# Standard Application Completeness Checklist

**Minimum Requirements (OAR 690-310-0040)(ORS 537.400)**
This is the checklist used by WRD staff

Application G-17687 County Umatilla Priority Date 6-11-2013

Township 1N Range 32E Section 17

Amount 56.0 gpm (0.125 cfs) Use IR of 10.0 AC WM Dist # 5

Applicant Name Gary and Darla Du Bois

Receipt No. 109032

Caseworker Assigned ☐ Kerry Kavanagh ☑ Mary Rohling

☒ Applicant/Organization Name, Mailing Address, and Telephone Number.

☒ **All** applicants or the applicant's authorized agent (include title or authority if for an organization or corporation), must sign the application in ink. *Signature must be an original "wet" signature. Copies cannot be accepted.*

☒ 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) ***NOTE:*** *A surface water application cannot be filed at the same time as a Reservoir or Alt Reservoir if it will be for the use of the stored water under the PROPOSED Reservoir application, Expedited Secondary(E2).* Well

N/A ~~☐~~ If for stored water not under contract, is the source valid / Permit or Certificate issued Y / N
List Permit or Certificate number _____

☐ The proposed source ~~is~~ or **is not** (circle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.

☐ Property ownership indicated.

N/A ☐ ~~If applic~~ant does not own all the land, the affected landowner=s name and mailing address must be listed.

N/A ☐ ~~If applic~~ant does not own all the land, a signed 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.

☑ Well Development (pg. 4 & 5) or a well log report. Mailing Rec'd: 6/17/2013 Not Completely filled ~~Out.~~

☐ Proposed use of water. If supplemental, list primary acreage. (*Irrigation and Supp.l Irrigation together, is 2 uses*) Irrigation of 10.0 AC

N/A ☐ ~~Supplem~~ental data sheets enclosed (if needed)

☐ Form M (Municipal or Quasi-Municipal)

☐ ~~Spring~~ Description Sheet (if source is a spring)

☑ Amount of water from *each* source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF) 56.0 gpm (0.125 cfs)

☑ Period of use Mar. 1 - Oct 31

☑ Water management section (Please estimate if the water system has not been designed).

N/A ☐ Resource Protection Section (*N/A for Groundwater*)

☑ Project schedule (If system is already completed, indicate "existing").

N/A ☐ Preliminary plans and specifications including dam height, width, crest width and surface area for each reservoir for all standard reservoir applications

N/A ☐ A map prepared by a CWRE for a standard reservoir application proposing to store more than 9.2 acre feet and having a dam height of more than 10 feet

☑ You must include a Legal description of all the properties involved where water is diverted, crossed, and used. The Legal description 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.

☑ A completed Land-Use Form or receipt signed and dated by the appropriate planning department officials. *Please be certain that the Land-Use form lists all lands involved and all uses proposed. Date of signature must be within the past 12 months. Signature must be an original "wet" signature. Copies cannot be accepted.*

OK ☑ The map must meet all the minimum requirements of OAR 690-310-0050.

- ☑ Township, Range, Section
- ☑ Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU)
- ☑ 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. Multiple wells shall be uniquely labeled, and identified on well logs if existing.
- ☑ Reference corner on map
- ☑ North Directional Symbol
- ☑ Number of acres per 1/4, 1/4, if for irrigation, nursery, or agriculture — all in SESW of Sec 17 T. 1N, R. 32E
- ☐ Other _____

OK ☑ Fees: Amount of water requested 0.125 cfs)

Base Fee $ 1,000.00

1st CFS/AF $ 250.00

Addtnl CFS/ AF @ ___ = 0

Addtnl POD/POA @ ___ = 0

Addtnl Use @ ___ = 0

Total Exam Fees $ 1,250.00

Permit Recording Fees $ ___

Mitigation Fee $ ___

Total Paid $ 1,250.00 (Exam)

Amount Due $ ___

Amount Returned $ ___

Recording fees 6/17/2013

Reviewed by: [signature] Date : 6-11-13

STATE OF OREGON

# WATER RESOURCES DEPARTMENT

RECEIPT # **109032**

725 Summer St. N.E. Ste. A
SALEM, OR 97301-4172
(503) 986-0900 / (503) 986-0904 (fax)

INVOICE # _____

**RECEIVED FROM:** Gary Dubois

**BY:** _____

| | |
|---|---|
| **APPLICATION** | G17682 |
| **PERMIT** | |
| **TRANSFER** | |

CASH: ☐ CHECK:# ☒ 1084 OTHER: (IDENTIFY) ☐ _____

**TOTAL REC'D** $ 1250.00

## 1083 TREASURY 4170 WRD MISC CASH ACCT

| | | |
|---|---|---|
| 0407 | COPIES | $ |
| _____ | OTHER: (IDENTIFY) _____ | $ |

0243 I/S Lease _____ 0244 Muni Water Mgmt. Plan _____ 0245 Cons. Water _____

## 4270 WRD OPERATING ACCT

**MISCELLANEOUS**

| | | | |
|---|---|---|---|
| 0407 | COPY & TAPE FEES | L16111 | $ |
| 0410 | RESEARCH FEES | | $ |
| 0408 | MISC REVENUE: (IDENTIFY) | _____ | $ |
| TC162 | DEPOSIT LIAB. (IDENTIFY) | _____ | $ |
| 0240 | EXTENSION OF TIME | | $ |

| | | EXAM FEE | | RECORD FEE |
|---|---|---|---|---|
| | **WATER RIGHTS:** | | | |
| 0201 | SURFACE WATER | $ | 0202 | $ |
| 0203 | GROUND WATER | $ 1250.00 | 0204 | $ |
| 0205 | TRANSFER | $ | | |

| | | EXAM FEE | | LICENSE FEE |
|---|---|---|---|---|
| | **WELL CONSTRUCTION** | | | |
| 0218 | WELL DRILL CONSTRUCTOR | $ | 0219 | $ |
| | LANDOWNER'S PERMIT | | 0220 | $ |

_____ OTHER (IDENTIFY) _____

## 0536 TREASURY 0437 WELL CONST. START 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) | | $ |
| _____ | HYDRO APPLICATION | | $ |

## ____ TREASURY OTHER / RDX

FUND _____ TITLE _____

OBJ. CODE _____ VENDOR # _____

DESCRIPTION _____ $

RECEIPT: **109032** DATED: 6/13 BY: BRenion

Distribution – White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal