

WATER RESOURCES DEPARTMENT

RECEIPT # 119087

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

INVOICE # _____

RECEIVED FROM: Robert T Weber Jr.
BY: Glenda M Weber

APPLICATION	R-8891
PERMIT	
TRANSFER	

CASH: CHECK:# 496 OTHER: (IDENTIFY)

TOTAL REC'D \$ 890.00

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 \$ 440.00 0202 RECORD FEE \$ 450.00
0203 GROUND WATER	\$ 0204 \$
0205 TRANSFER	\$
WELL CONSTRUCTION	
0218 WELL DRILL CONSTRUCTOR	EXAM FEE \$ 0219 \$
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 _____ \$ _____

RECEIVED
OVER THE COUNTER

RECEIPT: 119087

DATED: 3.2.16 BY: *M. H.*

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R-88191 County Polk
Priority Date 3-2-2016 Township 2S Range 5N Section 3 Taxlot 1500/1505
Use MULTI-PURPOSE Caseworker LISA
Amount (AF) 3 Watermaster 16

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 0

Total Quantity of Storage Requested: 3 AC/FT

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\$ 90

plus\$ 440

Total Paid \$ 890⁰⁰

Total Fees \$ 890⁰⁰

Completeness Check by: _____

Date: 3/3/2016

Revised 2011-3-3