

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **122340**

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

INVOICE # _____

RECEIVED FROM: Simple Life Farms Inc
BY: _____

APPLICATION	\$ 18431
PERMIT	
TRANSFER	

CASH: ☐ CHECK: # 1144 OTHER: (IDENTIFY) ☐

TOTAL REC'D \$ 1,900.00

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		RECORD FEE
0201 SURFACE WATER	\$	0202	\$	
0203 GROUND WATER	\$ <u>1,450.00</u>	0204	\$ <u>450.00</u>	
0205 TRANSFER	\$			
WELL CONSTRUCTION		EXAM FEE		LICENSE FEE
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 ACTIV LIC 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: **122340**

DATED: 1/11/17 BY: [Signature]

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

Yes No

This is the checklist used by WRD staff

Application G-18431 County LINN Priority Date 1/11/2017Township 11S Range 1W Section 32Amount 1/2 AF Use _____ WM Dist. # 2Applicant Name Riemer / Simple Life Farms Inc.Receipt No. 122340 Caseworker Assigned: ☐ Barbe ☐ Kim ☒ Lisa☒ Contact info: Applicant/Organization Name and Mailing Address☒ Signature (in ink) of *all* applicants or the applicant's authorized agent (include title or authority if for an organization or corporation).☒ Property ownership: Does the applicant own all the land for the proposed project? Y / N

If No:

☐ The affected landowner's name and mailing address must be listed☐ 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.☒ For a SW Application: Source of water must be indicated.☐ If the source is stored water, is the stored water component filled out and does the applicant own the reservoir or include a non-expired agreement for stored water? (ORS 537.400)*NOTE: A surface water application cannot be filed at the same time as a Reservoir or Alt Reservoir if it will be for the use of the stored water under the PROPOSED Reservoir application, Exp. Secondary (E2).*☐ If for stored water not under contract, is the source authorized under a permit, certificate, or decree?Permit or Certificate issued? Y / N Permit or Certificate # _____☒ For a GW Application: Well Development Tables completed and/or a well log report included (if existing)☒ Proposed water use☐ Amount of water from *each* source in GPM, CFS, or AF☐ Period of use indicated☐ If for supplemental irrigation, primary acreage or underlying permit or certificate number listed
(Primary and Supplemental Irrigation counts as 2 uses)☒ Water Management Section (Estimates if the water system has not been designed)☒ Resource Protection Section (N/A for Groundwater)☒ For all standard reservoir applications: Preliminary plans and specifications including dam height, width, crest width and surface area for each reservoir.☐ Project schedule (If system is already completed, indicate "existing.")

- ☐ Supplemental data sheets enclosed (if needed)
- ☐ Form M (Municipal or Quasi-Municipal)
 - ☐ Spring Description Sheet (if source is a spring)
- ☐ 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.*
- ☐ 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 applicant may submit a lot book report prepared by a title company. Copies of tax bills are not acceptable.
- ☐ The proposed source **IS / IS NOT** (circle one) restricted or withdrawn from further appropriation. *NOTE: 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.*
- ☐ 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, ¼-¼'s and tax lot clearly identified
 - ☐ Even map scale not less than 4" = 1 mile (1" = 1320 ft.); examples: 1" = 100 ft., 1" = 200 ft.
 - ☐ 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 ¼-¼ if for irrigation, nursery, or agriculture
 - ☐ For a standard reservoir application to store ≥ 9.2 acre feet AND having a dam height ≥ 10 feet, map must be prepared by a CWRE
- ☐ **Fees:**
- | | | | |
|---|----------|-----------------------|----------|
| Base Fee | \$ _____ | Permit Recording Fees | \$ _____ |
| 1 st CFS @ \$300 | \$ _____ | Mitigation Fee | \$ _____ |
| ____ add'l CFS @ \$300 ea | \$ _____ | | |
| ____ AF up to 20 AF @ \$30 ea | \$ _____ | Rec Fee Total | \$ _____ |
| ____ add'l AF @ \$1 ea | \$ _____ | Rec Fee Paid | \$ _____ |
| ____ add'l ☐ pod/poa ☐ use @ _____ ea | \$ _____ | | |
| ____ add'l res @ \$125 ea | \$ _____ | | |
| Exam Fee Total | \$ _____ | Total Fees | \$ _____ |
| Exam Fee Paid | \$ _____ | Paid | \$ _____ |
| | | Amount Due | \$ _____ |

Reviewed by: _____ Date: _____