

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **122085**

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

INVOICE # _____

RECEIVED FROM: Hamilton Farms, LLC
BY: _____

APPLICATION # 88340
PERMIT _____
TRANSFER _____

CASH: CHECK: # 5044 OTHER: (IDENTIFY)

TOTAL REC'D \$ 3,050.00

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:

EXAM FEE	
\$ <u>3,050.00</u>	0202
\$ _____	0204
\$ _____	

0201 SURFACE WATER Alt. Res. \$ _____
0203 GROUND WATER \$ _____
0205 TRANSFER \$ _____

RECORD FEE	
\$ _____	
\$ _____	

WELL CONSTRUCTION

EXAM FEE	
\$ _____	0219
\$ _____	0220

0218 WELL DRILL CONSTRUCTOR \$ _____
LANDOWNER'S PERMIT \$ _____
OTHER (IDENTIFY) _____

0536 TREASURY 0437 WELL CONST. START FEE

0211 WELL CONST START FEE \$ _____
0210 MONITORING WELLS \$ _____
OTHER (IDENTIFY) _____

CARD # _____
CARD # _____

0607 TREASURY 0467 HYDRO ADDITION 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: **122085**

DATED: 12/9/14 BY: V Zielinski

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

**OVER RECEIVED
AT THE COUNTER**

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R-88340 County Polk TL
 Priority Date 12/9/2016 Township 9S Range 5W Section 32/33 Taxlot 300/1503
 Use Multi-Purpose Caseworker Barbe Poore
 Amount (AF) 90 Watermaster Joni Plehn #16

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. *Fish screens*
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 H/A 9.0
- Total Quantity of Storage Requested:** 90 Acre-ft
- 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 - *w:ll ems'l Deed to Barbe Poore*
- 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 *H/A*
 plus \$ 2,700
 plus \$ _____

RECORDED

 DEC 09 2016

 WATER RESOURCES DEPT
 SALM. OF OREGON

Total Paid \$ 3,050 Total Fees \$ \$3,050.00
 Completeness Check by: RCJ/KLS Date: _____