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

Application R-87704 County Counts Section 18 Taxlot 1600  Priority Date 6-4-13 Township 3N Range 1W Section 18 Taxlot 1600  Use What Reference Caseworker Kevry K NW/4 SW /4  Amount (AF) 3-4- Watermaster # 18
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  NO  If NO, return the application.  Did the watermaster determine when water is available for the proposed use?   YES   NO  NO  See
Did the westernester determine when weter is evailable for the proposed use 2 VES INO 11 NO. return the application.
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? \( \preceq YES \) \( \preceq NO \) \( \text{If NO, return the application.} \)
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: 3.24
Proposed Use of the waterCannot 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 locatedor that
are crossed by the diversion works. This includes any roads or rights-of-way.)
Provide the legal description of all the property involved with this application. You may include a copy of
your deed land sales contract or title insurance to meet this requirement
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 **
7/4/4'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 Fees 300 Permit Recording Fees 400
Fees enclosed**? Examination: Base Fees 500 Permit Recording Fees 700 plus 75
plus\$
Total Paid \$ 775. Total Fees \$ 775.
Completeness Check by: Date: 6-4-13 Revised 2011-3-3

## STATE OF OREGON

## WATER RESOURCES DEPARTMENT

		(503) 986-0900 /	(503) 986-0904 (fax)		
RECEIVED FROM: Ducks Unlimited I			Inc.	APPLICATION	R 87904
				PERMIT	
	UEOK.#	OTHER (IDENTIFY)		TRANSFER	
ASH: CHECK:# OTHER: (IDENTIFY)			, [	TOTAL REC'D	\$ 775.00
1083	TREASURY	4170 WRD	MISC CASH A	сст	
0407	COPIES				\$
	OTHER:	(IDENTIFY)			\$
03431/514	200	244 Muni Water Mgmt.	Plan 024	5 Cone Water	
0243 I/3 L		4270 WRD			<del></del>
	MISCELLANEO	US			
0407	COPY & TAPE F	EES	16111		\$
0410	RESEARCH FE		10111		\$
0408	MISC REVENU				\$
TC162	DEPOSIT LIAB.	,			\$
0240	EXTENSION OF				\$
	WATER RIGHTS	g.	EXAM FEE	٦	RECORD FEI
0201	SURFACE WAT		\$ 375,00	0202	\$ 40000
0203	GROUND WATE		\$ 212	0204	\$
0205	TRANSFER	-11	\$	- 5254	
0200		NIOTION!	EXAM FEE		LICENSE FEI
0040	WELL CONSTR		\$	0219	\$
0218	WELL DRILL CO		Ψ	0220	\$
	LANDOWNER'S				
	OTHER	(IDENTIFY)	w.#4		
0536	TREASURY	0437 WEL	CONST. STAF	IT FEE	
0211	WELL CONST S	START FEE	\$	CARD #	
0210	MONITORING V	WELLS	\$	CARD#	<u> </u>
	OTHER	(IDENTIFY)			
0607	TREASURY	0467 HYDE	O ACTIVITY	LIC NUMBER	
0233	POWER LICEN	SE FEE (FW/WRD)		DECENT	\$
0231	HYDRO LICENS	SE FEE (FW/WRD)		RECEIVE	<b>-</b>
	HYDRO APPLIC	CATION	OVER	THE CO	UNTER
	TREASURY	Orti	R / RDX		
FUND		TITLE			
OBJ. COD	E	VENDOR #			
DESCRIPT	TION				\$
DEOCHIP					