## Alternate Reservoir Application Completeness Checklist This is the checklist used by WRD staff

Application R-88/42 County Bento Priority Date 27-Oct-15 Township 138 Kange 5 WSeetion 30 Taxlot 100 Use Multi-Porpose Caseworker Kim Amount (AF) Watermaster 16 Minimum Requirements (ORS 537.409) Completed Watermaster review sheet signed and dated by Watermaster. Will the reservoir injure an existing water right? \( \text{YES} \) If YES, can conditions be applied to mitigate the injury? \( \text{YES} \) \( \text{If NO, return the application.} \) Did'the watermaster determine when water is available for the proposed use? 

VES 

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? PYES OF 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. Federal Lando 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: 3.5 **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.) 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 \*\*
1/4/4'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 Fee\$ 350 Permit Recording Fee\$ plus\$ 120 plus\$ Total Fees \$ 920 Date: 27-0-+- | Revised 2011-3-3 Total Paid \$ 920

## STATE OF OREGON

## WATER RESOURCES DEPARTMENT

RECEIPT # 117781

725 Summer St. N.E. Ste. A

SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-0904 (fax) INVOICE # \_\_

ECEIVED FR Y:	rom: Dardra Bloss Wildlife Service	us Fish C	APPLICATION PERMIT	R-88142
ASH:	CHECK# OTHER: (IDENTIFY	,	TRANSFER	
	TY 1109 -	·	TOTAL REC'D	\$920,00
1083	TREASURY 4170 WRD	MISC CASH AC	CT	
0407	COPIES			\$
	OTHER: (IDENTIFY)			\$
0243 I/S	Lease 0244 Muni Water Mgmt.	Plan 0245 0	Cons. Water	
	4270 WRD	OPERATING AC	CT	
	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		RECORD FEE
0201	SURFACE WATER	\$470.00	0202	\$ 450,00
0203	GROUND WATER	\$	0204	\$
0205	TRANSFER	\$	020 .	
0200		EXAM FEE		LICENSE FEE
2212	WELL CONSTRUCTION	\$	0219	\$
0218	WELL DRILL CONSTRUCTOR	Φ	0220	\$
	LANDOWNER'S PERMIT		0220	Ψ
	OTHER (IDENTIFY)			
0536	TREASURY 0437 WEL	L CONST. START	FEE	
0211	WELL CONST START FEE	\$	CARD	#
0210	MONITORING WELLS	\$	CARD	#
	OTHER (IDENTIFY)			
0607	TREASURY 0467 HYDI	RO ACTIVITY L	IC NUMBER	
0233	POWER LICENSE FEE (FW/WRD)			\$
0231	HYDRO LICENSE FEE (FW/WRD)			\$
	HYDRO APPLICATION			\$
		ER / RDX		
	_ TREASURY OTH			
FUND _	TREASURY OTH			
	75.3.40,00			

RECEIPT: 11/781

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