Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff
Application <u>G 17482</u> County <u>Marcion</u> Priority Date <u>8-19-2011</u>
Township <u>45</u> Range <u>126</u> Section <u>8</u> <u>2007</u> <u>2007</u> <u>20</u> Amount <u>Grad CF5</u> Use <u>1220</u> <u>Ackef</u> WM Dist # <u>16</u>
Amount Grad CTS Use IRRIG Acker WM Dist # 16
Applicant Name Norm & MARIE ZELER
Receipt No. 103676 -
Caseworker Assigned O Jeana Eastman Kerry Kavanagh O Michele McAleer
Applicant/Organization Name, Mailing Address, and Telephone Number.
All applicants or the applicant's authorized agent (include title or authority if for an organization or corporation), must sign the application in ink. Signature must be an original "wet" signature. Copies cannot be accepted.
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, Expedited Secondary(E2).
M/O If for stored water not under contract, is the source valid / Permit or Certificate issued Y/N List Permit or Certificate number
The proposed source is or is not (circle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.
Property ownership indicated. 5777785 Tes
O If applicant does not own all the land, the affected landowner's name and mailing address must be listed.
O 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.
Well Development (pg. 4 & 5) or a well log report.
Proposed use of water. If supplemental, list primary acreage.
AUG 19 2011
O   Form M (Municipal or Quasi-Municipal)   WATER RESOURCES DEPT     O   Spring Description Sheet   SALEM, OREGON
Amount of water from each source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF)
Period of use

A	Water management section (Please estimate if	the water system has not been designed).	448.8 pm
Þ	Resource Protection Section		once cts
9	Project schedule (If system is already complete	ed, indicate "existing").	
MAP	Preliminary plans and specifications including for all standard reservoir applications	dam fieight, width, crest width and surface are	a for each reservoir
MA		servoir application proposing to store more than	
	deed, land sales contract or title insurance poli report prepared by a title company. <u>The Depar</u>		A copy of the bmit a lot book
¢ 	Please be certain that the Land-Use form lists	and dated by the appropriate planning department all lands involved and all uses proposed. Date be an original "wet" signature. Copies cannot	of signature must
	The map must meet all the minimum requireme DETIGNON O Township, Range, Section O Location of main canals, ditches, pipeline: O Place of use, 1/4, 1/4's and tax lot clearly O Even map scale not less than 4" = 1 mile ( O Location of <b>each</b> diversion point, well or of survey corner. Multiple wells shall be unique: existing. O Reference corner on map O North Directional Symbol O Number of acres per 1/4, 1/4, if for irrigat: O Other	identified (example: 1" = 100 ft, 1" = 200 ft, etc.) dam by reference to a recognized public land ly labeled, and identified on well logs if	ITACO DATES
w	Fees: Amount of water requested $\frac{2}{G-rm}$	CF5	AUG 19 2011
	Base Fee \$	Total Exam Fees \$ 12 5 21 W	ATER RESOURCES DEPT SALEM, OREGON
	1st CFS/AF 250	Permit Recording Fees \$	
	- <u>Addtn</u> l CFS/ AF @ = - <u>Addtn</u> l POD/POA @ = Addtnl Use @	Total Paid \$ 1250 Amount Due \$ Rec Fee Due Amount Returned \$	
_	Reviewed by: <u>HPM</u> <del>\$</del> KERRY K	Date : <u>E-22-2011</u>	

Groups\wr\Customer Service Group\templates\standard app checklist

.

12-22-2010 jks

ECEIPT #	10367	D SALEM,	ner St. N.E. Ste. A OR 97301-4172 ) / (503) 986-0904 (fa	INVOICE #	
ECEIVED FRO	M: NOrv	APPLICATION	61448		
BY: Zoller				PERMIT	
			->.	TRANSFER	
	CHECK:# OTHER: (IDENTIFY)			TOTAL REC'D	\$1250
1083	TREASURY	4170 WR	D MISC CASH	ACCT	
0407	COPIES				\$
	_ OTHER:		RECEIVED		\$
0243 1/5 1	ease C	- · · · · · ·	THE COUP	A Water	
0243 1/3 1					
1.12.2.9.2	- <u>K. 1. (%) % % % % % % % % % % % % % % % % % %</u>	4270			<u></u>
0407		4	6111		\$
0407	COPY & TAPE		2		\$
0410 0408	RESEARCH FE				\$
0408 TC162					\$
0240	DEPOSIT LIAB EXTENSION O				\$
0240			Contraction of the state of the	-	
	WATER RIGHT		EXAM FEE		RECORD FE
0201	SURFACE WAT		\$	0202	\$ \$
0203	GROUND WAT	ER	\$ 12.50	0204	φ
0205	TRANSFER		\$		
	WELL CONSTRUCTION EXAM FEI   WELL DRILL CONSTRUCTOR \$   LANDOWNER'S PERMIT			0219	LICENSE FEI
0218					\$ \$
				0220	Ψ
	OTHER	(IDENTIFY)			
0536	TREASURY	0497 WE	LL CONST. STA	DT ECE	
L CONTRACTOR					<u> </u>
0211	WELL CONST		\$	CARD #	
0210	MONITORING	WELLS	\$	CARD #	1
	OTHER	(IDENTIFY)			
0607	TREASURY	0467 HYD	DRO ACTIVITY	LIC NUMBER	
0233	POWER LICEN	ISE FEE (FW/WRD)			\$
0231	HYDRO LICEN	SE FEE (FW/WRD)	_		\$
	HYDRO APPLI	CATION			\$
	TREASURY	<u>ve sa porta</u>	IER / RDX		
FUND					
OBJ. COD	E	VENDOR #			
DESCRIPT					\$
					·