## Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff 5 MANDAGED Priority Date 1-21-2011 Application R 87683 County YAMHILL Township Amount 35.34 AF Use SEVERAR LISTED WM Dist # 16 Jeana Eastman O Kerry Kavanagh Caseworker Assigned O Michele McAleer Applicant/Organization Name, Mailing Address, and Telephone Number. O 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use of the stored water under the PROPOSED Reservoir application (E2): The proposed source is of is not scircle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued. STATES ES Property ownership indicated. If applicant does not own all the land, the affected landowner's name and mailing address must be listed. 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. ell-Development (Section 3) or a well log rep roposed use of water. If supplemental, list primary acreage losed Supplemental Form for each proposed in O Form M (Municipal or Quasi-Municipal) O Form I (Irrigation) 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

Project schedule (If system is already completed, indicate "existing"

O Preliminary plans and specifications including dam height, width, crest width and surface area for each rest for all standard reservoir applications  LARGE STRUCTURE ONCE	
O A map prepared by a CWRE for a standard reservoir application proposing to store more than 9.2 acre feet having a dam height of more than 10 feet  ARGE FRUCTURE ONE	and
All applicants or the applicant's authorized agent (include title or authority if for an organization or corporal must sign the application in ink. Signature must be an original "wet" signature. Copies cannot be accepted	-
O You must include a Legal description of all the properties involved where water is diverted, crossed, and use 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.  A completed Land-Use Form or receipt signed and dated by the appropriate planning department officials.	k
Please be certain that the Land-Use form lists all lands involved and all uses proposed. Date of signature to be within the past 12 months. Signature must be an original "wet" signature. Copies cannot be accepted.	must
The map must meet all the minimum requirements of OAR 690-310-0050.	
Township, Range, Section  Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU)  Place of use, 1/4, 1/4's and tax lot clearly identified  Even map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.)  Location of each diversion point, well or dam by reference to a recognized public land	
survey corner. Multiple wells shall be uniquely labeled, and identified on well logs if	
existing.  Reference corner on map  North Directional Symbol	
Other	
Cost of exchange	ENENI
Fees: Amount of water requested 35.34 Aere Feet [36]	
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Addtn' POD/POA @ = Amount Due \$ New Fee	216
Amount Returned \$	
Reviewed by: ATM Date: JAN 2011	
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STATE OF OREGON

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WATER	RESOURCES DEPARTMEN	٦

RECEIPT # 102074

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

INVOICE # \_\_\_

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