Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040) (ORS 537.400)

Application G-16760 Priority Date DEC 7, 2006	Township / / / Range 17E	
Use(s) IRRIC	Section 9	
Rate 2.0 CF5	POD Loc. SWSE	
County SHERMAN	POU Loc. SWNE, SENE	
	NWSE, NEST, SWST, STEST	
Applicant/Organization Name, Mailing Address and Telephone Number, application signed in ink. 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)		
Property ownership indicated.		
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 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.		
Groundwater development section (Page 2, Section 3 and/or Page 3, Section 2) or a well log report.		
Proposed use of water. If supplemental, list primary water right acreage if applicable.		
Enclosed Supplemental Form for each proposed use.		
Form I (Irrigation)	O Form M (Municipal or Quasi-Municipal)	
O Form R (Mining)	O Form Q (Commercial or Industrial)	
O Spring Description Sheet		
Amount of water from each source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF)		
9 Period of use Mar (-Oct 31		

Ø	Water management section (Please estimat	e if the water system has not been designed).
O	Resource Protection Section (Page 6, Section	on 5). MA
Ø	Project schedule (If system is already comp	eleted, indicate "existing").
0	For reservoir applications storing more than feet, preliminary plans and specifications for	n 9.2 acre feet, and a dam height of more than 10 WA
	O If the above is statement is checked, the	e map must be prepared by a CWRE.
ø	All applicants (or the authorized agent with title or authority if for an organization or corporation), must sign the application in ink.	
Ø	You must include a Legal description of the property involved that 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.	
Ø.	A completed Land-Use Form or receipt sign department officials. Date of signature mus	ned and dated by the appropriate planning City of Wasco at be within the past 6 months. of Sharman County
The map must meet all the minimum requirements of OAR 690-310-0050.		
	Township, Range, Section	Location of main canals, ditches, pipelines or flumes
	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	North Directional Symbol
	Number of acres per 1/4, 1/4, if irrigation, nursery, or agriculture	O Other
	Reference corner on map	
	2 Each point of diversion coordinate	
Ø	Fees: Amount of water requested 2	0 cf3
	Base Fee \$ 300	Total Exam Fee \$ 690
	1st CFS/AF \$290	Total Paid \$ 850
	Addtn'l @ $\frac{4}{60} = \frac{4}{90}$	Amount Due \$
	Reviewed by Kwanage	Date 12 - 7-06
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