

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87682 County JACKSON Priority Date 1-18-2011

Township 37 S Range 2 E Section 15

Amount (AF) 3 Use _____ Watermaster Dist # 13

☒ Brook Geffen ☐ Jeana Eastman ☒ Joel Plann ☒ 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 3
- ☒ Total Quantity * of Storage Requested: 3 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') ** 1 INCH @ 952 FEET
 - ☐ 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\$ 75

Permit Recording Fee \$ NOT PAID

Total Paid \$ 375

Total Fees \$ EXAM 375

Completeness Check by: 2/1/11

Date: 1-19-2011

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **102036**

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

INVOICE # _____

RECEIVED FROM: <u>Mark Mayhew</u>		APPLICATION <u>R-87682</u>
BY: _____		PERMIT _____
CASH: ☐ CHECK: # <u>203012102200</u> OTHER: (IDENTIFY) _____		TRANSFER _____
		TOTAL REC'D \$ <u>375.00</u>

1083 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES	\$ _____
OTHER: (IDENTIFY) _____	\$ _____
0243 I/S Lease _____	
0244 Muni Water Mgmt. Plan _____	

**RECEIVED
OVER THE COUNTER**

4270 WRD OPERATING ACCT

MISCELLANEOUS		
0407 COPY & TAPE FEES	\$ _____	
0410 RESEARCH FEES	\$ _____	
0408 MISC REVENUE: (IDENTIFY) _____	\$ _____	
TC162 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>375.00</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: **102036** DATED: 11811 BY: [Signature]

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