## STATE OF OREGON WATER RESOURCES DEPARTMENT

RECEIPT # 119376

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

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

CEIVED FROM: Shawn Keating						PERM TRANSI		
H: (	CHECK:#	OTHER: (IDI	ENTIFY)		1	OTAL RE		\$1,900
1083	TREASURY	4170	WRD N	IISC CASH	ACC	T		
0407	COPIES							\$
	_ OTHER: (	IDENTIFY)						\$
0243 I/S L	ease 0244	Muni Water	Mgmt. Pl	an	0245 C	ons. Wate	r	
				PERATING				
<u> </u>	MISCELLANEOUS	;	<b>山</b>	Lell				
0407	COPY & TAPE FEE	ES	-1	w				\$
0410	RESEARCH FEES							\$
0408	MISC REVENUE:	(IDENTIFY)	)					\$
TC162	DEPOSIT LIAB. (II	DENTIFY)					_	\$
0240	EXTENSION OF T	IME						\$
	WATER RIGHTS:			EXAM FE	=			RECORD FE
0201	SURFACE WATER			\$	_	0202		\$
0203	GROUND WATER				0.00			\$ 4 50.0
0205	TRANSFER			\$ 1,950	,,,,,,	, 0204		<u> </u>
0203				EXAM FE	E			LICENSE FE
	WELL CONSTRUC			\$	_	0219		\$
0218	WELL DRILL CON			Ψ		0220		\$
	LANDOWNER'S P	EHMII				0220		
	OTHER	(IDENTIF	Y)					
0536	TREASURY	0437	WELL	CONST. ST	ART	FEE		
0211	WELL CONST STA	RTFEE		\$		C	ARD#	
0210	MONITORING WE	LLS		\$		CA	ARD#	
	OTHER	(IDENTIF	Y)			-		
0607	TREASURY	0467	HYDRO	ACTIVITY	, EI	C NUMBE	R	
0233	POWER LICENSE				T			\$
0231	HYDRO LICENSE	•	,					\$
0201	HYDRO APPLICAT	,	110)		<b></b>			\$
L	TREASURY	<u> </u>	OTHER	/ RDX				
FUND		TITLE _			_			
OBJ. COD	)E	VENDOR	#		_			
DESCRIP	TION				_			\$
					_	_		

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Standard Application Completeness Checklist  Minimum Requirements (OAR 690-310-0040)(ORS 537,400)  This is the checklist used by WRD staff	
Application G-18275 County Clack Priority Date 4. Apr-16	
Township 45 Range 2E Section 5	
Amoun 0.0825 Use Nurser WM Dist. # 70  Applicant Name Richard Vasquez / JSRR Fovestment, LLC  Receipt No. 119374 Caseworker Assigned: Barbe   Kim	
Applicant Name Richard Vasquez JJSRR Forestment, LLC	
Receipt No. 119374 Caseworker Assigned: Barbe	
Contact info: Applicant/Organization Name and Mailing Address	
Signature (in ink) of <i>all</i> 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? YN	
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 will be for the use of the stored water under the PROPOSED Reservoir application, Exp. Secondary (E)	ít
☐ 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	
mount 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)	
( randay tina supplemental programs, common as 2 miles)	
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.")	

Ш	Supplemental data sheets enclosed (if neede	·d)								
	☐ Form M (Municipal or Quasi-Munic	•								
١	☐ Spring Description Sheet (if source i	s a spring)								
4	A completed <b>Land-Use Form</b> or receipt signed and dated by the appropriate planning department officials. <i>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.</i>									
4	A Legal Description of all the properties in description includes a metes and bounds or sales contract or title insurance policy can prepared by a title company. Copies of tax be	other governmen rovide this infort	t survey description. A co nation, or applicant may s	opy of the deed, land						
	The proposed source <u>IS / IS NOT</u> (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 <b>map</b> 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 $(1'' = 1320 \text{ ft.})$ ; examples: $1'' = 100 \text{ ft.}$ , $1'' = 200 \text{ ft.}$									
	Location of <i>each</i> 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									
	The section of the section									
	Fees:									
	Base Fee	5 11500	Permit Recording Fees	5 4SO						
	1° CFS @ <u>\$300</u>	S 300	Mitigation Fee	\$						
	add'1 CFS @ \$300 ea	\$								
	AF up to 20 AF @ <u>\$30 ea</u> add I AF @ <u>\$1 ea</u>	\$	Rec Fee Total	5 450						
	add I Tpod/poa Tuse @ ea	<b>S</b>	Rec Fee Paid	5 450						
	add'l res @ <u>\$125 ea</u>	5								
	Exam Fee Total	5 1450	Total Fees	5.1900						
	Exam Fee Paid	5 1450	Paid	5 1900						
			Amount Due	S						
р	viewed by: Jethry	**	7-4 11							
14.	newed by.	Date:	7-Kpr-16	1809 Pillows						