Yes	No	\

Standard Application Completeness Checklist
Minimum Requirements (OAR 690-310-0040)(ORS 537.400)
This is the checklist used by WRD staff G-17690

Application County MOCOO Priority Date 6-25-2013			
Township 4N Range 24E Section 15			
Amount 20.4 AF Use Commirr Dan/Fire WM Dist # -05 21			
Applicant Name Frank Ille, Love's Travel Stops & Country Stores			
Receipt No. 109154			
Caseworker Assigned			
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).			
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The proposed source is or is not (circle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.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.			
☐ If applicant does not own all the land, the affected landowner=s name and mailing address must be listed.			
If applicant 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.			
Proposed use of water. If supplemental, list primary acreage. (Irrigation and Supp.l Irrigation together, is 2 uses)			
Supplemental data sheets enclosed (if needed)			
☐ Form M (Municipal or Quasi-Municipal)			
☐ Spring Description Sheet (if source is a spring)			

(20.9
	Amount of water from each source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF)
	Period of use
	Water management section (Please estimate if the water system has not been designed).
, 🗆	Resource Protection Section (N/A for Groundwater)
	Project schedule (If system is already completed, indicate "existing").
0	Prelim nary plans and specifications including dam height, width, crest width and surface area for each reservoir for all standard reservoir applications
	Aimal prepared by a CWRE for a standard reservoir application proposing to store more than 9.2 acre feet and hiving a dam height of more than 10 feet Alan Sending legal desc. Via e-mail today
1.201	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
1	report prepared by a title company. The Department will not accept a copy of the tax bill.
8	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.
	The map must meet all the minimum requirements of OAR 690-310-0050.
Ç	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
	20 JOGPUL CHICAGO CONSOLE TO
	Fees: Amount of water requested 10.44, 0.31 AF Storage UNANGE FEED Base Fee \$ \$1,000 Total Exam Fees \$ \$2000 ITM THIS DATA
	1st CFS/AF \$ 9 250 Addtnl CFS/AF \$ 031 = 25. Mitigation Fee \$
	Addtnl POD/POA @ = a Total Paid \$ 32,426.
	Amount Returned \$ 52600 (De Trime)
	Reviewed by: Date: Date: Date:

Groups\wr\Customer Service Group\templates\standard app checklist

9/5/2012 jks

STATE OF OREGON WATER RESOURCES DEPARTMENT 725 Summer St. N.E. Ste. A RECEIPT # 109154 INVOICE # _ SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-0904 (fax) **APPLICATION** Inc. RECEIVED FROM: PERMIT BY: TRANSFER CASH: OTHER: (IDENTIFY) TOTAL REC'D TREASURY 4170 WRD MISC CASH ACCT 1083 \$ 0407 COPIES \$ OTHER: (IDENTIFY) 0244 Muni Water Mgmt. Plan___ 0245 Cons. Water 0243 I/S Lease _ 4270 WRD OPERATING ACCT **MISCELLANEOUS** \$ 0407 **COPY & TAPE FEES** \$ RESEARCH FEES 0410 \$ 0408 MISC REVENUE: (IDENTIFY) \$ TC162 DEPOSIT LIAB. (IDENTIFY) 0240 EXTENSION OF TIME RECORD FEE WATER RIGHTS: **EXAM FEE** 0201 SURFACE WATER 0202 0203 **GROUND WATER** 0204 0205 TRANSFER LICENSE FEE **EXAM FEE WELL CONSTRUCTION** 0219 0218 WELL DRILL CONSTRUCTOR \$ 0220 LANDOWNER'S PERMIT OTHER (IDENTIFY 0536 TREASURY 0437 WELL CONST. START FEE WELL CONST START FEE 0211 CARD# 0210 MONITORING WELLS \$ CARD# OTHER (IDENTIFY) 0467 HYDRO ACTIVITY TREASURY LIC NUMBER 0607 POWER LICENSE FEE (FW/WRD) 0233 0231 HYDRO LICENSE FEE (FW/WRD) HYDRO APPLICATION

RECEIPT: 109154

FUND .

OBJ. CODE ____
DESCRIPTION

TREASURY

__ TITLE

____ VENDOR #

DATED: 6:25 13 BY: BUILDINSON

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