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

Application 614748	Township 45
Priority Date 12-21-2006	Range 125
Use(s) supp imgatim	Section Sec 7 2 11
Rate 0 al cfs	POD Loc. SWSE at section 2 POU Loc. SID section 2 NID section 11
County wasco	POU Loc. Sily section of
	N12 satm11
ink. O Source of water. If stored water, is the	e stored water component filed out, including a non- er must be included. (ORS 537.400)
O Property ownership indicated. We've	
O If applicant does not own all the mailing address must be listed	he land, the affected landowner's name and i.
	ne land, a statement declaring the existence of either sement permitting access to land crossed by the work must be submitted.
Groundwater development section (Pagreport.	ge 2, Section 3 and/or Page 3, Section 2) or a well log
Proposed use of water. If supplemental	I, list primary water right acreage if applicable. "isted
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 a or acre feet (AF)	gallons per minute (GPM), cubic feet per second (CFS),
Period of use	

Water management section (Please estimate	e if the water system has not been designed).	•
NO Resource Protection Section (Page 6, Section	on 5).	
Project schedule (If system is already comp	leted, indicate "existing").	
For reservoir applications storing more than feet, preliminary plans and specifications fo	n 9.2 acre feet, and a dam height of more than 10 or dam and impoundment are required.	
O If the above is statement is checked, the	e map must be prepared by a CWRE.	
All applicants (or the authorized agent with a corporation), must sign the application in in	· ·	· .
You must include a Legal description of the bounds, or other government survey descriptitle insurance policy can provide this inform prepared by a title company. The Department	otion. A copy of the deed, land sales contract or mation, or you may submit a lot book report	
A completed Land-Use Form or receipt sign department officials. Date of signature must	ed and dated by the appropriate planning t be within the past 6 months.	
The map must meet all the minimum require	ements 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		
Each point of diversion coordinate		•
O Fees: Amount of water requested	1cts	
Base Fee \$	Total Exam Fee \$ 500	
1st CFS/AF	Total Paid \$ 150 (included	vectoraling fee
Addtn'l @ =	Amount Due \$	
Reviewed by Alycon worken	Date 12/21/2006	·