

E-2

Standard Application Completeness Checklist

Minimum Requirements (OAR 690-310-0040)(ORS 537.400)

This is the checklist used by WRD staff

Yes No

Application 617727 County Clackamas Priority Date 10/15/13

Township 35 Range 1E Section 25

Amount 150 GPM ~~0.1875 cfs~~ Use Irrigation of 15 acres WM Dist. # 20
0.3125

Applicant Name Jerry Lasselle / HLH Farms

Receipt No. 110212

Caseworker Assigned: Mary Rohling _____

Contact info: Applicant/Organization Name, Mailing Address, and Telephone Number

Signature (in ink) of all applicants or the applicant's authorized agent (include title or authority if for an organization or corporation). Signature must be an original "wet" signature. Copies cannot be accepted.

Property ownership: Does the applicant own all the land for the proposed project? Y / N

If No:

- The affected landowner's name and mailing address must be listed (AND)
- 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.

For a SW Application: Source of water must be indicated.

If the source is stored water, is the stored water component filled out and does the applicant own the reservoir or include a non-expired agreement for stored water? (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, Exp. Secondary (E2).

If for stored water not under contract, is the source authorized under a permit, certificate, or decree? Permit or Certificate issued? Y / N Permit or Certificate # _____

For a GW Application: Well Development Tables completed and/or a well log report included (if existing)

The proposed source IS / IS NOT (circle one) restricted or withdrawn from further appropriation. NOTE: If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.

Proposed water use. Number of uses: 1 (Primary and Supplemental Irrigation is 2 uses.)

Amount of water from each source in GPM, CFS, or AF How many POA/PODs? 1

Period of use indicated

If for supplemental irrigation, primary acreage or underlying permit or certificate number listed

Supplemental data sheets enclosed (if needed)

Form M (Municipal or Quasi-Municipal)

Spring Description Sheet (if source is a spring)

Water Management Section (Estimates if the water system has not been designed).

~~NA~~ Resource Protection Section (N/A for Groundwater)

~~NA~~ Preliminary plans and specifications including dam height, width, crest width and surface area for each reservoir for all standard reservoir applications. **How many reservoirs?** _____

~~NA~~ A map prepared by a CWRE for a standard reservoir application proposing to store ≥ 9.2 acre feet AND having a dam height ≥ 10 feet.

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

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.*

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 applicant may submit a lot book report prepared by a title company. Copies of tax bills are not acceptable.

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, $\frac{1}{4}$ - $\frac{1}{4}$'s and tax lot clearly identified

Even map scale not less than 4" = 1 mile (1" = 1320 ft.); examples: 1" = 100 ft., 1" = 200 ft.

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 $\frac{1}{4}$ - $\frac{1}{4}$ if for irrigation, nursery, or agriculture

Fees: Amount of water requested: 0.1875 cfs

Base Fee \$ 1150

1st CFS or AF \$ 300

Addnl CFS/AF = \$ —

Addnl Use/POD/POA x1 = \$ 300

Addnl Reservoir = \$ —

Other = \$ —

Exam Fee Total \$ 1450

1750

Total Exam Fees \$ 1450 ~~1750~~

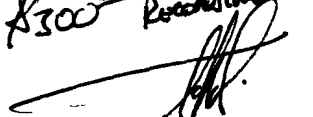
Permit Recording Fees \$ 450 ~~150.00~~

Mitigation Fee \$ —

Amount Paid \$ 1900

Total Due \$ 1900 ~~2200~~

Amount Returned \$ —

\$300⁰⁰ Reservoirs Fee


Reviewed by: Andrea M

Date: 10/15/13

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **110212**

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

INVOICE # _____

RECEIVED FROM: <u>Jerome T. Lasselle</u>	APPLICATION <u>G17727</u>
BY: _____	PERMIT _____
	TRANSFER _____
CASH: <input type="checkbox"/> CHECK:# <u>9471</u> OTHER: (IDENTIFY) <input type="checkbox"/>	TOTAL REC'D \$ <u>1900.00</u>

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	<u>4611</u>		\$ _____
0410 RESEARCH FEES			\$ _____
0408 MISC REVENUE: (IDENTIFY)			\$ _____
TC162 DEPOSIT LIAB. (IDENTIFY)			\$ _____
0240 EXTENSION OF TIME			\$ _____
WATER RIGHTS:			
0201 SURFACE WATER	EXAM FEE	0202	RECORD FEE
0203 GROUND WATER	\$ _____	0204	\$ _____
0205 TRANSFER	\$ <u>1450.00</u>		\$ <u>450.00</u>
WELL CONSTRUCTION			
0218 WELL DRILL CONSTRUCTOR	EXAM FEE	0219	LICENSE FEE
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: **110212** DATED: 10-15-13 BY: B Williamson

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