Standard Application Completeness Checklist
Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff
Application G 17405 County \N/ASCO Priority Date 7-14-2010
Township 21 Range 12 Section 36
Township 2 1 Range 12 Section 36 42 (0.094 PRIM / 10 Amount Gra CFs Use IRRIG Aeres Watermaster Dist. # 3
Casevyorleer Appi mod
Caseworker Assigned Caseworker Assigned Caseworker Assigned 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 under
the PROPOSED Reservoir application (E2).
The proposed source is or is not (circle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a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. 577785
——————————————————————————————————————
- O If applicant does not own all the land, a signed 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 primary acreage.
Enclosed Supplemental Form for each proposed use.
Form I (Irrigation) O Form M (Municipal or Quasi-Municipal)
O Form R (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").

\bigcirc	For Standard reservoir applications proposing to store more than 92 acre feet, and a dark height of more than 1
	feet, preliminary plans and specifications for dam and impoundment are required. In addition, the map must be
	prepared by a CWRE.
٦	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.
	You must include a Legal description of all the properties involved where water is diverted, crossed, and used.
	The Legal description includes a metes and bounds, or other government survey description. A copy of the
	deed, land sales contract or title insurance policy can provide this information, or you may submit a lot book
-	report prepared by a title company. The Department will not accept a copy of the tax bill.
1	REVIEWED K.K. 7/40-2010 ANNESS LETT MESSAGE TO MITTER
5	A completed Land-Use Form of feeeipt signed and dated by the appropriate planning department officials.
	Please be certain that the Land-Use form lists all lands involved and all uses proposed. Date of signature must
,	be within the past 12 months. Signature must be an original "wet" signature. Copies cannot be accepted.
i.	The map must meet all the minimum requirements of OAR 690-310-0050.
7	The map mast meet an the minimum requirements of OAR 050-510-0050.
1	① Township, Range, Section
	Q Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU)
	O Place of use, 1/4, 1/4's and tax lot clearly identified
	Deven map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.)
	O Location of each diversion point, well or dam by reference to a recognized public land survey corner
	Reference corner on map
	North Directional Symbol
	Number of acres per 1/4, 1/4, if for irrigation, nursery, or agriculture
	Each point of diversion coordinate
	O Other \(\sum_{\text{\sigma}} \sigma_{\text{\sigma}} \(\sigma_{\text{\sigma}} \)
	42/0.094
1	Sees: Amount of water requested Graf CFS
	Base Fee \$ 1 a a cı Additional Use @
	1st CFS/AF 250 Total Exam Fees \$1250
	Addtn1 CFS/AF @ Total Paid \$ 1252
_	Addin POD @ - Amount Due \$ Rec (Due)
•	
	Reviewed by: 4700 Date: 7-14-2010

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 100570

725 Summer St. N.E. Ste. A SALEM, OR 97301-4172

INVOICE	#	

			900 / (503) 986-0904 (fa:	~,	
ECEIVED FROM: MJ: Arlenet Oconnor			() Connor	APPLICATION	G1740
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0203	GROUND WATER	3	\$12500	0204	\$
0205	TRANSFER		\$		
	WELL CONSTRU	ICTION	EXAM FEE		LICENSE FE
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