

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87651 County CLACK Priority Date 8-30-2010

Township 2S Range 4E Section 15

Amount (AF) ONE Use MULTI-P Watermaster DIST # 20

☐ 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 EXCAVATION
- ☒ Total Quantity * of Storage Requested: ONE
- ☒ 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.* LAND-USE GOOD JS
- ☒ 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 \$ 725

Total Fees \$ 725

Completeness Check by: HTM

Date: 8-30-2010

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **100978**

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

INVOICE # _____

RECEIVED FROM: <u>Willie + Kurt L. Williams</u>	APPLICATION <u>R87651</u>	
BY: _____	PERMIT _____	
	TRANSFER _____	
CASH: ☐ CHECK: # <u>8268</u> OTHER: (IDENTIFY) _____	TOTAL REC'D \$ <u>725.00</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: <u>Alt Res</u>		
0201	SURFACE WATER	EXAM FEE \$ <u>32500</u>
0203	GROUND WATER	\$ _____
0205	TRANSFER	\$ _____
WELL CONSTRUCTION		
0218	WELL DRILL CONSTRUCTOR	EXAM FEE \$ _____
	LANDOWNER'S PERMIT	\$ _____
	OTHER (IDENTIFY) _____	
		RECORD FEE \$ <u>400.00</u>
		\$ _____
		LICENSE FEE \$ _____
		\$ _____

0536 TREASURY 0437 WELL CONST. START FEE

0211	WELL CONST START FEE	\$ _____
0210	MONITORING WELLS	\$ _____
	OTHER (IDENTIFY) _____	
		CARD # _____
		CARD # _____

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: **100978**

DATED: 8-30-10 BY: 28

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