

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R-88110 County Umat
Priority Date 17-July Township 25 Range 20E Section 10 Taxlot 900
Use Multipurpose Caseworker Barb
Amount (AF) 3.7 af Watermaster J

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? YES 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 NO
If YES, can conditions be applied to mitigate the impact? YES NO **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: _____
 - 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
 - Environmental 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'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\$ 350 Permit Recording Fee\$ 450
plus\$ 120
plus\$ _____
- Total Paid \$ 920 Total Fees \$ 920
Completeness Check by: Jeffrey Date: 17-July-15 Revised 2011-3-3

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **116619**

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

INVOICE # _____

RECEIVED FROM: Andersen Ranches
BY: Larry D. Anderson

APPLICATION	<u>See Below</u>
PERMIT	
TRANSFER	

CASH: CHECK: 6741 OTHER: (IDENTIFY)

TOTAL REC'D \$ 1780.00

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 4611 R-88110 - 0201 470.00, 450.00
0407 COPY & TAPE FEES \$ _____
0410 RESEARCH FEES \$ _____
0408 MISC REVENUE: (IDENTIFY) _____ \$ _____
TC162 DEPOSIT LIAB. (IDENTIFY) _____ \$ _____
0240 EXTENSION OF TIME \$ _____

WATER RIGHTS:

0201 SURFACE WATER	EXAM FEE \$ <u>380.00</u>	0202	RECORD FEE \$ <u>900.00</u>
0203 GROUND WATER	\$ _____	0204	\$ _____
0205 TRANSFER	\$ _____		

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR	EXAM FEE \$ _____	0219	LICENSE FEE \$ _____
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 (FWWRD) \$ _____
0231 HYDRO LICENSE FEE (FWWRD) \$ _____
HYDRO APPLICATION \$ _____

TREASURY OTHER / RDX

FUND _____ TITLE _____
OBJ. CODE _____ VENDOR # _____
DESCRIPTION _____ \$ _____

RECEIPT: **116619** DATED: 7/17/15 BY: Mark [Signature]