STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 111079

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

INVOICE # _____

CEIVED FR		illiams n Willia	MS	APPLICATION TO SERVICE TRACES	5-87950
SH:	CHECK:# 277	OTHER: (IDEN	ITIFY)	TERM MECH	\$ 990.0
108		477, 1		AGET	<u> </u>
0407	COPIES		,		\$
	OTHER:	(IDENTIFY)			\$
0243 I/S I	Lease	244 Muni Water M	figmt. Plan	0245 Cons. Water _	
		4270	and a second	ACCT	
	MISCELLANE	ous 46	11)		
0407	COPY & TAPE	FEES TO	, (\$
0410	RESEARCH FI	EES			\$
0408	MISC REVENU	JE: (IDENTIFY)			\$
TC162	DEPOSIT LIAE	I. (IDENTIFY)			\$
0240	EXTENSION C	F TIME			\$
	WATER RIGHT	rs:	GIAN FE	2	RECORD FEE
0201	SURFACE WA	TER	\$ 540.0	0202	\$ 450.00
0203	GROUND WAT	ER	\$	0204	\$
0205	TRANSFER		\$		
	WELL CONST	RUCTION	EXAM FE	É	LIGENSE FEE
0218	WELL DRILL C	ONSTRUCTOR	\$	0219	\$
	LANDOWNER	S PERMIT		0220	\$
	OTHER	(IDENTIFY)		····	
45	THE SULT	047 1		AN FEET IN	
0211	WELL CONST	START FEE	\$	CAR	04
0210	MONITORING	WELLS	\$	CAPI	3.0
	_ OTHER	(IDENTIFY)			- Landerson -
PROM		0467 k	WHO ASTRAIN	LICHUMBER	2 2 2 2
0233	POWER LICEN	NSE FEE (FW/WR	D)		\$
0231	HYDRO LICEN	ISE FEE (FW/WR)		\$
	_ HYDRO APPLI	CATION			\$
	REASIN		THER/HOX	•	
FUND		TITLE		_	
OBJ. COI	DE	VENDOR #		_	
DESCRIP	PTION				\$

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Yes No

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

Application 5-87	154 County_	dova	_ Priority Date	2/3/14
Township 305	Range 4~	Section 24		
Amount 2.23 at	Use	ne		WM Dist. #
Applicant Name	iame			
Receipt No	Casework	ker Assigned: D M	lary 🗹 Kim	☐ Jeana
☑ Contact info: Applic	cant/Organization Name ar	nd Mailing Address		
Signature (in ink) of organization or corp	fall applicants or the applicants or the applicants or the applicants.	cant's authorized age	ent (include title or	authority if for an
Property ownerships If No:	Does the applicant own a	ll the land for the pro	posed project? _	Y / N
☐ The affected	landowner's name and ma	ailing address must be	e listed	
e	tement declaring the existed crossed by the proposed			
☐ For a SW Application	on: Source of water must	be indicated.		
reservoir or i NOTE: A sur	is stored water, is the store nclude a non-expired agre face water application can e use of the stored water un	ement for stored wate not be filed at the sam	er? (ORS 537,400) se time as a Reservo	oir or Alt Reservoir if it
✓ If for stored	water not under contract, i	s the source authorize	ed under a permit,	certificate, or decree?
Permit or Ce	rtificate issued?Y/_	N Perm	it or Certificate#_	
√√□ For a GW Applicate	on: Well Development Ta	ables completed and/o	or a well log report	included (if existing)
Proposed water use				
☐ Period of use ☐ If for supple	vater from each source in Ge indicated mental irrigation, primary d Supplemental Irrigation	acreage or underlying	g permit or certifica	ate number listed
☑ Water Management	Section (Estimates if the	vater system has not	been designed)	
Resource Protection	Section (N/A for Ground	water)		

1/2	For all standard reservoir applications: Preliminary plans and specifications including dam height, width, crest width and surface area for each reservoir.						
亙	Project schedule (If system is already completed, indicate "existing.")						
N/M□	Supplemental data sheets enclosed (if needed)						
	☐ Form M (Municipal or Qua	si-Municipal)					
	☐ Spring Description Sheet (if source is a spring)						
_{اگر}	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.						
Ø	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.						
6	The proposed source <u>IS/IS NOT</u> (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.						
	The map must meet all the minimum	um requirements o	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, ¼-¼'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 ¼-¼ if for irrigation, nursery, or agriculture For a standard reservoir application to store ≥ 9.2 acre feet AND having a dam height ≥ 10 feet, map must be prepared by a CWRE						
2.23 at 1 pod	Fees: Base Fee 1st CFS or AF @ 30	\$ <u>450</u> \$ <u>90</u>	Permit Recording Fees				
	Addtnl CFS/AFAddtnl Use/POD/POA	_= \$ = \$	Mitigation Fee	\$			
'IY	Addtnl Reservoir	_= \$	Amount Paid	\$ 990			
	OtherExam Fee Total	= \$ \$ _540	Total Due Amount Returned	\$ \$			
Re	viewed by:		Date: 2/5/14				
	O .						