#### STATE OF OREGON

### WATER RESOURCES DEPARTMENT

RECEIPT # 113648

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

INVOICE # \_\_\_\_\_

ECEIVED F	10-0118-1	enburg	APPLICATION	5-85019
Y:	Lorry T Brank	2nbag	PERMIT	-6
CASH:	CHECK:# OTHER: (IDENTIF)	n <b>D</b>	TRANSFER TOTAL REC'D	\$ 1550.00
108	TREASURY 4770 WHID	MISC CASH	ACCT	
0407	COPIES			\$
	OTHER: (IDENTIFY)			\$
0243 1/3	S Lease 0244 Muni Water Mgmt.			
	4270 WAC	OPERATING	ACCT	
0.407	MISCELLANEOUS	11.11		\$
0407 0410	COPY & TAPE FEES  RESEARCH FEES	$\{lell\}$		\$
0410	MISC REVENUE: (IDENTIFY)			\$
TC162	·	345		\$
0240	EXTENSION OF TIME			\$
	WATER RIGHTS:	EXAM FRE		RECORD FEE
0201	SURFACE WATER	\$ 1/00 0	0202	\$ 450.00
0203	GROUND WATER	\$ 1100.0	0204	\$
0205	TRANSFER	\$		
0_00	WELL CONSTRUCTION	EXAM PER		LICENSE FEE
0218	WELL DRILL CONSTRUCTOR	\$	0219	\$
0210	LANDOWNER'S PERMIT		0220	\$
	OTHER (IDENTIFY)		1.00	
059	8 TREASURY 0437 WEL	L CONST. ST	ART FEE	
0211	WELL CONST START FEE	\$	CARD	M
0210	MONITORING WELLS	\$	CARO	
	OTHER (IDENTIFY)	-		
	COMPLETE GROWN TO THE SECURITY OF THE SECURITY		LIC MINDER	
060			EL RUMBER	T s
0233	POWER LICENSE FEE (FW/WRD)			\$
0231	HYDRO LICENSE FEE (FW/WRD)			\$
	HYDRO APPLICATION	PARTE BASINA SA PARTE POLICE AND PARTE BASINA SA PARTE PARTE		J T
	_ TREASURY OTH	ET/TOX		4
FUND	TITLE			
OBJ. C	ODE VENDOR #			
DESCF	RIPTION		1	\$
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RECEIPT:	113648 DATED: 1	7/8/14 BY	: (HUNGE)	R

Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal

## E-2

# Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400)

Yes	No
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This is the checklist used by WRD staff

Application 5-88019 County Doug Priority Date 10-8-14
Township $\frac{265}{\text{Range}} = \frac{5w}{\text{Section}} = \frac{23}{23} = \frac{3}{23}$
Amount O. O. S Use Domestic Expanded WM Dist. # 15
Applicant Name Larry Brandenburg
Receipt No. 113648 Caseworker Assigned: Barbe   Kim   Jeana
Contact info: Applicant/Organization Name and Mailing Address
Signature (in ink) of all applicants or the applicant's authorized agent (include title or authority if for an organization or corporation).
Property ownership: Does the applicant own all the land for the proposed project?  If No:
N/AS The affected landowner's name and mailing address must be listed
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. North Umpgual
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)
Proposed water use Domestie Exp.
Amount of water from each source in GPM, CFS, or AF 0.01 c f
Proposed water use  Amount of water from each source in GPM, CFS, or AF  Period of use indicated  Period of use indicated period indicated  Period of use indicated period indicated pe
Water Management Section (Estimates if the water system has not been designed)
Resource Protection Section (N/A for Groundwater)
For all standard reservoir applications: Preliminary plans and specifications including dam height, width, crest width and surface area for each reservoir.
Project schedule (If system is already completed, indicate "existing.")

1 k-0	Supplemental data sheets enclosed (if needed	d)		
1	Form M (Municipal or Quasi-Munici	pal)		
	Spring Description Sheet (if source is	s a spring)		
	A completed <b>Land-Use Form</b> or receipt sign Please be certain that the Land-Use form list be within the past 12 months.			
, <b>E</b>	A <b>Legal Description</b> of all the properties in description includes a metes and bounds or consales contract or title insurance policy can properly by a title company. Copies of tax by	other governmen ovide this inform	t survey description. A continuation, or applicant may	copy of the deed, land
	The proposed source—IS / IS NOT (circle o NOTE: If it is withdrawn under ORS 538, th accept the application and a negative IR will	en return applic		
P	Township, Range, Section Location of main canals, ditches, pipe Place of use, ¼-¼'s and tax lot clearl Even map scale not less than 4" = 1 r Location of each diversion point, well Multiple wells shall be uniquely labe Reference corner on map North Directional Symbol Number of acres per ¼-¼ if for irrigation to a standard reservoir application to must be prepared by a CWRE	elines or flumes y identified mile (1"= 1320 fi Il or dam by refe led, and identification, nursery, or	(if POA/POD is outside t.); examples: 1" = 100 for rence to a recognized poted on well logs if existing agriculture	ft., 1" = 200 ft. ublic land survey corner. ng.
V	Fees: Base Fee  Nt CFS @ \$300 add'1 CFS @ \$300 ea  AF up to 20 AF @ \$30 ea  add'1 AF @ \$1 ea  add'1 □pod/poa □use @ ea  add'1 res @ \$125 ea  Exam Fee Total Exam Fee Paid	\$ 800.00 \$ 300.00 \$ = = = = = = = = = = = = = = = = = = =	Permit Recording Feet Mitigation Feet Rec Fee Total Rec Fee Paid  Amount Returned	\$ \$ 450.00 \$ 450.00 \$ 450.00 \$ 450.00 Paid \$ 1550.00 Mne.
Re	eviewed by:	Date: _	10-8-1	4



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### Water Resources Department

### Apply for a Permit to Appropriate Surface Water

Today's Date: Wednesday, October 08, 2014

	\$800.00
0.1	\$300.00
1	
1	
0	
	\$450.001
Recalculate	
	\$1,550.00
	1 0

Return to Fee Calculator Options page

OWRD Fee Schedule

Fee Calculator Version: B20130709

S-88019