

Standard Application Completeness Checklist

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

This is the checklist used by WRD staff

Application G-17622 County Marion Priority Date 1-25-13
Township 3S Range 1W Section 34
Amount 425 gpm Use IR WM Dist # 16
Applicant Name Ray Klupenger ROO FARMS
Receipt No. 107875

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. ^{GW} 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).

If for ~~stored~~ water not under contract, is the source valid / Permit or Certificate issued Y / N List Permit or Certificate number _____

The proposed source ~~is~~ **is not** (circle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.

Property ownership indicated.

Applicant owns all
 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 Suppl Irrigation together, is 2 uses)

Supplemental data sheets enclosed if needed ?

Form M (Municipal or Quasi-Municipal)

Spring Description Sheet

Amount of water from each source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF)

425 gpm ~~450 gpm~~

Period of use

March - Oct.

Water management section (Please estimate if the water system has not been designed).

~~N/A~~ Resource Protection Section (N/A for Groundwater)

Project schedule (If system is already completed, indicate "existing").

~~N/A~~ Preliminary plans and specifications including dam height, width, crest width and surface area for each reservoir for all standard reservoir applications

~~N/A~~ 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 _____

Fees: Amount of water requested 425.0 gpm

Base Fee \$ 1000.00

Total Exam Fees \$ 1250.00

1st CFS/AF \$ 250.00

Permit Recording Fees \$ 400.00

Addnl CFS/ AF @ 0 = 0

Mitigation Fee \$ 0

Addnl POD/POA @ 0 = 0

Total Paid \$ 1650.00

Addnl Use @ 0 = 0

Amount Due \$ 0

Amount Returned \$ 0

Reviewed by:

[Signature]

Date:

1-25-13.

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **107875**

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

INVOICE # _____

RECEIVED FROM: Klupenger Nurseries
BY: Inc.

APPLICATION	G-17622
PERMIT	
TRANSFER	

CASH: CHECK:# 12478 OTHER: (IDENTIFY)

TOTAL REC'D \$ 1650.00

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			
0407	COPY & TAPE FEES	<u>46111</u>	\$
0410	RESEARCH FEES		\$
0408	MISC REVENUE: (IDENTIFY)		\$
TC162	DEPOSIT LIAB. (IDENTIFY)		\$
0240	EXTENSION OF TIME		\$
WATER RIGHTS:		EXAM FEE	RECORD FEE
0201	SURFACE WATER	\$	\$
0203	GROUND WATER	\$ <u>1250.00</u>	\$ <u>400.00</u>
0205	TRANSFER	\$	\$
WELL CONSTRUCTION		EXAM FEE	LICENSE FEE
0218	WELL DRILL CONSTRUCTOR	\$	\$
	LANDOWNER'S PERMIT		\$
	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 (FW/WRD)	\$
0231	HYDRO LICENSE FEE (FW/WRD)	\$
	HYDRO APPLICATION	\$

TREASURY OTHER / RDX

FUND _____ TITLE **RECEIVED**
OBJ. CODE _____ VENDOR **OVER THE COUNTER**
DESCRIPTION _____ \$ _____

RECEIPT: **107875**

DATED: 1-25-13 BY: L Bell

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