Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040) (ORS 537,400)

Application G 16730	Township 2 S
Priority Date 9-25-2006	Range 13 E
Use(s) IRRIG	Section
Rate CFS GCM	POD Loc. SEE MAC
County WASCO	POU Loc. See MAP
ink.	Address and Telephone Number, application signed in tored water component filed out, including a non-
Property ownership indicated.	must be metaded. (ORB 557.400)
O If applicant does not own all the mailing address must be listed.	land, the affected landowner's name and
	land, a statement declaring the existence of either ment permitting access to land crossed by the ork must be submitted.
Groundwater development section (Page report.	2, Section 3 and/or Page 3, Section 2) or a well log
Proposed use of water. If supplemental, I	ist primary water right acreage if applicable.
Enclosed Supplemental Form for each pr	oposed use.
Form I (Irrigation)	Form M (Municipal or Quasi-Municipal)
O Form R (Mining)	Form Q (Commercial or Industrial)
O Spring Description Sheet	
Amount of water from each source in gal or acre feet (AF)	llons per minute (GPM), cubic feet per second (CFS),
Period of use	

Resource Protection Section (Page 6, Sect	tion 5).	
Project schedule (If system is already com	ppleted, indicate "existing").	
O For reservoir applications storing more that feet, preliminary plans and specifications	an 9.2 acre feet, and a dam height of more than 10 for dam and impoundment are required.	
O If the shove is statement is checked, the	he map must be prepared by a CWRE.	
All applicants (or the authorized agent with corporation), must sign the application in	•	
	e property involved that includes a metes and	
	ription. A copy of the deed, land sales contract or ormation, or you may submit a lot book report ment will not accept a copy of the tax bill.	
O A completed Land-Use Form or receipt sig department officials. Date of signature mu		
	ast be within the past o months.	
	irements of OAR 690-310-0050. C.	7
		WA
O The map must meet all the minimum requi	irements of OAR 690-310-0050. Cwee	WA.
O The map must meet all the minimum requi	Trements of OAR 690-310-0050. Colocation of main canals, ditches, pipelines or flumes Even map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.) North Directional Symbol	WA
O The map must meet all the minimum requirements Township, Range, Section O Place of use, 1/4, 1/4's and tax lot clearly identified O Location of each diversion point well or dam by reference to a recognized	Trements of OAR 690-310-0050. Colocation of main canals, ditches, pipelines or flumes Even map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.) North Directional Symbol	WA
O The map must meet all the minimum requirements of the control of the clearly identified O Location of each diversion point well or dam by reference to a recognized public land survey corner Number of acres per 1/4, 1/4, if	Continues Continues	WA.
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