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

No

This is the checklist used by WRD staff

Application 5-88095 County Jackson Priority Date 8- June - 15
Township 365 Range 4W Section 20
Amount 7 af Use Irrigation WM Dist. # 13
Applicant Name Janet & Timothy Evans
Receipt No. 116127 — Caseworker Assigned:   Barbe Kim   Kerri
Contact info: Applicant/Organization Name and Mailing Address
Signature (in ink) of <i>all</i> 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:
☐ 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 <i>each</i> 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	d)		
☐ Form M (Municipal or Quasi-Munici	ipal)		
☐ Spring Description Sheet (if source is	s a spring)		
A completed Land-Use Form or receipt signal Please be certain that the Land-Use form list be within the past 12 months.	ned and dated by	y the appropriate planning lved and all uses propose	g department officials. ed. Date of signature must
A Legal Description 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 be	other governmen ovide this inforr	t survey description. A conation, or applicant may	opy of the deed, land
The proposed source IS/IS NOT circle o NOTE: If it is withdrawn under ORS 538, the accept the application and a negative IR will	ien return ap <mark>pl</mark> ic	withdrawn from further a vation and fees. If it is wi	appropriation. thdrawn by other means,
The map must meet all the minimum require	ements of OAR	690-310-0050.	
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, we Multiple wells shall be uniquely labe Reference corner on map North Directional Symbol Vumber of acres per ¼-¼ if for irrigate For a standard reservoir application to must be prepared by a CWRE	ly identified mile (1"= 1320 f ll or dam by refe lled, and identifie	t.); examples: 1" = 100 ft rence to a recognized pul ed on well logs if existing agriculture	., 1" = 200 ft. blic land survey corner. g.
Fees: Base Fee  1° 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	5 450 5 5 5 5 5 5	Permit Recording Fees Mitigation Fee Rec Fee Total Rec Fee Paid	5 450 5 5 <u>450</u>
Exam Fee Total Exam Fee Paid	s 440 s 640	Amount Returned	s 111000
Reviewed by: Jeffrey	Date:	9-June-1	<b>\$</b>

## STATE OF OREGON

## WATER RESOURCES DEPARTMENT

RECEIPT# 116127

725 Summer St. N.E. Ste. A SALEM, OR 97301-4172 3) 986-0900 / (503) 986-0904 (fax)

INVOICE # \_\_

EIVED FRO	m: Tanet	Ev	ans		APPLICATION	5-8809
Timothy Evans				5	PERMIT	
		•			TRANSFER	
H: C 1		OTHER: (III	DENTIFY)	Е	TOTAL REC'D	61 110 (
	X 3/6	Ш			TOTAL REC D	\$1,110.0
1083	TREASURY	4170	WRD M	ISC CASH AC	CT	
0407	COPIES					\$
	OTHER:	(IDENTIFY)				\$
0243 I/S Le	ease 0244	4 Muni Wat	er Mgmt. Pla	an 0245	Cons. Water	
		4270	WRD 0	PERATING A	CCT	
	MISCELLANEOUS	S		46111		
0407	COPY & TAPE FE	ES		10111		\$
0410	RESEARCH FEES	3				\$
0408	MISC REVENUE:	(IDENTIF	Y)			\$
TC162	DEPOSIT LIAB. (	IDENTIFY)				\$
0240	EXTENSION OF T	IME				\$
	WATER RIGHTS:			EXAM FEE	1	RECORD FE
0201	SURFACE WATER	3		\$ 660.00	0202	\$450.0
0203	GROUND WATER	t		\$	0204	\$
0205	TRANSFER			\$	†	
	WELL CONSTRU	CTION		EXAM FEE		LICENSE FE
0218	WELL DRILL CON		R	\$	0219	\$
	LANDOWNER'S F				0220	\$
	OTHER	(IDENTI	FY)			-
0536	TREASURY	0437	WELL	CONST STAR	T EEE	
0211	WELL CONST ST		,,,		CARD	
0210	MONITORING WE			\$	CARD	
0210				Ψ	UATIO .	
	OTHER	(IDENTI	FY)			
0607	TREASURY	0467	HYDRO	ACTIVITY	LIC NUMBER	
0233	POWER LICENSE	FEE (FW/	WRD)			\$
0231	HYDRO LICENSE	FEE (FW/	WRD)			\$
	HYDRO APPLICA	TION				\$
	TREACURY		OTHER	) / PNY		
<del>222-11-12-12</del>	TREASURY		OTHER	I / RUA		
FUND		_ TITLE				
OBJ. COD	DE	_ VENDO	R#			
						\$
DESCRIP	LION					

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