E-2 Yes No

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

Application 5-87923	County unat	Priority D	Date 8/5/13
Township 4n	Range 37e	Section	33
Amount bius at	Use Grap Douglas	WM 1	Dist # justes #5
Amount <u>0.145 at</u> Applicant Name ALETTING GREGORIA THE	crzenicky, John & Shubed S arner,	TREONICL, LAR	3 4 COOM, LENNY COOM
Receipt No.'S # 10	arner, 09506-109510 (c	5 receipts, 5	applicants)
Caseworker Assigned Ker	ry Kavanagh Amary Rohling		
/ Applicant/Organization Name	e, Mailing Address, and Telepho	ne Number.	TO LOCALISATE CASE
All applicants or the applicant must sign the application in i	t's authorized agent (include title ink. Signature must be an origin		
be filed at the same time as a l	ter, is the stored water componen ust be included. (ORS 537.400) Reservoir or Alt Reservoir if it was plication, Expedited Secondary(I	NOTE: A surface vill be for the use of	vater application cannot
List Permit or Certificate num	ontract, is the source valid / Perm	it or Certificate issu	ied Y N
The proposed source is or is n ORS 538, then return applicat negative IR will be issued.	not (circle one) withdrawn from to tion and fees. If it is withdrawn		
/ Property ownership indicated.			
☐ If applicant does not o	own all the land, the affected land	downer=s name and	I mailing address must be listed.
• •	own all the land, a signed statemer easement permitting access to land tted.		
Well Development (pg. 4 & 5)) or a well log report.		
Proposed use of water. If supuses)	oplemental, list primary acreage.	(Irrigation and Sup	p.l Irrigation together, is 2
Supplemental data sheets end	closed (if needed)		
Form M (Municipal o	or Quasi-Municipal)		
Spring Description Sh	neet (if source is a spring)		

Z	Amount of water from each source in ga	allons per minute (GPM), cubic feet per second (CFS), or acre feet (AF)							
X	Period of use								
Z	Water management section (Please est	imate if the water system has not been designed).							
1	Resource Protection Section (N/A for C	Groundwater)							
1	Project schedule (If system is already completed, indicate "existing").								
2	Preliminary plans and specifications including dam height, width, crest width and surface area for each for all standard reservoir applications								
y).	A map prepared by a CWRE for a star having a dam height of more than 10 f	idard reservoir application proposing to store more than 9.2 acre feet and feet							
ome / cupied / from app v-87846	The Legal description includes a meter deed, land sales contract or title insura	f all the properties involved where water is diverted, crossed, and used. s and bounds, or other government survey description. A copy of the nce policy can provide this information, or you may submit a lot book e Department will not accept a copy of the tax bill.							
	be certain that the Land-Use form list.	signed and dated by the appropriate planning department officials. Please is all lands involved and all uses proposed. Date of signature must be must be an original "wet" signature. Copies cannot be accepted.							
ome copied from any v-87846	 Place of use, 1/4, 1/4=s and tax lo Even map scale not less than 4" = Location of each diversion point, survey corner. Multiple wells shall be existing. Reference corner on map North Directional Symbol Number of acres per 1/4, 1/4, if for Other 	pipelines or flumes (if POA/POD is outside of POU) t clearly identified 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.) well or dam by reference to a recognized public land the uniquely labeled, and identified on well logs if or irrigation, nursery, or agriculture							
1	Fees: Amount of water requesteda								
	Base Fee \$450	Total Exam Fees \$ 450							
	1st CFS/AF \$ 30	Permit Recording Fees \$ 450							
	Addtnl CFS/ AF @ = Addtnl POD/POA @ = Addtnl Use @ =	Total Paid \$							
	Reviewed by:	Date: 8/4/3							
		olates\standard app checklist 9/5/2012 jks							

Minimum Requirements Checklist

Minimum Requirements (OAR 690-310-0040, OAR 690-310-0050 & ORS 537.140)

