

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87669 County JOSE Priority Date Dec 06 2010

Township 35 S Range 7 W Section 14

Amount (AF) 4.90 Use MULTI-PUR Watermaster DIST # 14

~~Black~~ Jeana Eastman ~~Joel~~ 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 13 FEET
- Total Quantity * of Storage Requested: 4.9
- 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 * RECEIPT ONLY 5 KP 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 \$ 125

Permit Recording Fee \$ 400

Total Paid \$ 825

Total Fees \$ 825

Completeness Check by: AKM

Date: Dec 6, 2010

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

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

RECEIPT # **101779**

INVOICE # _____

RECEIVED FROM: <u>Patricia D. Williams</u>	APPLICATION <u>R 87069</u>
BY: <u>Rickey</u>	PERMIT _____
CASH: <input type="checkbox"/>	TRANSFER _____
CHECK:# <u>103</u>	TOTAL REC'D \$ <u>825.00</u>
OTHER: (IDENTIFY) <input type="checkbox"/>	

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	<u>4/6/11 / 4/6/11</u>	\$
0410 RESEARCH FEES		\$
0408 MISC REVENUE: (IDENTIFY)		\$
TC-162 DEPOSIT LIAB. (IDENTIFY)		\$
0240 EXTENSION OF TIME		\$

WATER RIGHTS:

0201 SURFACE WATER	<u>ALT RES</u>	EXAM FEE	0202	RECORD FEE
0203 GROUND WATER		\$ <u>425.00</u>	0204	\$ <u>400.00</u>
0205 TRANSFER		\$		\$

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR	EXAM FEE	0219	LICENSE FEE
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: **101779**

DATED: 6-26-10 BY: LAG

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