

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-18012 County Clackamas Priority Date 11-Mar-15Township 5S Range 1E Section 5Amount .11 cfs Use IRA WM Dist. # H20Applicant Name Ivan BarsukoffReceipt No. 115175 Caseworker Assigned: ☒ Barbe ☐ Kim ☐ Kerri

- ☒ 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? Y N

If No:

- ☐ 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.

- ☐ 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

- ☒ Amount of water from each source in GPM, CFS, or AF

☒ Period of use indicated☒ If for supplemental irrigation, primary acreage or underlying permit or certificate number listed
(Primary and Supplemental Irrigation counts as 2 uses)☒ 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.")

- ☒ 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>1150</u>	Permit Recording Fees	\$ <u>450</u>
1 st CFS @ \$300	\$ <u>300</u>	Mitigation Fee	\$ _____
___ add'l CFS @ \$300 ea	\$ _____	Rec Fee Total	\$ <u>450</u>
___ AF up to 20 AF @ \$30 ea	\$ _____	Rec Fee Paid	\$ <u>450</u>
___ add'l AF @ \$1 ea	\$ _____		
___ add'l ☐ pod/poa ☐ use @ _____ ea	\$ _____		
___ add'l res @ \$125 ea	\$ _____		
Exam Fee Total	\$ <u>1450</u>		
Exam Fee Paid	\$ <u>1450</u>		

Amount Returned \$ 1900

Reviewed by: Jeffrey

Date: 11-Mar-15

9 acres well located

NE Corner 8 acres

NE 8

NE 8

NE 8

NE 8

E 9

Center 10

SE 8

SE 8

10/28/2014 AM

**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 # **115175**

INVOICE # _____

RECEIVED FROM: Ivan Barsukoff
BY: Evdukia Barsukoff

APPLICATION	<u>6-18012</u>
PERMIT	
TRANSFER	

CASH: ☐ CHECK:# OTHER: (IDENTIFY) ☐

☒ 6556

TOTAL REC'D \$ 1,900.00

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

46111

0407 COPY & TAPE FEES	\$
0410 RESEARCH FEES	\$
0408 MISC REVENUE: (IDENTIFY)	\$
TC162 DEPOSIT LIAB. (IDENTIFY)	\$
0240 EXTENSION OF TIME	\$

WATER RIGHTS:

EXAM FEE
\$
\$ <u>1,450.00</u>
\$
EXAM FEE
\$

RECORD FEE
\$
\$ <u>450.00</u>

0201 SURFACE WATER	0202
0203 GROUND WATER	0204
0205 TRANSFER	

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR	0219
LANDOWNER'S PERMIT	0220

LICENSE FEE
\$
\$

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 _____

**RECEIVED
OVER THE COUNTER**

RECEIPT: **115175**

DATED: 3/11/15

BY: Maria Arden

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