Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff

Application G-17624 County Clackamas Priority Date 1-24-13
Township 5-5 Range 1-E Section 1(\$14
Amount 300 apm Use Industrial & Ag. WM Dist #
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Applicant Name Willamette Egg Farms; Altn: Gordon Satrum
Receipt No 10 7 8 5 .3
Caseworker Assigned Jeana Eastman Kerry Kavanagh
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).
A—Hffor stored water not under contract, is the source valid / Permit or Certificate issued Y/N List Permit or Certificate number
The proposed source is not (circle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued for the William William "Gladfichings" GWLA.— However,
Property ownership indicated Owns all land. Proposed the
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. (Irrigation and Supp.l Irrigation together, is 2 uses) NA B Form M (Municipal or Quasi-Municipal) NA B Spring Description Sheet
Amount of water from each source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF) 150 gpm from each of the 2 wells (300 gpm total). Period of use Year Round

Water management section (Please estimate if the water system has not been designed).
NA Resource Protection Section (N/A for Groundwater)
Project schedule (If system is already completed, indicate "existing").
NA————————————————————————————————————
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.
A 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 Other
J Zero
Yees: Amount of water requested 300 gpm
Base Fee \$ 1000. Total Exam Fees \$ 1750
Permit Recording Fees \$ 400 Addtnl CFS/AF @ = Mitigation Fee \$ Addtnl POD/POA @ 250 = 250 Amount Due \$ Amount Returned \$ Amount Returned \$
Reviewed by: Date: Groups\wr\Customer Service Group\templates\standard app checklist 7/30/2012 jks

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 107853 725 Summer St. N.E. Ste. A SALEM, OR 97301-4172 INVOICE #_____

			(503) 986-0904 (fax)		
CEIVED FRO	om: Willame	APPLICATION PERMIT	6-17624		
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0408	MISC REVENUE	: (IDENTIFY)			\$
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0240	EXTENSION OF	TIME			\$
	WATER RIGHTS	i:	EXAM FEE	7	RECORD FEE
0201	SURFACE WATE	R	\$	0202	\$
0203	GROUND WATE	R	\$ 1750.00	0204	\$ 400.00
0205	TRANSFER		\$	1	
	WELL CONSTR	UCTION	EXAM FEE	1	LICENSE FEE
0218	WELL DRILL CO	NSTRUCTOR	\$	0219	\$
	LANDOWNER'S	PERMIT		0220	\$
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0536	TREASURY	0437 WEL	L CONST. STAR	TFEE	w.
0211	WELL CONST S	TART FEE	\$	CARD	
0210	MONITORING W	/ELLS	\$	CARD	
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