

OVER/COUNTER

ACCEPTED

Standard Application Completeness Checklist

Minimum Requirements (OAR 690-310-0040) (ORS 537.400)

Application <u>G 16731</u>	Township <u>4 S</u>
Priority Date <u>9-29-2006</u>	Range <u>4 W</u>
Use(s) <u>IRRIG</u>	Section <u>3</u>
Rate <u>5.15 CFS</u>	3 POA Loc. <u>SEE MAP</u>
County <u>TAMHILL</u>	POU Loc. <u>SEE MAP</u>

- Applicant/Organization Name, Mailing Address and Telephone Number, application signed in ink.
- 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)
- 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 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.
- Groundwater development section (Page 2, Section 3 and/or Page 3, Section 2) or a well log report.
- Proposed use of water. If supplemental, list primary water right acreage if applicable.
- Enclosed Supplemental Form for each proposed use.
 - Form I (Irrigation) Form M (Municipal or Quasi-Municipal)
 - Form R (Mining) Form Q (Commercial or Industrial)
 - Spring Description Sheet
- Amount of water from each source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF) 1 cfs total from all 3 wells
- Period of use

- Water management section (Please estimate if the water system has not been designed).
- Resource Protection Section (Page 6, Section 5).
- Project schedule (If system is already completed, indicate "existing").
- For reservoir applications storing more than 9.2 acre feet, and a dam height of more than 10 feet, preliminary plans and specifications for dam and impoundment are required.

If the above is statement is checked, the map must be prepared by a CWRE.

All applicants (or the authorized agent with title or authority if for an organization or corporation), must sign the application in ink.

You must include a Legal description of the property involved that 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. *Date of signature must be within the past 6 months.*

The map must meet all the minimum requirements of OAR 690-310-0050.

CWRE NATHAN
MARRISS
WITH
MATT
DUNKER
GROUP

- | | |
|---|--|
| <input checked="" type="checkbox"/> Township, Range, Section | <input checked="" type="checkbox"/> Location of main canals, ditches, pipelines or flumes |
| <input checked="" type="checkbox"/> Place of use, 1/4, 1/4's and tax lot clearly identified | <input checked="" type="checkbox"/> Even map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.) |
| <input checked="" type="checkbox"/> Location of each diversion point well or dam by reference to a recognized public land survey corner | <input checked="" type="checkbox"/> North Directional Symbol |
| <input checked="" type="checkbox"/> Number of acres per 1/4, 1/4, if irrigation, nursery, or agriculture | <input type="checkbox"/> Other _____ |
| <input checked="" type="checkbox"/> Reference corner on map <i>ILC corner</i> | |
| <input checked="" type="checkbox"/> Each point of diversion coordinate | |

Fees: Amount of water requested 1 cfs

Base Fee \$ <u>200</u>	Total Exam Fee \$ <u>500</u>
1st CFS/AF <u>200</u>	Total Paid \$ <u>500</u>
<u>0</u> Addtn'l @ <u>0</u> = <u>0</u>	Amount Due \$ <u>0</u>
Reviewed by <u>[Signature]</u>	Date <u>9-29-2006</u>