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

	Application G 16780	Township	135
	Priority Date JAN 8, 2007	Range	136€
	Use(s) IRRIG & COMM.	Section	120
	Rate C F 5 G C M	POp Loc	SIN NE
	County UNION	POU Loc.	FUN NE
2	Applicant/Organization Name, Mailing Acink.  Source of water. If stored water, is the sto	red water comp	onent filed out, including a non-
	expired agreement for stored water m	ust be included.	(ORS 537.400)
- 4	Property ownership indicated.		
	O If applicant does not own all the la mailing address must be listed.	nd, the affected	landowner's name and
	<ul> <li>If applicant does not own all the la written authorization or an easem proposed ditch canal or other wor</li> </ul>	ent permitting a	ccess to land crossed by the
L	Groundwater development section (Page 2 report.	Section 3 and/	or Page 3, Section 2) or a well log
۷	Proposed use of water. If supplemental, lis	t primary water	right acreage if applicable.
	Enclosed Supplemental Form for each pro	posed use.	
	Form I (Irrigation)	Form M (Muni	cipal or Quasi-Municipal)
	O Form R (Mining)	Form Q (Comn	nercial or Industrial)
	O Spring Description Sheet		
L	Amount of water from each source in gallo or acre feet (AF)	ons per minute (	GPM), cubic feet per second (CFS),
L	Period of use		

Water management section (Please estimate	if the water system has not been designed).		
Resource Protection Section (Page 6, Section	on 5).		
Project schedule (If system is already completed, indicate "existing").			
For reservoir applications storing more than 9.2 acre feet, and a dam height of more than 10 feet, preliminary plans and specifications for dam and impoundment are required.			
Resource Protection Section (Page 6, Section 5).  Project schedule (If system is already completed, indicate "existing").  O For reservoir applications storing more than 9.2 acre feet, and a dam height of more than 10 feet, preliminary plans and specifications for dam and impoundment are required.  O If the above is statement is checked, the map must be prepared by a CWRE.  All applicants (or the authorized agent with title or authority if for an organization or corporation), must sign the application in ink.			
bounds, or other government survey descrip title insurance policy can provide this inform	nation. A copy of the deed, land sales contract or nation, or you may submit a lot book report	•	
The map must meet all the minimum require	ments of OAR 690-310-0050.		
O Township, Range, Section			
well or dam by reference to a recognized	O North Directional Symbol		
• • • • • • • • • • • • • • • • • • •	O Other		
O Reference corner on map			
O Each point of diversion coordinate	9 125		
Fees: Amount of water requested CF	5 GPM		
Base Fee \$	Total Exam Fee \$		
	_		
Addtn'l @ =	Amount Due \$ 170 02772	RF	
Reviewed by XXM	Date JAN 9 2007		
GAVE CHECK			
	2		
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