Include this checklist with the application

Check that each of the following items is included. The application will be returned if all required items are not included. If you have questions, please call the Water Rights Customer Service Group at (503) 986-0900. SECTION 1: applicant information and signature SECTION 2: property ownership 7 SECTION 3: source of water requested 7 SECTION 4: water use \Box SECTION 5: water management \Box SECTION 6: resource protection 7 SECTION 7: project schedule 7 SECTION 8: within a district P SECTION 9: remarks Attachments: 7 Land Use Information Form with approval and signature (must be an original) or signed receipt Provide the legal description of: (1) the property from which the water is to be diverted, (2) any property crossed by the proposed ditch, canal or other work, and (3) any property on which the water is to be used See map submitted with Application to Store water Permit R-87846 as depicted on the map. Fees - Amount enclosed: \$ 930,00 See the Department's Fee Schedule at www.oregon.gov/owrd or call (503) 986-0900. Provide a map and check that each of the following items is included: П Permanent quality and drawn in ink Even map scale not less than 4'' = 1 mile (example: 1'' = 400 ft, 1'' = 1320 ft, etc.) North Directional Symbol Township, Range, Section, Quarter/Quarter, Tax Lots Reference corner on map Location of each well, and/or dam if applicable, by reference to a recognized public land survey corner (distances north/south and east/west) Indicate the area of use by Quarter/Quarter and tax lot clearly identified П Number of acres per Quarter/Quarter and hatching to indicate area of use if for primary irrigation, supplemental irrigation, or nursery Location of main canals, ditches, pipelines or flumes (if well is outside of the area of use)

X

Other: Map submitted with previous application to store water, permit # R-87846

WATER RESOURCES DEPARTMENT

RECEIPT # 109510

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

INVOICE # _____

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RECEIPT: 109510

DATED: 8-5-13 BY BUILDINSON

WATER RESOURCES DEPARTMENT

RECEIPT # 109508

725 Summer St. N.E. Ste. A **SALEM, OR 97301-4172**

INVOICE #_

(503) 986-0900 / (503) 986-0904 (fax) **APPLICATION** RECEIVED FROMX PERMIT Sandra Streetwick BY: TRANSFER CASH: CHECK:# OTHER: (IDENTIFY) TOTAL REC'D 1083 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 COPY & TAPE FEES** 0407 \$ 0410 RESEARCH FEES \$ 0408 MISC REVENUE: (IDENTIFY) \$ TC162 DEPOSIT LIAB. (IDENTIFY) \$ EXTENSION OF TIME 0240 RECORD FEE **WATER RIGHTS:** EXAM FEE \$ RO .00 SURFACE WATER 0201 0202 0203 **GROUND WATER** 0204 0205 **TRANSFER** \$ LICENSE FEE **EXAM FEE WELL CONSTRUCTION** 0219 \$ 0218 WELL DRILL CONSTRUCTOR 0220 \$ LANDOWNER'S PERMIT OTHER 0437 WELL CONST. START FEE TREASURY 0536 WELL CONST START FEE 0211 CARD# 0210 MONITORING WELLS \$ CARD# OTHER (IDENTIFY) 0467 HYDRO ACTIVITY LIC NUMBER 0607 TREASURY \$ POWER LICENSE FEE (FW/WRD) 0233 \$ HYDRO LICENSE FEE (FW/WRD) 0231 \$ HYDRO APPLICATION TREASURY OTHER / RDX TITLE FUND OBJ. CODE VENDOR # DESCRIPTION _

109508 RECEIPT:

DATED: 8-5-13

STATE OF OREGON WATER RESOURCES DEPARTMENT

RECEIPT # 109507

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

INVOICE # _______

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WATER RESOURCES DEPARTMENT

RECEIPT # 109506

725 Summer St. N.E. Ste. A SALEM, OR 97301-4172

INVOICE # _____

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RECEIPT: 109506

DATED: 8-5-13 BY BULLANSON

WATER RESOURCES DEPARTMENT

RECEIPT # 109509

725 Summer St. N.E. Ste. A SALEM, OR 97301-4172

INVOICE # ___

(503) 986-0900 / (503) 986-0904 (fax)									
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