## Limited License "Completeness" Checklist Minimum Requirements (OAR 690-340-030) (ORS 537.143)

		)				
Rec	eived Date: 7:30:2015	Township: 3 S				
Pub	olic Notice Date: 영대 13 · 2013	Range: 9 Ē				
Earl	liest Issue Date: 8 · 20 · 2013	Section: 4				
Sou	irce: A CARING	POD Loc: SE NE				
Amo	ount: [2] GPH					
Dur	ation: 11-1-2013 -> 7.31-2018	Watermaster: 3				
Cou	inty: Hoop River	ODFW:				
Bas	in:	DEQ:				
ı						
9	Applicant/Organization Name, Mailing A Signature in ink. Original "wet" signature re Source listed?	Address ,Telephone Number, and Contact Person. equired.				
1.						
6 <del>(19</del>		) or sufficient information for the Department to ben interval, etc. included ? Was the intended aquifer location shall be clearly tied to a well log.				
9	Proposed Use of the wateris each pro	posed use identified?				
MA	If source is stored water Is there a contract for delivery of stored water. Must have a copy					
MA	If use is supplementalis the primary water right listed?					
<b>Ø</b>	Amount of water from each source listed in GPM CFS or AF?					
ndha	Acreage being proposed, if applicable.					
8	Duration of Limited License being requested by applicant.					
<b>%</b>	Project schedule Date when water use will start and date when water use will be completed					
8	<b>Is the application signed in ink</b> by the applicant(s) or by the authorized agent with title or authority if an organization or corporation?					
<b>V</b>	ക്രിയ∣3 Water Master Report Is the local Water	Masters report on water availability included?				
<b>√</b>		completed by local planning officials included? hs. Signature must be an original "wet" signature.				

8			p meet requirer be submitted.	ments of OAR 690	0-340-030?	If map is larger than 11 x 17, four		
		9	Township, Ra	nge, Section	0	Location of each diversion point, well or dam		
		9	Reference corner on map		9	Each POD coordinate by reference		
		9	Scale of the M 2" = 1 mile	lap, not less than		to a recognized public land survey corner		
	Fees encl	osed?	as roads, streams, railroads, etc, wh may be helpful in locating the diversion points in the field.					
		Base Fee Water Amount						
		\$250.00 including the first point of diversion \$25.00 for each additional point of diversion				$+\frac{250^{20}}{250^{20}}$ total fee		
FEI	E PAID		- 250°	Fran Perm	285 Acam			
ST	ILL OWED		_Ø					
Co	mpletenes	s Chec	k by:			Date: <b>8/2/2013</b>		

1/18/2011 JKS

S:\groups\wr\Customer Service Group\templates\limited-license-checklist

## OREGON WATER RESOURCES DEPARTMENT

## ACCOUNT ACTIVITY RECORD



Account Name:	Schwabe,	Williamson & Wyatt	CA 0012	
Activity Date:	7-30-13			

Please complete and leave at the WRIG customer service counter.

Transaction Description	Number of items or hours	Project Name	Customer contact name	Department personnel providing service	Amount of Activity
Deposit to account 46114 165 new/168 existing					
Copying 46116 selfserve 46111 agency assisted					
Faxing					
Research 46111					
Other: Limited License	<sup>#</sup> 250.∞	Limited License	Karen	Jerry Sauter	\$250°°
Other:					

01/14/04

Your account may be required to provide an account project number per your accounting department. If required, please have your project number ready upon any service request.