

# Standard Application Completeness Checklist

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

Application _____	Township _____
Priority Date _____	Range _____
Use(s) _____	Section _____
Rate _____	POD Loc. _____
County _____	POU Loc. _____

- Applicant/Organization Name, Mailing Address and Telephone Number, application signed in ink.
- Source of water. If stored water, is the stored water component filed out, including a non-expired agreement for stored water must be included. (ORS 537.400)
- Property ownership indicated.
  - If applicant does not own all the land, the affected landowner's name and mailing address must be listed.
  - If applicant does not own all the land, a 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.
- ~~Groundwater development section (Page 2, Section 3 and/or Page 3, Section 2) or a well log report.~~
- Proposed use of water. If supplemental, list primary water right acreage if applicable.
- Enclosed Supplemental Form for each proposed use.
  - Form I (Irrigation)                       Form M (Municipal or Quasi-Municipal)
  - Form R (Mining)                               Form Q (Commercial or Industrial)
  - Spring Description Sheet
- Amount of water from *each* source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF) 150 AF WITH LIVE FLOW  
REFILL COMPONENT
- Period of use

- Water management section (Please estimate if the water system has not been designed).
- Resource Protection Section (Page 6, Section 5).
- Project schedule (If system is already completed, indicate "existing").
- For reservoir applications storing more than 9.2 acre feet, and a dam height of more than 10 feet, preliminary plans and specifications for dam and impoundment are required.
- If the above is statement is checked, the map must be prepared by a CWRE.
- All applicants (or the authorized agent with title or authority if for an organization or corporation), must sign the application in ink.



You must include a Legal description of the property involved that 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 you may submit a lot book report prepared by a title company. The Department will not accept a copy of the tax bill.

- A completed Land-Use Form or receipt signed and dated by the appropriate planning department officials. *Date of signature must be within the past 6 months.* OK
- The map must meet all the minimum requirements of OAR 690-310-0050.

- |   |  |
|---|--|
| <input type="radio"/> Township, Range, Section  | <input type="radio"/> Location of main canals, ditches, pipelines or flumes                              |
| <input type="radio"/> Place of use, 1/4, 1/4's and tax lot clearly identified   | <input type="radio"/> Even map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.) |
| <input type="radio"/> Location of each diversion point well or dam by reference to a recognized public land survey corner | <input type="radio"/> North Directional Symbol   |
| <input type="radio"/> Number of acres per 1/4, 1/4, if irrigation, nursery, or agriculture                                | <input type="radio"/> Other _____  |
| <input type="radio"/> Reference corner on map   |  |
| <input type="radio"/> Each point of diversion coordinate  |  |

Fees: Amount of water requested 150 AF WITH LIVE FLOW REFILL COMPONENT

Base Fee \$ _____	Total Exam Fee \$ <u>840</u>
1st CFS/AF _____	Total Paid \$ <u>650</u>
_____ Addn'l @ _____ = _____	Amount Due \$ <u>190</u> EXAM FEES
Reviewed by <u>HERB MASGAR</u>	Date <u>2-2-2007</u>
<u>503-986-0804</u>	

ONE CHECK  
4 APPLICANTS  
\$ 1310

RECORDING FEE  
\$ 250