STATE OF OREGON

WATER RESOURCES DEPARTMENT 725 Summer St. N.E. Ste. A RECEIPT # 119111 INVOICE # _ **SALEM, OR 97301-4172** (503) 986-0900 / (503) 986-0904 (fax) **APPLICATION** RECEIVED FROM: PERMIT TRANSFER CASH: CHECK:# OTHER: (IDENTIFY) TOTAL REC'D 4170 WRD MISC CASH ACCT 1083 TREASURY 0407 COPIES \$ OTHER: (IDENTIFY) 0244 Muni Water Mgmt. Plan____ 0245 Cons. Water 0243 I/S Lease 4270 WRD OPERATING ACCT **MISCELLANEOUS** 0407 **COPY & TAPE FEES** \$ 0410 RESEARCH FEES \$ 0408 MISC REVENUE: (IDENTIFY) TC162 DEPOSIT LIAB. (IDENTIFY) 0240 EXTENSION OF TIME RECORD FEE WATER RIGHTS: **EXAM FEE** 450.00 0201 SURFACE WATER 0202 0204 0203 **GROUND WATER** 0205 **TRANSFER** LICENSE FEE **EXAM FEE** WELL CONSTRUCTION 0219 \$ \$ 0218 WELL DRILL CONSTRUCTOR \$ 0220 LANDOWNER'S PERMIT OTHER (IDENTIFY) 0536 TREASURY 0437 WELL CONST. START FEE CARD # 0211 WELL CONST START FEE CARD# 0210 MONITORING WELLS \$ OTHER (IDENTIFY) 0607 TREASURY 0467 HYDRO ACTIVITY LIC NUMBER POWER LICENSE FEE (FW/WRD) 0233 \$ HYDRO LICENSE FEE (FW/WRD) 0231 \$ HYDRO APPLICATION

OVER THE COUNTER FUND

VENDOR# OBJ. CODE DESCRIPTION

RECEIPT:

\$

Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal

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

Application R-88 193 County Marcon 12
Priority Date 4 - Mar - 16 Township 85 Range 4W Section 13 Taxlot 20
Use multarpos - Caseworker Lisa
Amount (AF) 6 a C Watermaster 6
Amount (Ar) 6 4 watermaster 6
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 INO 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. Biologist sign-off
Will the reservoir pose a significant detrimental impact to an existing fishery resource? TYES NO. If NO. return the application
If YES, can conditions be applied to mitigate the impact? 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 waterCannot 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.
Myst 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 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\$ 350 Permit Recording Fee\$ 450
plus\$ /8 O
plus\$
Total Paid S 980 Total Fees \$ 980
Completeness Check by: Date: 4-Nav-110 Revised 2011-3-3