Limited License "Completeness" Checklist Minimum Requirements (OAR 690-340-030) (ORS 537.143)

[L-1445]									
Rece	ived Date:	Township: 4/ S							
Publi	c Notice Date: 1/29/2013	Range: 10 W							
Earlie	est Issue Date: 2//3/20/3	Section:							
Sour	CO: CAN NAMED CR-TRIB TO TRYLOR CR.	POD Loc: Se 14 SE 14							
Amou	unt: <u>10 GР</u> и								
Durat	tion: 3/31/2013 -7 11/1/2013	Watermaster: MITCH LEWIS #FA							
Coun	ity: <u>Curry</u>	ODFW:							
Basir	n:	DEQ:							
'									
0	Applicant/Organization Name, Mailing Addr	ess ,Telephone Number, and Contact Person.							
	Signature in ink. Original "wet" signature require								
8	Source listed?								
nda-	If source is groundwaterare well log(s) or	sufficient information for the Department to							
Ma		interval, etc. included ? Was the intended aquifer							
	identified?. If for multiple wells, each map loca	•							
	. , , ,	, ,							
0	Proposed Use of the wateris each propose	ed use identified?							
MA	If source is stored water Is there a contract	ct for delivery of stored water. Must have a copy							
Nd4	If use is supplementalis the primary water right listed?								
	Amount of water from each source listed in GPM, QFS or AF?								
Ø	Amount of water from each source listed in G	PM, CFS or AF?							
NOTIA	Acreage being proposed, if applicable.								
Ø	Duration of Limited License being requested	by applicant.							
~									
	Project schedule Date when water use will	start and date when water use will be completed							
9/	Is the application signed in ink by the applic	ant(s) or by the authorized agent with title or							
	authority if an organization or corporation? ೬೬೮೧೬೦								
D ROW	Water Master Report Is the local Water Mas	sters report on water availability included?							
the FE	ביים ביים ביים ביים ביים ביים ביים ביים	bleted by local planning officials included?							
14.	Signature must be within the last 12 months.								

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9			o meet requir	rements of OAF	₹ 690-34	0-030?	If map is larger than 11 x 17, four	
Township, Range, Section Reference corner on map Scale of the Map, not less than 2" = 1 mile Other topographical features such as roads, streams, railroads, etc, which may be helpful in locating the diversion points in the field. Fees enclosed? Base Fee Water Amount \$250.00 including the first point of diversion \$25.00 for each additional point of diversion							Location of each diversion point, well or dam Each POD coordinate by reference to a recognized public land survey corner +	
FEE PA			- <u>250</u>				·	
	eteness			oup\templates\li	imited-lic	cense-cl	Date: 1/25/2013 necklist 1/18/2011 JKS	

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 107869

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

INVOICE # _____

H: (CHECK:# OTHER: (IDENT	TFY)	TRANSFER	
1	× 7153		TOTAL REC'D	\$ 250,
1083	TREASURY 4170 W	rd Misc Cash A	CCT	-
0407	COPIES			\$
	OTHER: (IDENTIFY)			Ŀ
0243 I/S L	_ease 0244 Muni Water Mg	mt. Plan 024 RD OPERATING A		
	MISCELL ANEOUS ,		<u>UU1</u>	
0407	COPY & TAPE FEES 46	111		\$
0410	RESEARCH FEES	•		\$
0408	MISC REVENUE: (IDENTIFY)	Limited	License	\$ 250.
TC162	DEPOSIT LIAB. (IDENTIFY)			\$
0240	EXTENSION OF TIME			\$
	WATER RIGHTS:	EXAM FEE	٦	RECORD F
0201	SURFACE WATER	\$	0202	\$
0203	GROUND WATER	\$	0204	\$
0205	TRANSFER	\$	-	
	WELL CONSTRUCTION	EXAM FEE	7	LICENSE F
0218	WELL DRILL CONSTRUCTOR	\$	0219	\$
	LANDOWNER'S PERMIT	bases and a second and a second	0220	\$
	OTHER (IDENTIFY)			
0536	TREASURY 0437 WI	ELL CONST. STAF	T FEE	
0211	WELL CONST START FEE	\$	CARD	1
0210	MONITORING WELLS	\$	CARD I	
	OTHER (IDENTIFY)			
0000	TREASURY 0467 HY		LIC MUNICED	
Inches and the same of the sam			LIC NUMBER	\\$
0233	POWER LICENSE FEE (FW/WRD			\$
0231	HYDRO LICENSE FEE (FW/WRD))		\$
	_ HYDRO APPLICATION			Ψ
	TREASURY OT	HER/RDX		
FUND	TITLE			
OBJ. COL	DE VENDOR # _			
DESCRIP	PTION			\$

REC