

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87599 County Douglas Priority Date 5-5-2010

Township 23 S Range 5 W Section ONE

Amount (AF) 4 Use MULTI-P Watermaster DIST # 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: 4 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 ^(LAND-USE O.R.) * 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') **
- ☐ 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

plus\$ 100

Permit Recording Fee \$ 400

Total Paid \$ 800

Total Fees \$ 800

Completeness Check by: HJM

Date: 5-5-2010

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 99885

725 Summer St. N.E. Ste. A

SALEM, OR 97301-4172

(503) 986-0900 / (503) 986-0904 (fax)

INVOICE # _____

RECEIVED FROM:

Hill Racing, Inc.

BY: _____

APPLICATION

R-87599

PERMIT

TRANSFER

CASH:

CHECK: #

OTHER: (IDENTIFY)



1059



TOTAL REC'D

\$ 800.00

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

46111

0407 COPY & TAPE FEES

\$

0410 RESEARCH FEES

\$

0408 MISC REVENUE: (IDENTIFY)

\$

TC162 DEPOSIT LIAB. (IDENTIFY)

\$

0240 EXTENSION OF TIME

\$

WATER RIGHTS:

0201 SURFACE WATER

EXAM FEE

\$ 400.00

0202

0203 GROUND WATER

\$

0204

0205 TRANSFER

\$

RECORD FEE

\$ 400.00

\$

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR

EXAM FEE

\$

0219

LANDOWNER'S PERMIT

0220

LICENSE FEE

\$

\$

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: 99885

DATED: 5-5-10 BY: OR

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