCK PERMIT BY: TRANSFER CASH: CHECK:# OTHER: (IDENTIFY) \mathbb{Z} TOTAL REC'D 4170 WRD MISC CASH ACCT 1083 TREASURY \$ 0407 COPIES \$ OTHER: (IDENTIFY) 0243 I/S Lease_ 0244 Muni Water Mgmt. Plan _____ 0245 Cons. Water 4270 WRD OPERATING ACCT **MISCELLANEOUS COPY & TAPE FEES** 0407 \$ 0410 RESEARCH FEES \$ MISC REVENUE: (IDENTIFY) 0408 \$ TC162 DEPOSIT LIAB. (IDENTIFY) \$ EXTENSION OF TIME 0240 WATER RIGHTS: RECORD FEE SURFACE WATER ATT KES \$ 0201 0202 \$ **GROUND WATER** 0203 0204 0205 TRANSFER \$ LICENSE FEE EXAM FEE **WELL CONSTRUCTION** 0219 0218 WELL DRILL CONSTRUCTOR 0220 LANDOWNER'S PERMIT OTHER (IDENTIFY) TREASURY 0437 WELL CONST. START FEE 0536 0211 WELL CONST START FEE CARD# 0210 MONITORING WELLS \$ CARD# OTHER (IDENTIFY) TREASURY 0467 HYDRO ACTIVITY 0607 LIC NUMBER \$ POWER LICENSE FEE (FW/WRD) 0233 \$ 0231 HYDRO LICENSE FEE (FW/WRD) \$ HYDRO APPLICATION TREASURY OTHER / RDX ___ TITLE _____ VENDOR # OBJ. CODE \$ DESCRIPTION DATED: 11-BY:

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