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

Application <u></u> [2]	<u>87547</u> C	ounty <u>Dow</u>	<u> </u>	Date 11-12-2009
Township 2	265Range	7 ~	Section 34	
Amount (AF)	5 _ Use_	M-P	Watermaster	151 # 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: 5 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. 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') North Directional Symbol ** Reference corner on map Reservoir clearly identified * ¹/₄¹/₄'s 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\$ 3 a plus\$_125 5×\$25 Permit Recording Fee \$ PAID - ONLING Total Fees \$____ Total Paid \$ 27m -Date: 11-16-2019 Completeness Check by: Groups/wr/Customer Service Group/templates/alt res review checklist.doc 7-01-2009

CEIPT #	98495	TER RESOUR 725 Summer SALEM, OF	F OREGON CES DEPARTI St. N.E. Ste. A 3 97301-4172 (503) 986-0904 (fax)	INVOICE # .	
CEIVED FR	OM: Celet	ration	Romch	APPLICATION	87547
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SH:	CHECK:#	OTHER: (IDENTIFY)		TRANSFER	
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0407	COPIES				\$
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0407	COPY & TAPE FE				\$ \$
0410	RESEARCH FEE				\$ \$
0408	MISC REVENUE:	· ,			\$
TC162	DEPOSIT LIAB.				\$
0240	EXTENSION OF	IME			
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0201	SURFACE WATE	A HRES	\$425,0	0202	\$
0203	GROUND WATER	1	\$	0204	\$
0205	TRANSFER		\$		
	WELL CONSTRU	CTION	EXAM FEE		LICENSE FEE
0218	WELL DRILL CO	ISTRUCTOR	\$	0219	\$
	LANDOWNER'S	PERMIT		0220	\$
	OTHER	(IDENTIFY)			
0536	AREASURA		CONSIA STAR	TEE A	
0211	WELL CONST ST	ART FEE	\$	CARD#	
0210	MONITORING W	ELLS	\$	CARD #	
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0607	ARPSUN		O ACTIVITY	LIC NUMBER	
0233	POWER LICENS	E FEE (FW/WRD)			\$
0231	HYDRO LICENSE	E FEE (FW/WRD)			\$
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