

# Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application S-87838 County Marion  
Priority Date 9-7-12 Township 8S Range 1W Section 36 Taxlot 900  
Use Storage for Multi-Purpose Caseworker JAWA EALMAN  
Amount (AF) 9.2 AF Watermaster #16

## Minimum Requirements (ORS 537.409)

- 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?  YES  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  NO **If NO, return the application.**

*The ODFW review sheet must have been completed within the last 6 months.*
- 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
- Total Quantity of Storage Requested:** 9 AC/ET
- 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 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'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.\*\*

Total Paid \$

Total Fees \$

Completeness Check by: [Signature]

Date: 9-7-12

Revised 2011-3-3

Examination: Base Fee \$ 300 Permit Recording Fee \$ 400  
plus \$ 225  
plus \$ \_\_\_\_\_

925.00

**STATE OF OREGON  
WATER RESOURCES DEPARTMENT**

RECEIPT # **106756**

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

INVOICE # \_\_\_\_\_

RECEIVED FROM: Silver Mountain Farms, LLC APPLICATION # 587838  
 BY: \_\_\_\_\_ PERMIT \_\_\_\_\_  
 TRANSFER \_\_\_\_\_

CASH:  CHECK: # 9255 OTHER: (IDENTIFY) \_\_\_\_\_  
 TOTAL REC'D \$ 925.00

**1083 TREASURY 4170 WRD MISC CASH ACCT**

0407 COPIES \$ \_\_\_\_\_  
 OTHER: (IDENTIFY) \$ \_\_\_\_\_  
 0243 I/S Lease \_\_\_\_\_ 0244 Muni Water Mgmt. Plan \_\_\_\_\_ 0245 Cons. Water \_\_\_\_\_

**4270 WRD OPERATING ACCT**

**MISCELLANEOUS** 46111

0407 COPY & TAPE FEES \$ \_\_\_\_\_  
 0410 RESEARCH FEES \$ \_\_\_\_\_  
 0408 MISC REVENUE: (IDENTIFY) \$ \_\_\_\_\_  
 TC162 DEPOSIT LIAB. (IDENTIFY) \$ \_\_\_\_\_  
 0240 EXTENSION OF TIME \$ \_\_\_\_\_

**WATER RIGHTS:**

0201 SURFACE WATER	EXAM FEE \$ <u>525.00</u>	0202	RECORD FEE \$ <u>4.00</u>
0203 GROUND WATER	\$ _____	0204	\$ _____
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 (FWWRD) \$ \_\_\_\_\_  
 0231 HYDRO LICENSE FEE (FWWRD) \$ \_\_\_\_\_  
 HYDRO APPLICATION \$ \_\_\_\_\_

**TREASURY OTHER / RDX**

FUND \_\_\_\_\_ TITLE \_\_\_\_\_ RECEIVED  
 OBJ. CODE \_\_\_\_\_ VENDOR # \_\_\_\_\_ OVER THE COUNTER  
 DESCRIPTION \_\_\_\_\_ \$ \_\_\_\_\_

RECEIPT: **106756** DATED: 9-7-12 BY: [Signature]  
 Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal