

# Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R-8786-7 County UNION  
Priority Date 2-19-2013 Township 35 Range 36E Section 12 Taxlot 303  
Use STOCK/WATERLIFE Caseworker KERRY K.  
Amount (AF) 6 ac/yr. Watermaster 6

## 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:** \_\_\_\_\_
- 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.\*\*
- Fees enclosed\*\*?: Examination: Base Fee\$ 300 Permit Recording Fee\$ 400  
plus\$ 150  
plus\$ \_\_\_\_\_

Total Paid \$ 850 Total Fees \$ 850  
Completeness Check by: Laura W Date: 2-19-13 Revised 2011-3-3

**STATE OF OREGON  
WATER RESOURCES DEPARTMENT**

RECEIPT # **108118**

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

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

RECEIVED FROM: The Hampton Family Trust  
BY: \_\_\_\_\_

APPLICATION	R-87867
PERMIT	
TRANSFER	

CASH:  CHECK:#  5206 OTHER: (IDENTIFY)

TOTAL REC'D \$ 850<sup>00</sup>

**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		\$
0410	RESEARCH FEES		\$
0408	MISC REVENUE: (IDENTIFY)	_____	\$
TC162	DEPOSIT LIAB. (IDENTIFY)	_____	\$
0240	EXTENSION OF TIME		\$
WATER RIGHTS:		EXAM FEE	RECORD FEE
0201	SURFACE WATER <u>PCA 46111</u>	\$ 450.00	0202 \$ 400.00
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 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 _____	
OBJ. CODE _____	VENDOR # _____	
DESCRIPTION _____		\$

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DATED: 2-19-13 BY: C. Andrews

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