

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **120713**

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

INVOICE # _____

RECEIVED FROM: Nicole F Miller
BY: Todd A Miller

APPLICATION	88270
PERMIT	
TRANSFER	

CASH: ☐ CHECK: # **1702** ☒ OTHER: (IDENTIFY) ☐

TOTAL REC'D \$ **1,100.00**

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 & TAPE FEES \$
0410 RESEARCH FEES \$
0408 MISC REVENUE: (IDENTIFY) \$
TC162 DEPOSIT LIAB. (IDENTIFY) \$
0240 EXTENSION OF TIME \$

WATER RIGHTS:

0201 SURFACE WATER (Alt. Res) \$ **650.00** 0202 \$ **450.00**
0203 GROUND WATER \$ 0204 \$
0205 TRANSFER \$

WELL CONSTRUCTION

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: **120713**

DATED: **7/28/16** BY: Courtney L. Smith

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

7-28-16 Application R-88270 County LINN
Priority Date 7-13-16 Township 9S Range 3E Section 3S Taxlot 2400
Use Multipurpose Caseworker MICHAEL KIM
Amount (AF) 9.45 AF Watermaster PLAIN

RECEIVED BY OWRD

JUL 28 2016

SALEM, OR

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: 9.45 AF

☒ 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\$ 300

plus\$

Total Paid \$ 1100

Total Fees \$ 1100

Completeness Check by: Scott Crea Date: 7-13-16

Mary Bjore 7-28-16

Revised 2011-3-3