STATE OF OREGON WATER RESOURCES DEPARTMENT 725 Summer St. N.E. Ste. A RECEIPT # 121742 INVOICE # _ SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-0904 (fax) APPLICATION RECEIVED FROM: PERMIT BY: TRANSFER CASH: THER: (IDENTIFY) TOTAL REC'D 4170 WRD MISC CASH ACCT 1083 TREASURY \$ 0407 COPIES \$ (IDENTIFY) OTHER: 0243 I/S Lease ___ 0244 Muni Water Mgmt. Plan _____ 0245 Cons. Water 4270 WRD OPERATING ACCT MISCELLANEOUS \$ 0407 **COPY & TAPE FEES** \$ 0410 RESEARCH FEES \$ 0408 MISC REVENUE: (IDENTIFY) \$ DEPOSIT LIAB. (IDENTIFY) TC162 \$

	WATER RIGHTS:		EXAM FEE		HECOND FEE
0201	SURFACE WATER	R	\$ 1.480.00	0202	\$ 450.00
0203	GROUND WATER		\$	0204	\$ *
0205	TRANSFER		\$	7	
	WELL CONSTRU	CTION	EXAM FEE		LICENSE FEE
0218	WELL DRILL CON	STRUCTOR	\$	0219	\$
	LANDOWNER'S F	PERMIT		0220	\$
	_ OTHER	(IDENTIFY)			71.
0536	TREASURY	0437 WEL	L CONST. STAF	TIEE	
0211	WELL CONST START FEE		S	CARD#	
0210	MONITORING WELLS			200	
	_ OTHER	(IDENTIFY)	R	ECEIVED	
0607	TREASURY	0467 HYDI		HE COUR	Tree Y
0233	POWER LICENSE	FEE (FW/WRD)	1.00		\$ -11
0231	HYDRO LICENSE FEE (FW/WRD)				\$
	HYDRO APPLICA	TION			\$

RECEIPT:

OBJ. CODE

DESCRIPTION

0240

EXTENSION OF TIME

TREASURY OTHER / RDX

VENDOR #

__ TITLE _

DATED: /C

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

Application Number: R - 88310

Standard Reservoir Application Completeness Checklist

Minimum Requirements
This is the checklist used by WRD staff

County: Benton Township: 125 Range: 5W Section: 31 \$ 32
Amount: 100.0 AF - Use: Irrigation WM Dist # 16 -
Applicant Name: D. D. Agricultural Investment Company, LLC
Receipt Number: 121342 Case Worker: Receipt Number:
Applicant/Organization Name, Mailing Address, and Telephone Number.
All applicants or the applicant's authorized agent (include title or authority if for an organization or corporation), must sign the application in ink. Signature must be an original "wet" signature. Copies cannot be accepted.
Source of water.
The proposed source is or is not (elrcle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.
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 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.
Rroposed use of stored water.
Amount of water from <i>each</i> source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF)
Project schedule (If system is already completed, indicate "existing").
Preliminary plans and specifications including dam height, width, crest width and surface area for each reservoir for all standard reservoir applications

You must include 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 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. 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. Signature must be an original "wet" signature. Copies cannot be accepted.
A map prepared by a CWRE for a standard reservoir application proposing to store more than 9.2 acre feet and having a dam height of more than 10 feet
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 (example: 1" = 100 ft, 1" = 200 ft, etc.) 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 Other Other
Fees: Amount of water requested 100 AF
Base Fee \$ 800 Total Exam Fees \$ 1480
Base Fee \$ 800 Total Exam Fees \$ 1480 Permit Recording Fees \$ 450
Addtnl CFS/ AF @ = Total Paid \$/930 Addtnl POD/POA @ = Amount Due \$/930 Addtnl Use @ = Amount Returned \$
Reviewed by: Jeffey Date: 11/2/2016

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