STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 121782

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

INVOICE # ____

	DM: City of		ene		P	ERMIT ANSFER	7 0	183
H: (X546538	OTHER: (II	JENTIFY)		TOTAL	REC'D	\$3,	225
1083	TREASURY	4170	WRD N	IISC CASH /	ACCT			
0407	COPIES						\$	
····	OTHER: (IDENTIFY))				\$	
0243 I/S L	ease 0244	Muni Wat	er Mgmt. Pl	an 02	45 Cons.	Water		
		4270	WRD C	PERATING	ACCT			
	MISCELLANEOUS	3	4	6111			,	
0407	COPY & TAPE FEI				\$			
0410	RESEARCH FEES	i					\$	
0408	MISC REVENUE:				\$			
TC162	DEPOSIT LIAB. (I				\$			
0240	EXTENSION OF T	IME					\$	
	WATER RIGHTS:			EXAM FEE				CORD F
0201	SURFACE WATER			\$ 2.775	00 02	202	\$ 4	50.
0203	GROUND WATER			\$		204	\$	
0205	TRANSFER			\$				
	WELL CONSTRUC	CTION		EXAM FEE			LIC	ENSE F
0218	WELL DRILL CON	STRUCTO	R	\$	02	219	\$	
	LANDOWNER'S P	ERMIT			02	220	\$	
	OTHER	(IDENTI	FY)					
0536	TREASURY	0437	WELL	CONST. STA	RT FFF	·		
			VV I I V	T +				
0211 0210	WELL CONST START FEE MONITORING WELLS			\$	_	CARD#		
0210	MONITORING WE	LLS		Ф		CARD#		
	OTHER	(IDENTI	FY)					
0607	TREASURY	0467	HYDRO	ACTIVITY	LIC NU	MBER		
0233	POWER LICENSE	FEE (FW/	WRD)	1			\$	
0231	HYDRO LICENSE FEE (FW/WRD)			L		.,	\$	
	HYDRO APPLICAT	TION					\$	
	TREASURY		OTHER	/RDX				:
FUND		TITLE						
	E	_	R#					
- DU. OOD							\$	
DESCRIP								

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Application Number: R-8831 3

Standard Reservoir Application Completeness Checklist

Minimum Requirements
This is the checklist used by WRD staff

County: LANE Township: 185 Range: 5W Section: _ Amount: 19.5 AF Use: Wetland Restoration Dist # 2 / Mike y of Eigene, Shelly Applicant Name: C Receipt Number: 12.178 Case Worker: 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. Coyote Creek 1 The proposed source is or is not (circle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.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. Proposed use of stored water. Amount of water from each source in gallons per minute (GPM), cubic feet per second (CFS), or vacre 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

crossed, and used. The Legal description is survey description. A copy of the deed, lar	Il the properties involved where water is diverted, includes a metes and bounds, or other government and sales contract or title insurance policy can provide book report prepared by a title company. The ax bill.
officials. Please be certain that the Land-U	gned and dated by the appropriate planning department Use form lists all lands involved and all uses proposed. 12 months. Signature must be an original "wet"
A map prepared by a CWRE for a standard acre feet and having a dam height of more	d reservoir application proposing to store more than 9.2 than 10 feet
POU) Place of use, 1/4, 1/4=s and tax lot of Even map scale not less than 4" = 1 Location of each diversion point, w	pelines or flumes (if POA/POD is outside of clearly identified mile (example: 1" = 100 ft, 1" = 200 ft, etc.) rell or dam by reference to a recognized public shall be uniquely labeled, and identified on well
Fees: Amount of water requested _	19.5 AF
Base Fee \$800 —Addtnl CFS/AF @ =	Total Exam Fees \$ 2775 Permit Recording Fees \$ 450 Total Paid \$ 3225 Amount Due \$ 3225
Reviewed by:	Amount Returned \$ Date: 7 - Nov - 10

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