

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87576 County GRANT Priority Date FEB 3 2010

Township 13 S Range 33 E Section 7

Amount (AF) 3 Use MULTI-P Watermaster DIST #4

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: 3 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.* Land-use
- 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 **
- 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

#375
EXAMT

ONE CHECK
2 APPS

plus\$ 75

Permit Recording Fee \$ PARTIAL #165

#165

SPLIT CHECK
Total Paid \$ 540

Total Fees \$ 540

540

Completeness Check by: ATM

Date: FEB 3 2010

WATER RESOURCES DEPARTMENT

RECEIPT # 99128

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

INVOICE # _____

RECEIVED FROM: <u>Kelly D. Voigt</u>	APPLICATION <u>See Below</u>
BY: <u>Barbara Jean Voigt</u>	PERMIT _____
	TRANSFER _____

CASH: CHECK:# 1149 OTHER: (IDENTIFY)

TOTAL REC'D \$ 1650.00

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 R-87576 \$375 \$165</u>		\$ _____
0410 RESEARCH FEES	<u>exam RF</u>		\$ _____
0408 MISC REVENUE: (IDENTIFY)	<u>S-87577 \$950 \$160</u>		\$ _____
TC162 DEPOSIT LIAB. (IDENTIFY)	<u>exam RF</u>		\$ _____
0240 EXTENSION OF TIME			\$ _____

WATER RIGHTS:

0201 SURFACE WATER	EXAM FEE	0202	RECORD FEE
0203 GROUND WATER	\$ <u>1325.00</u>	0204	\$ <u>325.00</u>
0205 TRANSFER	\$ _____		\$ _____

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR	EXAM FEE	0219	LICENSE FEE
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: **99128** DATED: 2-3-10 BY: 28