## STATE OF OREGON

## WATER RESOURCES DEPARTMENT

RECEIPT # 122198

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

INVOICE # \_

RECEIVED FRO	ME RUSSELL WEBE	)	APPLICATION	6-18419				
BY:			PERMIT	•				
			TRANSFER	20				
CASH: C	CHECK:# OTHER: (IDENTIFY)		TOTAL REC'D	\$1900.00				
				11100				
1083	TREASURY 4170 WRD	MISC CASH	ACCT					
0407	COPIES			\$				
Anticophologicacions	_ OTHER: (IDENTIFY)	*********************	0.0000000000000000000000000000000000000	\$				
0243 I/S Lease 0244 Muni Water Mgmt. Plan 0245 Cons. Water								
4270 WRD OPERATING ACCT								
	MISCELLANEOUS	46111		<u></u>				
0407	COPY & TAPE FEES	1011		\$				
0410	RESEARCH FEES			\$				
0408	MISC REVENUE: (IDENTIFY)	***************************************	- martine and a second	\$				
TC162	DEPOSIT LIAB. (IDENTIFY)	*	*	\$				
0240	EXTENSION OF TIME	<del>Luzininini, joinna</del>		RECORD FEE				
	WATER RIGHTS:	EXAM FEE		\$				
0201	SURFACE WATER	\$	0202	\$ 450.00				
0203	GROUND WATER	\$1450.00	0204	<u> </u>				
0205	TRANSFER	\$		LICENSE FEE				
	WELL CONSTRUCTION	EXAM FEE	0219	\$				
0218	WELL DRILL CONSTRUCTOR	\$	0220	\$				
	LANDOWNER'S PERMIT			LT				
*************	OTHER (IDENTIFY)							
0536	TREASURY 0437 WELL	CONST. STA	RT FEE					
0211	WELL CONST START FEE	\$	CARD #	-				
0210	MONITORING WELLS	\$	CARD #					
************	OTHER (IDENTIFY)	*****************						
0607	TREASURY 0467 HYDR	O ACTIVITY	LIC NUMBER	Charles and Charles				
0233	POWER LICENSE FEE (FW/WRD)		·	\$				
0231	HYDRO LICENSE FEE (FW/WRD)			\$				
*************	HYDRO APPLICATION			\$				
	TREASURY OTHE	R/RDX						
ELIND	TITLE							
-	VENDOR #							
	RESIDENCE CONTROL CONT	*		\$				
DESCRIP	TION							
RECEIPT: 122198 DATED: 12:23-16 BY: Felician B								
Distribution White Copy - Customer, Yellow Copy - Fiscal, Blue Lopy - File, Buff Copy - Fiscal								

## Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff

Applicatio	n 6-18419	County	Traison	Priority Date _	12.23.2016
	365 SEPER Range	16	Section	_	
Amount _	- A	ivinication		·	WM Dist. # 13
		•	1		WIM DISL # 12
		WeVV			
Receipt No	o. 122198 -	Caseworke	r Assigned: □	Barbe	Lisa —
Contac	ct info: Applicant/Organiza	ution Name and	Mailing Address		
<i></i>	ure (in ink) of <i>all</i> applicant zation or corporation).	ts or the applica	ınt`s authorized a	gent (include title or	authority if for an
Proper	ty ownership: Does the ap	plicant own all	the land for the p	roposed project?	(Y)/ N
$\setminus$ If N	lo:				
AAD	The affected landowner's	name and mail	ing address must	be listed	
/_	A signed statement declar access to land crossed by	~			-
PH For a	SW Application: Source o	f water must be	indicated.		
	If the source is stored wat reservoir or include a non NOTE: A surface water ap will be for the use of the st	-expired agreer	nent for stored water the second at the second	ater? (ORS 537.400) une time as a Reserva	oir or Alt Reservoir if it
	If for stored water not und	der contract, is t	the source author	ized under a permit,	certificate, or decree?
<i>F</i> .	Permit or Certificate issue	ed? <u>Y / N</u>	N Per	mit or Certificate#_	
For a	GW Application: Well De	velopment Tab	les completed and	d/or a well log report	included (if existing)
Propo	sed water use				
1	Amount of water from <i>ea</i> Period of use indicated	<i>ch</i> source in GI	PM, CFS, or AF		
PAIG	If for supplemental irrigate (Primary and Supplemental)			ing permit or certifica	nte number listed
Water	Management Section (Est	imates if the wo	uter system has no	ot been designed)	
∬ Resou	rce Protection Section (N/A	A for Groundwa	ater)		
	ll standard reservoir applic width and surface area for e		inary plans and s	pecifications includir	ng dam height, width,
Projec	et schedule (If system is alr	eady completed	l, indicate "existi	ng.")	

	Supplemental data sheets enclosed (if needed)		
~\\X	Form M (Municipal or Quasi-Municipal)		
DIK	☐ Spring Description Sheet (if source is a spring)	,	
1	A completed <b>Land-Use Form</b> or receipt signed and dated by Please be certain that the Land-Use form lists all lands involve within the past 12 months.		-
	A <b>Legal Description</b> of all the properties involved where we description includes a metes and bounds or other governme sales contract or title insurance policy can provide this information prepared by a title company. Copies of tax bills are not acceptable.	nt survey description. A comation, or applicant may s	opy of the deed, land
	The proposed source <u>IS / IS NOT</u> (circle one) restricted on <i>NOTE:</i> If it is withdrawn under ORS 538, then return applied accept the application and a negative IR will be issued.		
	The map must meet all the minimum requirements of OAR	690-310-0050.	
(	Township, Range, Section  Location of main canals, ditches, pipelines or flumes  Place of use, ¼-¼'s and tax lot clearly identified  Even map scale not less than 4" = 1 mile (1"= 1320  Location of each diversion point, well or dam by ref  Multiple wells shall-be uniquely labeled, and identif  Reference corner on map  North Directional Symbol  Number of acres per ¼-¼ if for irrigation, nursery, or  For a standard reservoir application to store ≥ 9.2 acres to the prepared by a CWRE	ft.); examples: 1" = 100 ft erence to a recognized pub- ied on well logs if existing r agriculture	olic land survey corner.
	Fees:	Permit Recording Fees Mitigation Fee Rec Fee Total Rec Fee Paid	\$ \$ \$
	Exam Fee Total \$ S	Total Fees Paid Amount Due	\$ \$ \$
D <sub>O</sub>	viewed by: Date:	12 27. 7516	