

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

TERRY CHRISTMAN

Application R-87624 County Baker Priority Date MAY 17, 2010

Township 8S Range 46E Section 3

Amount (AF) 9.0 AF Use MP Watermaster 8

☐ 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. spring **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 9.0 Feet

☒ Total Quantity * of Storage Requested: 9.0 AF

☒ Proposed Use of the water...Cannot accept application for use of this stored water at the same time (E2) Multipurpose

☒ 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.* LAND-USE GOOD JR

☒ 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. pg 2 submitted - NEED pg 1 of Land Use Form

☐ 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')

** 1" = 400'

☒ Reference corner on map

☒ North Directional Symbol **

☒ 1/4 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\$ 25 x 9 = 225

Permit Recording Fee \$ 0 pd

Total Paid \$ 525

Total Fees \$ 525 Exam Recording Due

Completeness Check by: KLK

Date: 5-17-10

RECEIVED

MAY 17 2010

Alternate Reservoir Application Completeness Checklist

WATER RESOURCES DEPT
SALEM, OREGON

This is the checklist used by WRD staff

Application _____ County _____
Priority Date _____ Township _____ Range _____ Section _____ Taxlot _____
Use _____ Caseworker _____
Amount (AF) _____ Watermaster _____

*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: _____
- ☐ **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 landowners 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.*
- ☐ **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 **
 - ☐ 1/4,1/4'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\$ 300.00

plus\$ 205.00

plus\$ _____

Total Paid \$ _____

Total Fees \$ 500.00

Completeness Check by: _____

Date: MAY 11, 2010

Groups/wr/Customer Service Group/Alt-Review-checklist.doc

11-26-2007 jks

R-07624



Oregon

Theodore R. Kulongoski, Governor

Water Resources Department

North Mall Office Building
725 Summer Street NE, Suite A
Salem, OR 97301-1266
503-986-0900
FAX 503-986-0904

NOTE TO APPLICANTS

In order for your application to be processed by the Water Resources Department (WRD), this Land Use Information Form must be completed by a local government planning official in the jurisdictions where your water right will be used and developed. The planning official may choose to complete the form while you wait, or return the receipt stub to you. Applications received by WRD without the Land Use Form or the receipt stub will be returned to you.

NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for a water right. The Water Resources Department (WRD) requires its applicants to obtain land-use information to be sure the water rights do not result in land uses that are incompatible with your comprehensive plan. Please complete the form or detach the receipt stub and return it to the applicant for inclusion in their water right application. You will receive notice once the applicant formally submits his or her request to the WRD. The notice will give more information about WRD's water rights process and provide additional comment opportunities. You will have 30 days from the date of the notice to complete the land-use form and return it to the WRD. If no land-use information is received from you within that 30-day period, the WRD may presume the land use associated with the proposed water right is compatible with your comprehensive plan. Your attention to this request for information is greatly appreciated by the Water Resources Department. If you have any questions concerning this form, please contact the WRD's Customer Service Group at 503-986-0801.

WATER RESOURCES DEPT
SALEM, OREGON

MAY 17 2010

RECEIVED

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **99991** 725 Summer St. N.E. Ste. A INVOICE # _____
SALEM, OR 97301-4172
(503) 986-0900 / (503) 986-0904 (fax)

RECEIVED FROM: <u>Terry A. Christman</u>	APPLICATION <u>R-87624</u>	
BY: _____	PERMIT _____	
	TRANSFER _____	
CASH: ☐ CHECK: # <u>1236</u> OTHER: (IDENTIFY) ☐	TOTAL REC'D \$ <u>525.00</u>	

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 <u>46111</u>		
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 \$ <u>525.00</u>
0203	GROUND WATER	0202 \$ _____
0205	TRANSFER	0204 \$ _____
WELL CONSTRUCTION		
0218	WELL DRILL CONSTRUCTOR	EXAM FEE \$ _____
	LANDOWNER'S PERMIT	0219 \$ _____
	OTHER (IDENTIFY) _____	0220 \$ _____
RECORD FEE		
LICENSE FEE		

0536 TREASURY 0437 WELL CONST. START FEE

0211	WELL CONST START FEE	\$ _____
0210	MONITORING WELLS	\$ _____
CARD # _____		
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: **99991** DATED: 5-17-10 BY: 2R

Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal