

# Standard Application Completeness Checklist

Minimum Requirements (OAR 690-310-0040)(ORS 537.400)

This is the checklist used by WRD staff

Yes  No

Application G-18186 County Clatsop Priority Date 12/30/15

Township 5S Range 1E Section 9

Amount 650 gpm Use Nursery 27.3 acres WM Dist. # 20

Applicant Name David Sather

Receipt No. 118453 Caseworker Assigned:  Barbe  Kim  Kerri

- Contact info: Applicant/Organization Name and Mailing Address
- Signature (in ink) of all 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? Y  N
  - 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 each 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)
  - Form M (Municipal or Quasi-Municipal)
  - Spring Description Sheet (if source is a spring)
- A completed **Land-Use Form** or receipt signed and dated by the appropriate planning department officials. *Please be certain that the Land-Use form lists all lands involved and all uses proposed. Date of signature must be within the past 12 months.*
- A **Legal Description** of all the properties involved where water is diverted, crossed, and used. The Legal description includes a metes and bounds or other government survey description. A copy of the deed, land sales contract or title insurance policy can provide this information, or applicant may submit a lot book report prepared by a title company. Copies of tax bills are not acceptable.
- The proposed source **IS / IS NOT** (circle one) restricted or withdrawn from further appropriation. *NOTE: If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.*

- The **map** must meet all the minimum requirements of OAR 690-310-0050.
  - Township, Range, Section
  - Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU)
  - Place of use, 1/4-1/4's and tax lot clearly identified
  - Even map scale not less than 4" = 1 mile (1" = 1320 ft.); examples: 1" = 100 ft., 1" = 200 ft.
  - Location of *each* diversion point, well or dam by reference to a recognized public land survey corner. Multiple wells shall be uniquely labeled, and identified on well logs if existing.
  - Reference corner on map
  - North Directional Symbol
  - Number of acres per 1/4-1/4 if for irrigation, nursery, or agriculture
  - For a ~~standard~~ reservoir application to store  $\geq 9.2$  acre feet AND having a dam height  $\geq 10$  feet, map must be prepared by a CWRE

<b>□ Fees:</b>			
Base Fee	\$ <u>1150</u>	Permit Recording Fees	\$ <u>450</u>
1 <sup>st</sup> CFS @ \$300	\$ <u>300</u>	Mitigation Fee	\$ <u>0</u>
<u>1</u> add'l CFS @ \$300 ea	\$ <u>300</u>	Rec Fee Total	\$ <u>450</u>
___ AF up to 20 AF @ \$30 ea	\$ _____	Rec Fee Paid	\$ <del>450</del>
___ add'l AF @ \$1 ea	\$ _____		
<u>1</u> add'l <input checked="" type="checkbox"/> pod/poa <input type="checkbox"/> use @ _____ ea	\$ <u>300</u>		
___ add'l res @ \$125 ea	\$ _____		
Exam Fee Total	\$ <u>2050</u>	Total Fees	\$ <u>2500</u>
Exam Fee Paid	\$ _____	Paid	\$ <del>2200</del> <u>2200</u>
		Amount Due	\$ _____

Reviewed by:  Date: 12/30/15

**STATE OF OREGON  
WATER RESOURCES DEPARTMENT**

RECEIPT # **118453**

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

INVOICE # \_\_\_\_\_

RECEIVED FROM: Serendipity Nursery, Inc.  
BY: \_\_\_\_\_

APPLICATION	G-1886
PERMIT	
TRANSFER	

CASH:  CHECK:#  16907 OTHER: (IDENTIFY)

TOTAL REC'D \$ 2,200.00

**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**

0407	COPY & TAPE FEES	4611	\$
0410	RESEARCH FEES		\$
0408	MISC REVENUE: (IDENTIFY)		\$
TC162	DEPOSIT LIAB. (IDENTIFY)		\$
0240	EXTENSION OF TIME		\$

**WATER RIGHTS:**

0201	SURFACE WATER	EXAM FEE	0202	RECORD FEE
0203	GROUND WATER	\$	0204	\$ 150.00
0205	TRANSFER	\$ 2,050.00		

**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 (FW/WRD)		\$
0231	HYDRO LICENSE FEE (FW/WRD)		\$
	HYDRO APPLICATION		\$

**TREASURY OTHER / RDX**

FUND \_\_\_\_\_ TITLE \_\_\_\_\_ **RECEIVED**  
OBJ. CODE \_\_\_\_\_ VENDOR # \_\_\_\_\_ **OVER THE COUNTER**  
DESCRIPTION \_\_\_\_\_

RECEIPT: **118453**

DATED: 12/30/15 BY: [Signature]

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