

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R-87649 County Linn Priority Date 8-26-2010

Township 12S Range 2W Section 34

Amount (AF) .11 AF Use STORE RUN-OFF Watermaster 2

☐ 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: .11 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 * 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\$ 25

Permit Recording Fee \$ 400

Total Paid \$ 725⁰⁰

Total Fees \$ 725⁰⁰

Completeness Check by: KJ

Date: 8-26-2010

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **100956**

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

INVOICE # _____

RECEIVED FROM: Kimberly A + Louis
BY: F. Snook

APPLICATION	R-87649
PERMIT	
TRANSFER	

CASH: ☐ CHECK: # 1144 OTHER: (IDENTIFY) ☐

TOTAL REC'D \$ 725⁰⁰

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

0407 COPY & TAPE FEES 46111 \$ _____
0410 RESEARCH FEES \$ _____
0408 MISC REVENUE: (IDENTIFY) \$ _____
TC162 DEPOSIT LIAB. (IDENTIFY) \$ _____
0240 EXTENSION OF TIME \$ _____

WATER RIGHTS:

	EXAM FEE		RECORD FEE
0201 SURFACE WATER	\$ <u>325⁰⁰</u>	0202	\$ <u>400⁰⁰</u>
0203 GROUND WATER	\$ _____	0204	\$ _____
0205 TRANSFER	\$ _____		

WELL CONSTRUCTION

	EXAM FEE		LICENSE FEE
0218 WELL DRILL CONSTRUCTOR	\$ _____	0219	\$ _____
LANDOWNER'S PERMIT		0220	\$ _____

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: **100956**

DATED: 8-26-10 BY: [Signature]

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