## STATE OF OREGON

## **WATER RESOURCES DEPARTMENT**

RECEIPT#	104640	SALEM, O	r St. N.E. Ste. A R 97301-4172 (503) 986-0904 (fax)		
RECEIVED FRO	om: Richa	cd W+K	athryn	APPLICATION	G17514
3Y:	TH	arrina	100	PERMIT	
		7		TRANSFER	
CASH: C	X 2217	OTHER: (IDENTIFY	) [	TOTAL REC'D	\$1500.0
1083	TREASURY	4170 WRD	MISC CASH A	CCT	
0407	COPIES				\$
		IDENTIFY)			\$
0243 I/S L	ease 0244	4 Muni Water Momt.	Plan 024	5 Cons. Water	
			OPERATING A		
	MISCELLANEOU:				
0407	COPY & TAPE FE	4/0	///		\$
0410	RESEARCH FEES	5			\$
0408	MISC REVENUE:	(IDENTIFY)			\$
TC162	DEPOSIT LIAB. (I	DENTIFY)			\$
0240	EXTENSION OF T	IME			\$
	WATER RIGHTS:		EXAM FEE	7	RECORD FEE
0201	SURFACE WATER	}	\$	0202	\$
0203	GROUND WATER		\$ 15000	1	\$
0205	TRANSFER		\$		_
	WELL CONSTRU	CTION	EXAM FEE		LICENSE FEE
0218	WELL DRILL CON		\$	0219	\$
	LANDOWNER'S F			0220	\$
	OTHER	(IDENTIFY)	<del></del>		
0536	TREASURY	0437 WELI	L CONST. STAF	RT FEE	<del></del>
0211	WELL CONST STA	ART FEF	\$	CARD	
0210	MONITORING WE		\$	CARD	<del></del>
	OTHER	(IDENTIFY)			·
0607	TREASURY	0467 HYDE	RO ACTIVITY	LIC NUMBER	
0233	POWER LICENSE				\$
0233	HYDRO LICENSE	,	į.		\$
0201	HYDRO APPLICA		L_		\$
	<del>-</del>	<u> </u>	D / DDV		
	TREASURY	UIRE	R / RDX	·	
	DE	VENDOR#			\$

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Standard Application Completeness Checklist

Minimum Requirements (OAR 690-310-0040)(ORS 537,400)

This is the checklist used by WRD staff

Application G 17514 County JACKSON Priority Date DEC. 9, 2011
Township 35 S Range 1 W Section 27 \$ 28
Amount 9pm/CFF Use IRRIG/ Aeres WM Dist # 13
Applicant Name RICHARD & KATHRYN HARRING-TOW
Receipt No 104640
Caseworker Assigned
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).
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. 5 74725 (65
☐ 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.
Well Development (pg. 4 & 5) or a well log report.
Proposed use of water. If supplemental, list primary acreage.
Supplemental data sheets enclosed if needed?  Form M (Municipal or Quasi-Municipal)  Spring Description Sheet
Amount of water from each source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF)

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").
Preliminary plans and specifications including dam height, width, crest width and surface area for each reservo for all standard reservoir applications
A map prepared by a CWRE for a standard reservoir application proposing to store more than 9.2 acre feet and having a dam height of more than 10 feet
You must include a Legal description of all the properties involved where water is diverted, crossed, and used. 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.
completed Land-Use Form or receipt signed and dated by the appropriate planning department officials. Please be certain that the Land-Use form lists all lands involved and all uses proposed. Date of signature must be within the past 12 months. Signature must be an original "wet" signature. Copies cannot be accepted.
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
Number of acres per 1/4, 1/4, if for irrigation, nursery, or agriculture  Other
Fees: Amount of water requested gpm CF5
Base Fee \$ 1000 Total Exam Fees \$ 1500
1st CF8/AF 250 Permit Recording Fees \$ Not PAID 400
Addtnl CFS/AF@ = Total Paid \$ 1500    Addtnl POD/POA@250 = 250   Amount Due \$ Rec Fee Due  Addtnl Use @ Amount Returned \$
Reviewed by: H M Date: 12-12-2011