Standard Application Completeness Checklist
Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRDstaff
SILTCOOS LAICE
Application 87581 County LANE Priority Date 2-16-2010
Township 19 5 Range 12 W Section 26 \$ 35
Amount Cl. 10 Ci FUse Grove Dom Watermaster Dist. # 2
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 nder the PROPOSED Reservoir application (E2).
The proposed source is or is not (ercle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.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. 5724725 (25)
If applicant does not own all the land, the affected landowners name and mailing address must be listed.
If applicant 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.
O 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.
O Form I (Irrigation) O Form M (Municipal or Quasi-Municipal)
O Form (Mining) O Form Q Commercial or Industrial)
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")

0		store more than 9.2 acre feet, and adam height of more than 10 m and impoundment are required In addition, the map must be
b	must sign the application in ink. Signature must	t (include title or authority if for an organization or corporation, the an original "wet" signature. Copies cannot be accepted.
× ×	The Legal description includes a metes and bounded, land sales contract or title insurance polic report prepared by a title company. The Department of the Land-Use Form or receipt signed a Please be certain that the Land-Use form lists a	nd dated by the appropriate planning department officials. Ill lands involved and all uses proposed Date of signature must an original "wet" signature. Copies cannot be accepted.
	The map must meet all the minimum requirement. Township, Range, Section Location of main canals, ditches pipelines Place of use, 1/4, 1/4's and tax lot clearly in Even map scale not less than 4" = 1 mile (e Location of each diversion point, well or discrete corner. Multiple wells shall be uniquely existing. Reference corner on map North Directional Symbol	or flumes (if POA/POD is outside of POU) lentified example: 1" = 100 ft, 1" = 200 ft, etc.) amby reference to arecognized public land
_	Number of acres per 1/4, 1/4, iffor irrigation	on, nursery, or agriculture
	O Other PSSIS	
	DAVE	WILL MAN S
8	Fees: Amount of water requested 4.14	
	Base Fee \$ 700	Additional Use @
	1st CFS/AF Z 50	Total Exam Fees \$ 9 s
٠ ـ	Addtn'l CFS/AF@	Total Paid \$ 13 5 0 Amount Due \$ Acc Feet (And) Amount Returned \$
,	Reviewed by:	Date: 2-17-2010

STATE OF OREGON

WATER RESOURCES DEPARTMENT 725 Summer St. N.E. Ste. A SALEM, OR 97301-4172 INVOICE

99202

		(503) 986-0900 /	/ (503) 986-0904 (fax)		
EIVED FRO	M: Oreco	on Tra	il	APPLICATION	8758
	Cour	rie		PERMIT	
N	UEOK#	OTHER (IDENTIFY	A	TRANSFER	
SH: CI T	1 <u>X</u> 33962+	OTHER: (IDENTIFY	΄) Γ	TOTAL REC'D	\$1.250
	V021091	Ш		TOTAL REC D	\$1,350.0
1083	TREASURY	4170 WRD	MISC CASH AC	CCT	
0407	COPIES				\$
	OTHER: (IDENTIFY)			\$
0243 I/S Le	ease 0244	L Muni Water Momt.	Plan 0245	Cons. Water	
0240 1/0 20	024		OPERATING A		
	MISCELLANEOUS				
0407	COPY & TAPE FE	461	1		\$
0410	RESEARCH FEES	;			\$
0408	MISC REVENUE:	(IDENTIFY)			\$
TC162	DEPOSIT LIAB. (I	DENTIFY)			\$
0240	EXTENSION OF T	IME			\$
	WATER RIGHTS:		EXAM FEE	٦	RECORD F
0201	SURFACE WATER	}	\$ 950,00	0202	\$ 4009
0203	GROUND WATER		\$	0204	\$
0205	TRANSFER		\$	-	
	WELL CONSTRUC	CTION	EXAM FEE	-	LICENSE F
0218	WELL DRILL CON		\$	0219	\$
	LANDOWNER'S P			0220	\$
	OTHER	(IDENTIFY)			
0536	TREASURY	0437 WEL	L CONST. STAR	TFEE	
0211	WELL CONST STA	ART FEE	\$	CARD	#
0210	MONITORING WE	LLS	\$	CARD	#
	OTHER	(IDENTIFY)			
0607	TREASURY	0467 HYD	RO ACTIVITY	LIC NUMBER	
0233	POWER LICENSE				\$
0231	HYDRO LICENSE	FEE (FW/WRD)			\$
	HYDRO APPLICA	ΓΙΟΝ			\$
	TREASURY		ER / RDX		
ELIND.		13.0			
OBJ. CODI	E	_ VENDOR #			¢
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