STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT#	98865	SALEM, C	er St. N.E. Ste. A DR 97301-4172 / (503) 986-0904	INVO	CE #
RECEIVED FR	OM: COVIDY	Plan	311	APPLICA	TION 6 17293
BY:				PERM	
				TRANSI	-EA
CASH:		HER: (IDENTIFY		TOTAL RE	cro \$2250°°
1063		THAT WITE	MISIC CASH	ACCT	
0407	COPIES	5.5			
	_ OTHER: (IDE	NTIFY)		CEIVED	\$
0243 l/S L	_ease 0244 Mu	ıni Water Mamt.		HECOU	
			OPERATIN		
	MISCELLANEOUS			. · Janes	
0407	COPY & TAPE FEES		46111		\$
0410	RESEARCH FEES		iu iii		\$
0408	MISC REVENUE: (ID	ENTIFY)			\$
TC162	DEPOSIT LIAB. (IDEI	NTIFY)			\$
0240	EXTENSION OF TIME				\$
	WATER RIGHTS:		EXAM F	E I	RECORD FEE
0201	SURFACE WATER		\$	0202	\$
0203	GROUND WATER		\$ 2-25	0204	\$
0205	TRANSFER		\$		
	WELL CONSTRUCTO	ON .	EXAM F	:	LICENSE FEE
0218	WELL DRILL CONSTR		\$	0219	\$
	LANDOWNER'S PER			0220	\$
	OTHER (IDENTIFY)			
THE STATE STATE AND A STATE OF				enderliken Augustika eta militari fasti Pi	· · · · · · · · · · · · · · · · · · ·
0536		EWANTE	LCONSTS	IARI FEE	
0211	WELL CONST START		\$	G107.04	ARD#
0210	MONITORING WELLS	3	\$	C	ARD#
	_ OTHER (identify)			
0607		MEY HYD	RO ACTIVIT	Y LIC NUMBE	
0233	POWER LICENSE FE	E (FW/WRD)			\$
0231	HYDRO LICENSE FEE (FW/WRD)				\$
	_ HYDRO APPLICATIO	N			\$
		NIO OF	ER/RDX		
FUND	1	TILE		_	
OBJ. COI	DE \	/ENDOR#		_	
DESCRIF	PTION			_	\$
RECEIPT: 9	8865 stribution – White Copy - C		2 28 09 Copy - Fiscal, Bl		ff Copy - Fiscal

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

	·			
	County YAMH		,	
Township 55 R	ange 3 W	Section _ 4	5, 8	
Amount Use Caseworker Assigned Reproductive Control of Control o	NU Yeur-sound	Watermaster Dist. #	#	
Caseworker Assigned □ Brook Geffen □ Jeana Eastman	Pond MANTENA Doel Plahn DK	erry Kavanagh	Michele McAleer	
Applicant/Organization Name, Mail:	ing Address, and Telephone	e Number.		
Source of water. If stored water, is tagreement for stored water must be included filed at the same time as a Reservoir the PROPOSED Reservoir application of	uded. (ORS 537.400) <i>NOT</i> or Alt Reservoir if it will be	TE: A surface water	application cannot	
The proposed source is or in (circons 538, then return application and negative IR will be issued.				
N Property ownership indicated.				
◊ If applicant does not own all	the land, the affected lando	owner's name and m	ailing address must be listed.	
O If applicant does not own all authorization or an easemen work must be submitted.				
Groundwater development section (P	a well log report.	RECEIVED		
Proposed use of water. If supplement		DEC 28 2009		
SALEM OF 1007: Enclosed Supplemental Form for each proposed use.				
Form I (Irrigation) O Form M (Municipal or Quasi-Municipal)				
O Form R (Mining)	O Form Q (Commercial	or Industrial)		
O Spring Description Sheet				
Amount of water from each source in	n gallons per minute (GPM)	, cubic feet per seco	nd (CFS), or acre feet (AF)	
Period of use				
Water management section (Please e	estimate if the water system	has not been designed	ed).	
Resource Protection Section (Page 6	, Section 5).			

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

Ŕ	For Standard reservoir applications proposing to store 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. In addition, the map must be prepared by a CWRE.						
Þ	All applicants or the applicant's authorized agent (include title or authority if for an organization or corporation), must sign the application in ink. Signature must be an original "wet" signature. Copies cannot be accepted.						
Þ	You must include a Legal description of all the properties involved where water is diverted, crossed, and used. The Legal description 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.						
R	A completed Land-Use Form or receipt signed and dated by the appropriate planning department officials. Please be certain that the Land-Use form lists all lands involved and all uses proposed. Date of signature must be within the past 12 months. Signature must be an original "wet" signature. Copies cannot be accepted.						
þ	The map must meet all the minimum requirements of OAR 690-310-0050.						
	Township, Range, Section Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU) 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 Reference corner on map North Directional Symbol Number of acres per 1/4, 1/4, if for irrigation, nursery, or agriculture Each point of diversion coordinate O Other O Other						
5	Fees: Amount of water requested $\frac{2000}{4}$ $\frac{250}{4}$ $\frac{250}{$						
iro	Reviewed by: Date: 12-28-2019 Reviewed by: Date: 12-28-2019 Reviewed by: Date: 12-28-2019 Reviewed by: Date: 12-28-2019 Reviewed by: 3-6-2009 jks						