Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

| Application R 37603 County Marion Priority Date Aug 10 2010 |
|---|
| Township 85 Range 315 Section 33 |
| Amount (AF) 3.D Use multi-purpose Watermaster 16-Mike mcCord |
| Denographen Jeana Eastman 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 Proposed Use of the waterCannot 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 * 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 ** 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.** |
| Permit Recording Fee \$ 400 |
| Total Paid \$ 775 Total Fees \$ 775 |
| Completeness Check by: HM/ Date: Auc 10 2010 |

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 100780

725 Summer St. N.E. Ste. A SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-0904 (fax)

INVOICE # ___

| PERMIT TRANSFER | 3-4/-7 |
|---|---------|
| WALLEY I | 37603 |
| ITANSFER | |
| CASH: CHECK:# OTHER: (IDENTIFY) | |
| TOTAL REC'D \$ 7 | 7500 |
| 1083 TREASURY 4170 WRD MISC CASH ACCT | · |
| 0407 COPIES RECEIVED \$ | |
| OTHER: (IDENTIFY) | |
| OVER THE COUNTER 0243 I/S Lease 0244 Muni Water Mgmt, Plan 0245 Cons. Water | |
| 4270 WRD OPERATING ACCT | |
| MISCELLANEOUS | |
| 0407 COPY & TAPE FEES \$ | |
| 0410 RESEARCH FEES \$ | |
| 0408 MISC REVENUE: (IDENTIFY) \$ | |
| TC162 DEPOSIT LIAB. (IDENTIFY)\$ | |
| 0240 EXTENSION OF TIME \$ | |
| | ORD FEE |
| 0201 SURFACE WATER ALTRES \$ 37590 0202 \$ 40 | 0000 |
| 0203 GROUND WATER \$ 0204 | |
| 0205 TRANSFER \$ | |
| WELL CONSTRUCTION EXAM FEE LICE | NSE FEE |
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