Standard Application Completeness Checklist

Minimum Requirements (OAR 690-310-0040)(ORS 537.400)

This is the checklist used by WRDstaff

Application G 17307 County LAKE Priority Date For 8 2010
Township 398 Range 19 Section Conte
Amount Graf Use (RAIG ACRES Watermaster Dist. # 12
Caseworker Assigned Brook Geffen □ Jeana Eastman □ Joel Plahn □ Kerry Kavanagh □ Michele McAleer
Applicant/Organization Name, Mailing Address, and Telephone Number.
Source of water. If stored water, is the stored water component filed out, including a non-expired agreement for stored water must be included. (ORS 537.400) NOTE: A surface water application cannot be filed at the same time as a Reservoir or Alt Reservoir if it will be for the use of the stored water uder the PROPOSED Reservoir application (E2).
The proposed source is of is not (circle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.
Property ownership indicated.
O If applicant does not own all the land, the affected landowners name and mailing address must be listed.
O If applieunt does not own all the land, asigned statement declaring the existence of either written authorization or an easement permitting access to land crossed by the proposed ditch canal or other work must be submitted.
Groundwater development section (Page 3 and 4, Section B) or a well log report.
Proposed use of water. If supplemental, list primaryacreage.
Enclosed Supplemental Form for each proposed use.
Form I (Irrigation) O Form M (Municipal or Quasi-Municipal) 9.57
Form R (Mining) 31.5A O Form Q (Commercial or Industrial) 31.41
O Spring Description Sheet
Amount of water from each source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF)
Period of use
Water management section (Please estimate if the water system has not been designed
Resource Protection Section (Page 6 Section 5).
Project schedule (If system is already completed, indicate "existing").

J		lana and impoundment are required In addition, the map must be						
1	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	The Legal description includes a metes and bodeed, land sales contract or title insurance polareport prepared by a title company. The Depar	•						
<b>*</b>	Please be certain that the Land-Use form lists be within the past 12 months. Signature must be	and dated by the appropriate planning department officials.  all lands involved and all uses proposed Date of signature must be an original "wet" signature. Copies cannot be accepted.						
ar	The map must meet all the minimum requirem	ents of OAR 690310-0050.						
	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 survey corner. Multiple wells shall be unique existing.  Reference corner on map North Directional Symbol Number of acres per 1/4, 1/4, if for irrigat Other	(example: 1" = 100 ft, 1" = 200 ft, etc.) damby reference to a recognized public land ely labeled, and identified on well logs if						
)	Fees: Amount of water requested GCM/							
	Base Fee \$ 1 Cl Ca	Additional Use @						
	1st CFS/AF 25a	Total Exam Fees \$ 1250						
	Addtn'l CFS/ AF @= Addtn' POD @=	Amount Due \$ 12 5 7  Amount Returned \$						
/	Reviewed by: YTM	Date: 1273 08 2010						

## STATE OF OREGON

## WATER RESOURCES DEPARTMENT

RECEIPT#	99155	r St. N.E. Ste. A R 97301-4172 (503) 986-0904 (fax	INVOICE #		
RECEIVED FR	om: Ander	_ APPLICATION	6-17304		
BY:	Surve	VING, Ji	nc.	PERMIT	0 7 7 5 7
0.4011	OLIDOK #			TRANSFER	
CASH: (	CHBCK:# 17726391	OTHER: (IDENTIFY)		TOTAL REC'D	\$1,750.0
<u> </u>	The state of the s	<u> </u>			
_1083	TREASURY	4170 WRD	MISC CASH A	CCT	
0407	COPIES				\$
	_ OTHER:	(IDENTIFY)			\$
0243 I/S L	_ease 024	4 Muni Water Mgmt. I	Plan 024	45 Cons. Water	_
		4270 WRD	OPERATING A	ACCT	
	MISCELLANEOU	s 461	1/		
0407	COPY & TAPE FE	ES IWI	17		\$
0410	RESEARCH FEE	S			\$
0408	MISC REVENUE:	(IDENTIFY)			\$
TC162	DEPOSIT LIAB. (	(IDENTIFY)			\$
0240	EXTENSION OF	TIME			\$
	WATER RIGHTS:		EXAM FEE		RECORD FEE
0201	SURFACE WATE	R	\$	0202	\$
0203	GROUND WATER	3	\$17500	2 0204	\$
0205	TRANSFER		\$		
	WELL CONSTRU	ICTION	EXAM FEE		LICENSE FEE
0218	WELL DRILL COM	STRUCTOR	\$	0219	\$
	LANDOWNER'S I	PERMIT		0220	\$
	OTHER	(IDENTIFY)			
0536	TREASURY	0427 WELL	CONST. STA	DT CCC	
0211	WELL CONST ST		\$	CARD#	
0210	MONITORING WI	ELLS	\$	CARD#	
	OTHER	(IDENTIFY)			
0607	TREASURY	0467 HYDR	O ACTIVITY	LIC NUMBER	
0233	POWER LICENSE	FEE (FW/WRD)			\$
0231	HYDRO LICENSE	FEE (FW/WRD)			\$
	_ HYDRO APPLICA				\$
	TREASURY	OTHE	R / RDX		· ·
FUND		_ TITLE			
OBJ. COD	DE	_ VENDOR #			
DESCRIP	TION				\$

RECEIPT: 99155

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