STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 105841 725 Summer St. N.E. Ste. A SALEM, OR 97301-4172 INVOICE #

	(503) 986-0900 / (503	3) 986-0904 (fax)	~	
RECEIVED FROM	w: Copeland Sal	nol+	APPLICATION	R&Y&11
BY:	Graveo dy	ic	PERMIT	•
	STUED, (IDENTIFY)		TRANSFER	
CASH: CI	HECK:# OTHER: (IDENTIFY)		TOTAL REC'D	\$1200 <u>~</u>
1083	TREASURY 4170 WRD MI	SC CASH ACC	7	
0407	COPIES			\$
	OTHER: (IDENTIFY)	_		\$
0243 I/S Le	ase 0244 Muni Water Mgmt. Plar	n 0245 C	Cons. Water	_
77. 8	4270 WRD OF	PERATING AC	CT	
	MISCELLANEOUS 4611	1	Total Control Control	al attitute as trace trace to the contract of
a 0407	COPY & TAPE FEES	•		\$
0410	RESEARCH FEES			\$
0408	MISC REVENUE: (IDENTIFY)			\$
TC162	DEPOSIT LIAB. (IDENTIFY)			\$
0240	EXTENSION OF TIME			\$
	WATER RIGHTS:	EXAM FEE		RECORD FEE
0201	SURFACE WATER	\$800°	0202	\$ 4-1724
0203	GROUND WATER	\$	0204	\$
0205	TRANSFER	\$		
	WELL CONSTRUCTION	EXAM FEE		LICENSE FEE
0218	WELL DRILL CONSTRUCTOR	\$	0219	\$
	LANDOWNER'S PERMIT		0220	\$
	OTHER (IDENTIFY)	_		
0536	TREASURY 0437 WELL C	ONST. START	FEE	
0211	WELL CONST START FEE	\$	CARD#	
0210	MONITORING WELLS	\$	CARD#	
	OTHER (IDENTIFY)			
0607	TREASURY 0467 HYDRO	ACTIVITY	C NUMBER	
	POWER LICENSE FEE (FW/WRD)	ACTIVITY -	CHOWBER	\$
0233 0231	,			\$
0231	HYDRO LICENSE FEE (FW/WRD)			\$
	HYDRO APPLICATION			Ψ.
	TREASURY OTHER	/ RDX		
FUND	TITLE			
OBJ. CODE	VENDOR #			
DESCRIPT	ION			\$
RECEIPT: 10	DATED: 5-20 DATED:		Z File Buff Conv	- Fiscal

Alternate Reservoir Application Completeness Checklist
This is the checklist used by WRD staff
DHN HILLE WESCEY HILL
Application County Jackson
Priority Date 5-29-12 Township 385 Range 4W Section 7 Taxlot 30/
Use Mucifulpost Caseworker KERRY
Amount (AE) 20 () Watermenton (ACOU Man Town WM+13
Police Heron Russ
Minimum Requirements (ORS 537.409) Watermaster Dance Menon Rose Off-channel
Completed Watermaster review sheet signed and dated by Watermaster.
Will the reservoir injure an existing water right? YES NO
If YES, can conditions be applied to mitigate the injury? \(\times \text{YES} \text{NO} \) If NO, return the application
Did the watermaster determine when water is available for the proposed use? YES NO
The Watermaster review sheet must have been completed within the last 6 months.
If the watermaster determined that water is NOT available, return the application.
Completed ODFW review sheet signed and dated by ODFW representative.
Will the reservoir pose a significant detrimental impact to an existing fishery resource? YES NO
If YES, can conditions be applied to mitigate the impact? YES ONO If NO, return the application.
The ODFW review sheet must have been completed within the last 6 months. > if 2 comply fuctor
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.
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 "0"
□ Total Quantity of Storage Requested: 20.0 AF
Proposed Use of the waterCannot 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 located
or that are crossed by the diversion works. This includes any roads or rights-of-way.) Environmental Impact section completed?
Application signed by the landowner(s)? All parties noted as applicants must sign the application.
Must be an original "wet" signature.
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') **
Reference corner on map
North Directional Symbol ** 1/4/4'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**? Examination: Base Fee\$ 300 Permit Recording Fee\$ 400
Fees enclosed**? Examination: Base Fee\$ 300 Permit Recording Fee\$ 400 plus\$ 30 PF (292520 AF = 500
plus\$
Total Paid \$ \[\frac{1}{20} \]
Completeness Check by: The Asylva Ad Date: 9-30-17 Revised 2011-3-3