

## WATER RESOURCES DEPARTMENT

RECEIPT # 119960

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

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

RECEIVED FROM:

Amy J. Grant

BY:

APPLICATION

G-18303

PERMIT

TRANSFER

CASH:

☐

CHECK: #

1028

OTHER: (IDENTIFY)

☐

TOTAL REC'D

\$1,900.00

## 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

46111

0407 COPY &amp; TAPE FEES

\$

0410 RESEARCH FEES

\$

0408 MISC REVENUE: (IDENTIFY)

\$

TC162 DEPOSIT LIAB. (IDENTIFY)

\$

0240 EXTENSION OF TIME

\$

## WATER RIGHTS:

## EXAM FEE

## RECORD FEE

0201 SURFACE WATER

\$

0202

\$

0203 GROUND WATER

\$

0204

\$150.00

0205 TRANSFER

\$

## WELL CONSTRUCTION

## EXAM FEE

## LICENSE FEE

0218 WELL DRILL CONSTRUCTOR

\$

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 (FW/WRD)

\$

0231 HYDRO LICENSE FEE (FW/WRD)

\$

HYDRO APPLICATION

\$

## TREASURY

## OTHER / RDX

FUND

TITLE

OBJ. CODE

VENDOR #

DESCRIPTION

\$

RECEIPT:

119960

DATED:

5/27/16

BY:

Courtney Wushnick

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

**E-2****Standard Application Completeness Checklist**

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

Yes No

This is the checklist used by WRD staff

Application G-18303 County Jackson Priority Date 5/27/16  
Township 38S Range 2E Section 23  
Amount 05 cfs Use Nursery WM Dist. # 13  
Applicant Name R WILLIAM LAWSON COSSE BOOM  
Receipt No. 119960 Caseworker Assigned: ☒ Barbe ☐ Kim ☐ Lisa

- ☒ 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)

*rec'd but not sure sufficient*

☒ 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

☐ **Fees:**

|                                                                                                    |                 |                       |                           |
|----------------------------------------------------------------------------------------------------|-----------------|-----------------------|---------------------------|
| Base Fee                                                                                           | \$ <u>1,150</u> | Permit Recording Fees | \$ <u>450</u>             |
| 1 <sup>st</sup> CFS @ \$300                                                                        | \$ <u>300</u>   | Mitigation Fee        | \$ _____                  |
| ____ add'l CFS @ \$300 ea                                                                          | \$ _____        |                       |                           |
| ____ AF up to 20 AF @ \$30 ea                                                                      | \$ _____        | Rec Fee Total         | \$ <u>450</u>             |
| ____ add'l AF @ \$1 ea                                                                             | \$ _____        | Rec Fee Paid          | \$ <u>150</u>             |
| <u>1</u> add'l <input checked="" type="checkbox"/> pod/poa <input type="checkbox"/> use @ _____ ea | \$ <u>300</u>   |                       |                           |
| ____ add'l res @ \$125 ea                                                                          | \$ _____        |                       |                           |
|                                                                                                    |                 |                       | <u>2200</u>               |
| Exam Fee Total                                                                                     | \$ <u>1750</u>  | Total Fees            | \$ <u><del>2200</del></u> |
| Exam Fee Paid                                                                                      | \$ <u>1750</u>  | Paid                  | \$ <u>1900</u>            |
|                                                                                                    |                 | Amount Due            | \$ <u>300</u>             |

Reviewed by: Scott CSK Date: 5/31/16