Alternate Reservoir Application Completeness Checklist This is the checklist used by WRD staff

Application R-87884 County Polk Priority Date 4/4/2013 Township 85 Range W Section 5 Taxlot 1/00 Use Multipur posen Caseworker Kerry Amount (AF) 0.6 AF Watermaster Mike McCord 4/16
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 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. — Just over 6 months of 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. Yes □ VII is 2013, not 2012 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 4 etc. Total Quantity of Storage Requested: 0.6 AV 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
Application signed by the landowner(s)? All parties noted as applicants must sign the application. Must be an original "west" signeture.
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 ** 41/4's 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\$ plus\$
Total Paid \$ 725 Completeness Check by: Date: 4/4/2013 Revised 2011-3-3

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 108439 725 Summer St. N.E. Ste. A

r: Daniel Datlagera		APPLICATION	1 775
		PERMIT	
H: C	CHECK:# OTHER: (IDENTIFY)	TRANSFER	
\square \square \square \square \square		TOTAL REC'D	\$ 725=
1083	TREASURY 4170 WRD MISC CASH	ACCT	
0407	COPIES		\$
	OTHER: (IDENTIFY)		\$
0243 I/S L	.ease 0244 Muni Water Mgmt. Plan 0	245 Cons. Water	
1	4270 WRD OPERATING		
	MISCELLANEOUS		
0407	COPY & TAPE FEES		\$
0410	RESEARCH FEES		\$
0408	MISC REVENUE: (IDENTIFY)		\$
TC162	DEPOSIT LIAB. (IDENTIFY)		\$
0240	EXTENSION OF TIME		\$
	WATER RIGHTS: EXAM FEI		RECORD FEE
0201	SURFACE WATER \$ 3.5	0202	\$ 4/.
0203	GROUND WATER \$	0204	\$
0205	TRANSFER \$	_	
	WELL CONSTRUCTION EXAM FEE	E	LICENSE FEE
0218	WELL DRILL CONSTRUCTOR \$	0219	\$
	LANDOWNER'S PERMIT	0220	\$
	OTHER (IDENTIFY)		
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
0536	TREASURY 0437 WELL CONST. ST/	ART 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)	A STATE OF THE STA	\$
	HYDRO APPLICATION	ECEIVED	\$
	TREASURY OTHER CAVER	TIE AAI	
			TER —
FUND	TITLE		
OBJ. COD	DE VENDOR #		
	TION		\$