

**STATE OF OREGON  
WATER RESOURCES DEPARTMENT**

RECEIPT # **121620**

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

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

RECEIVED FROM: <b>Sebastian Zepeda</b>	APPLICATION <b>B-88304</b>
BY: <b>Pina; DBA Sebastian's Landscaping.</b>	PERMIT _____
CASH: <input type="checkbox"/>	TRANSFER _____
CHECK.# <b>1345</b> <input checked="" type="checkbox"/>	TOTAL REC'D <b>\$ 830.00</b>
OTHER: (IDENTIFY) _____	

**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>		<b>46111</b>	
0407 COPY & TAPE FEES	\$ _____		
0410 RESEARCH FEES	\$ _____		
0408 MISC REVENUE: (IDENTIFY) _____	\$ _____		
TC162 DEPOSIT LIAB. (IDENTIFY) _____	\$ _____		
0240 EXTENSION OF TIME	\$ _____		
<b>WATER RIGHTS:</b>		<b>EXAM FEE</b>	<b>RECORD FEE</b>
0201 SURFACE WATER	\$ <b>380.00</b>	0202	\$ <b>450.00</b>
0203 GROUND WATER	\$ _____	0204	\$ _____
0205 TRANSFER	\$ _____		
<b>WELL CONSTRUCTION</b>		<b>EXAM FEE</b>	<b>LICENSE FEE</b>
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 (FWWRD)	\$ _____
0231 HYDRO LICENSE FEE (FWWRD)	\$ _____
HYDRO APPLICATION	\$ _____

**TREASURY OTHER / RDX**

FUND _____	TITLE _____
OBJ. CODE _____	VENDOR # _____
DESCRIPTION _____	\$ _____

RECEIPT: **121620** DATED: **10-17-10** BY: **Felicio B**

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

Application R-88304 County JACKSON  
 Priority Date 10-17-2016 Township J6C Range 14N Section 28 Taxlot 4000  
 Use MULTY FOREST Caseworker LISA  
 Amount (AF) 1 A/C Watermaster TRAVIS #13

RECEIVED BY OWRD

AUG 02 2016

## Minimum Requirements (ORS 537.409)

SALEM, OR

**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 A/C

**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\$ \_\_\_\_\_ Permit Recording Fee\$ \_\_\_\_\_

plus\$ \_\_\_\_\_

plus\$ \_\_\_\_\_

**Total Paid \$** \_\_\_\_\_

**Total Fees \$** 830

Completeness Check by: \_\_\_\_\_ Date: \_\_\_\_\_

*Revised 2011-3-3*

RECEIVED BY OWRD

OCT 17 2016

SALEM, OR