

**STATE OF OREGON  
WATER RESOURCES DEPARTMENT**

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

RECEIPT # **113832**

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

RECEIVED FROM: Heads Roofing & Construction Inc APPLICATION R-85028  
BY: \_\_\_\_\_ PERMIT \_\_\_\_\_  
TRANSFER \_\_\_\_\_

CASH:  CHECK: # 1390 OTHER: (IDENTIFY)  TOTAL REC'D \$860.00

**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 46111 \$ \_\_\_\_\_  
0410 RESEARCH FEES \$ \_\_\_\_\_  
0408 MISC REVENUE: (IDENTIFY) \_\_\_\_\_ \$ \_\_\_\_\_  
TC162 DEPOSIT LIAB. (IDENTIFY) \_\_\_\_\_ \$ \_\_\_\_\_  
0240 EXTENSION OF TIME \$ \_\_\_\_\_

**WATER RIGHTS:**  
0201 SURFACE WATER (All Res) \$860.00 0202 RECORD FEE \$ \_\_\_\_\_  
0203 GROUND WATER \$ \_\_\_\_\_ 0204 \$ \_\_\_\_\_  
0205 TRANSFER \$ \_\_\_\_\_  
**WELL CONSTRUCTION**  
0218 WELL DRILL CONSTRUCTOR \$ \_\_\_\_\_ 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 0457 HYDRO ACTIVITY LIC NUMBER**

0233 POWER LICENSE FEE (FWWRD) \$ \_\_\_\_\_  
0231 HYDRO LICENSE FEE (FWWRD) \$ \_\_\_\_\_  
HYDRO APPLICATION \$ \_\_\_\_\_

**TREASURY OTHER / RDX**

FUND \_\_\_\_\_ TITLE \_\_\_\_\_  
OBJ. CODE \_\_\_\_\_ VENDOR # \_\_\_\_\_  
DESCRIPTION \_\_\_\_\_ \$ \_\_\_\_\_

RECEIPT: **113832** DATED: 10/20/14 BY: [Signature]

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# Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R-88028 County LANE  
Priority Date 10-30-14 Township 18S Range 5W Section 6 Taxlot 101  
Use Multi purpose Caseworker \_\_\_\_\_  
Amount (AF) 2.0 AF Watermaster MATTICK

## Minimum Requirements (ORS 537.409)

**Completed Watermaster review sheet** signed and dated by Watermaster.

Will the reservoir injure an existing water right?  YES  NO

If YES, can conditions be applied to mitigate the injury?  YES  NO **If NO, return the application.**

Did the watermaster determine when water is available for the proposed use?  YES  NO

*The Watermaster review sheet must have been completed within the last 6 months.*

**If the watermaster determined that water is NOT available, return the application.**

**Completed ODFW review sheet** signed and dated by ODFW representative.

Will the reservoir pose a significant detrimental impact to an existing fishery resource?  YES  NO

If YES, can conditions be applied to mitigate the impact?  YES  NO **If NO, return the application.**

*The ODFW review sheet must have been completed within the last 6 months.*

**Completed Land-Use Form** or receipt signed by the appropriate planning department official enclosed?

*Does the use on land-use form match the proposed use on the application? Must be an original "wet" signature within the last 12 months.*

**Landowner Name, Mailing Address** and Telephone Number.

**Source** and tributary listed. **NO WELLS-MUST HAVE GW APP TO USE A WELL AS A SOURCE !!**

**Reservoir Location**- Township, Range, Section, Quarter Quarter, Taxlot

**Dam height**, if applicable

**Total Quantity** of Storage Requested: \_\_\_\_\_

**Proposed Use of the water**....Cannot accept application for use of this stored water at the same time (E2)

**Property ownership indicated?** If applicant does not own all the land is the affected landowner's name and mailing address listed? (Including: lands not owned by applicant, upon which the source is located .....or..... that are crossed by the diversion works. This includes any roads or rights-of-way.)

Provide the **legal description** of all the property involved with this application. You may include a copy of your deed land sales contract or title insurance to meet this requirement

**Environmental Impact** section completed?

**Application signed by the landowner(s)?** All parties noted as applicants must sign the application.

*Must be an original "wet" signature.*

**Acceptable map** \*\* Indicates requirements of standards set forth by the Commission and causes fatal flaw if not provided by the applicant.

**Reservoir Location** - noting Township, Range, Section, 1/4 1/4 and Tax Lot number(s)\*

**Scale of the Map** (not less than 1" = 1320') \*\*

**Reference corner** on map

**North Directional Symbol** \*\*

**1/4's** clearly identified

**Reservoir** clearly identified \*\*

**Dam or POD** (If off channel) Location coordinates referenced to a government land survey corner\* If no dam, use coordinates to center of reservoir.\*\*

**Fees enclosed\*\*?** Examination: Base Fee\$ \_\_\_\_\_ Permit Recording Fee\$ \_\_\_\_\_

\$ 860.00 plus\$ \_\_\_\_\_ plus\$ \_\_\_\_\_

**Total Paid \$** \_\_\_\_\_

**Total Fees \$** \_\_\_\_\_

Completeness Check by: CSG - Scott Date: 10-30-14

Revised 2011-3-3

RECEIVED BY OWRD

OCT 30 2014

SALEM, OR