Alternate Reservoir Application Completeness Checklist This is the checklist used by WRD staff _County_Lave Application R-8803 Priority Date 24-Jun-15 Township 205 Range 30 Section 11 Taxlot 500 Use MV | Heur Poco Caseworker Barbra Amount (AF) . 878a C Watermaster 2 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? \Box YES \Box 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 If YES, can conditions be applied to mitigate the impact? \(\subseteq YES \) \(\subseteq NO \) \(\text{If NO, return the application.} \) 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: 6.672 A. For

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.)

vironmental 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 **

1/4/4'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\$ 3.50 Permit Recording Fee\$ 4.50 plus\$

plus\$

Total Fees \$ 5 30 . cc Date: 24-Super - | 5 Revised 2011-3-3

RECEIVED BY OWRD

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 116347

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

INVOICE # _____

SEIVED FROM: <u>Kristine D. Harrold</u> Travis Harrold SH: CHECK OTHER: (IDENTIFY)				APPLICATION PERMIT TRANSFER	R-88 _E
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0203	GROUND WATER		\$	0204	\$
0205	TRANSFER		\$		
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	LANDOWNER'S PERMIT			0220	\$
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