

WATER RESOURCES DEPARTMENT

RECEIPT # 119306

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

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

RECEIVED FROM: Timothy D. Foley  
BY: \_\_\_\_\_

APPLICATION	R-88198
PERMIT	
TRANSFER	

CASH:  CHECK:# 254 OTHER: (IDENTIFY)

TOTAL REC'D \$ 860.00

**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**

<b>MISCELLANEOUS</b>		<u>4611</u>	
0407	COPY & TAPE FEES	\$	
0410	RESEARCH FEES	\$	
0408	MISC REVENUE: (IDENTIFY)	\$	
TC162	DEPOSIT LIAB. (IDENTIFY)	\$	
0240	EXTENSION OF TIME	\$	
<b>WATER RIGHTS:</b>			
0201	SURFACE WATER	EXAM FEE \$ <u>410.00</u>	0202 RECORD FEE \$ <u>450.00</u>
0203	GROUND WATER	\$	0204 \$
0205	TRANSFER	\$	
<b>WELL CONSTRUCTION</b>			
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	_____		\$

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DATED: 3/28/16 BY: Carlos O. Temer

# Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R-88198 County Douglas  
Priority Date 28-Mar-16 Township 26S Range 6W Section 22 Taxlot 100  
Use Multi purpose Caseworker Lisa G.  
Amount (AF) 1.25 Watermaster PKS

## 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: 1.25
- 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'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\$ 40  
plus\$ \_\_\_\_\_

Total Paid \$ 860

Total Fees \$ 860

Completeness Check by: Jeffrey

Date: \_\_\_\_\_

Revised 2011-3-3