Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application B-88074	County Lane	
Priority Date 24 - Apc - 15	Township 185 Range 300	Section 25 Taxlot 13 C
Use with	Caseworker Kim	
Amount (AF)	Watermaster 2	

Minimum Requirements (ORS 537.409)

Completed Watermaster review sheet signed and dated by Watermaster.

Will the reservoir injure an existing water right?
VES

If YES, can conditions be applied to mitigate the injury? \Box **X F** $A \Box$ NO **If NO, return the application.**

Did the watermaster determine when water is available for the proposed use? YES DINO

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.

WWI the reservoir pose a significant detrimental impact to an existing fishery resource?
YES TNO If YES, can conditions be applied to mitigate the impact? TYESATNO 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?

 D_{Q} oes 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 !!

Beservoir Location- Township, Range, Section. Quarter Quarter, Taxlot

Dam height, if applicable

Total Quantity of Storage Requested: . 16

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 locatedor..... 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

Exprimental 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 **

s clearly identified

Beservoir 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 Fees <u>3</u> P Permit Recording Fee\$_450

 Ist AF __plus\$______

 Ist AF __plus\$______

 Ist AF __plus\$______

 Total Paid \$_______

 Completeness Check by:
 JP

 Date:
 27-Apr-15______

 Revised 2011-3-3

RECEIPT #	w/ 115628	ATER RESOUR 725 Summer SALEM, O	F OREGON CES DEPARTN r St. N.E. Ste. A R 97301-4172 (503) 986-0904 (fax)	IENT INVOICE #		
RECEIVED FROM: The Gorden and Sherry APPLICATION R-8807						
BY: <u>Paire; Joint Living</u> '			PERMIT			
CASH:	CHECK	OTHER: (IDENTIFY))	TRANSFER		
	70			TOTAL REC'D	\$830,00	
1083	TREASURY	4170 WRD	MISC CASH AC	СТ		
0407	COPIES				\$	
	OTHER:	(IDENTIFY)			\$	
0243 I/S	Lease 02	244 Muni Water Mgmt.	Plan 0245	Cons. Water		
		4270 WRD	OPERATING A	CCT		
	MISCELLANEO	US	46111			
0407	COPY & TAPE F				\$ \$	
0410	RESEARCH FE				ծ \$	
0408	MISC REVENU	. ,			\$	
TC162	DEPOSIT LIAB.			·	\$	
0240	EXTENSION OF	TIME		-		
	WATER RIGHTS		EXAM FEE		RECORD FEE	
0201	SURFACE WAT		\$380.00	0202	\$450.00	
0203	GROUND WATE	ER	\$	0204	\$	
0205	TRANSFER		\$	-		
	WELL CONSTRUCTION EXAM FEE			-	LICENSE FEE	
0218	WELL DRILL CONSTRUCTOR		\$	0219	\$	
	LANDOWNER'S	S PERMIT		0220	\$	
	OTHER	(IDENTIFY)				
0536	TREASURY	0437 WEL	L CONST. STAR	t fee		
0211	WELL CONST S	START FEE	\$	CARD		
0210	MONITORING	WELLS	\$	CARD		
	OTHER	(IDENTIFY)				
0607	TREASURY	0467 HYDE	RO ACTIVITY	LIC NUMBER		
0233		SE FEE (FW/WRD)		<u></u>	\$	
0231		SE FEE (FW/WRD)			\$	
0201					\$	
	HYDRO APPLIC					
	TREASURY	UTH	R / RDX	<u>a (1995) (1997)</u>		
FUND _						
OBJ. CO	DE	VENDOR #			<u></u>	
DESCRI	PTION				\$	
	L15626 istribution - White Co	DATED:	24/15 BY: 2	Monopy - File, Buff Co	Helen py - Fiscal	

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