

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 G-17999 County Malheur Priority Date 17-FEB-15

Township 185 Range 46E Section 7

Amount .43 cfs Use Irrigation 69.1 ac WM Dist. # 9

Applicant Name Rudolf Trenkel, Roberta Trenkel, CAROLINE WILSON

Receipt No. 114925 Caseworker Assigned: [X] Barbe [] Kim [] Kerri

- [X] Contact info: Applicant/Organization Name and Mailing Address
[X] Signature (in ink) of all applicants or the applicant's authorized agent
[X] Property ownership: Does the applicant own all the land for the proposed project? (Y) / N

If No:

- [X] The affected landowner's name and mailing address must be listed
[X] 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.

- [X] 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?
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 #

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

- [X] Proposed water use
[X] Amount of water from each source in GPM, CFS, or AF
[X] Period of use indicated
[X] If for supplemental irrigation, primary acreage or underlying permit or certificate number listed (Primary and Supplemental Irrigation counts as 2 uses)

[X] Water Management Section (Estimates if the water system has not been designed)

[X] Resource Protection Section (N/A for Groundwater)

[X] For all standard reservoir applications: Preliminary plans and specifications including dam height, width, crest width and surface area for each reservoir.

[X] Project schedule (If system is already completed, indicate "existing.") Existing

- Supplemental data sheets enclosed (if needed)
 - Form M (Municipal or Quasi-Municipal)
 - Spring Description Sheet (if source is a spring)

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.*

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 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.*

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, 1/4-1/4'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 1/4-1/4 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

Fees:

Base Fee	\$ <u>1150⁰⁰</u>	Permit Recording Fees	\$ <u>450⁰⁰</u>
1 st CFS @ \$300	\$ <u>300⁰⁰</u>	Mitigation Fee	\$ _____
___ add'l CFS @ \$300 ea	\$ _____	Rec Fee Total	\$ <u>450⁰⁰</u>
___ AF up to 20 AF @ \$30 ea	\$ _____	Rec Fee Paid	\$ <u>450⁰⁰</u>
___ add'l AF @ \$1 ea	\$ _____		
___ add'l <input type="checkbox"/> pod/poa <input type="checkbox"/> use @ _____ ea	\$ _____		
___ add'l res @ \$125 ea	\$ _____		
Exam Fee Total	\$ <u>1450⁰⁰</u>		
Exam Fee Paid	\$ <u>1450⁰⁰</u>	Amount Returned	\$ <u>1900⁰⁰</u>

Reviewed by: Jeffrey Date: 2-18-15

**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 # **114925**

INVOICE # _____

RECEIVED FROM: Trenkel Brothers
BY: Corp

APPLICATION	G-17999
PERMIT	
TRANSFER	

CASH: CHECK:# 6057 OTHER: (IDENTIFY)

TOTAL REC'D \$ 1900.00

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	<u>46111</u>	\$ _____
0410	RESEARCH FEES		\$ _____
0408	MISC REVENUE: (IDENTIFY)		\$ _____
TC162	DEPOSIT LIAB. (IDENTIFY)		\$ _____
0240	EXTENSION OF TIME		\$ _____
WATER RIGHTS:			RECORD FEE
0201	SURFACE WATER	EXAM FEE \$ _____	0202 \$ _____
0203	GROUND WATER	\$ <u>145000</u>	0204 \$ <u>450.00</u>
0205	TRANSFER	\$ _____	
WELL CONSTRUCTION			LICENSE FEE
0218	WELL DRILL CONSTRUCTOR	EXAM FEE \$ _____	0219 \$ _____
	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: **114925** DATED: 2/17/15 BY: Maria Archer

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