

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **122343**

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

INVOICE # _____

RECEIVED FROM: Steve Price;	APPLICATION: * See Below
BY: Therese Price	PERMIT: _____
CASH: ☐ CHECK: # X 3000 OTHER: (IDENTIFY) ☐	TRANSFER: _____
TOTAL REC'D \$ 11600.00	

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		* R-88351 40111
0407 COPY & TAPE FEES	R-88352	\$ _____
0410 RESEARCH FEES		\$ _____
0408 MISC REVENUE: (IDENTIFY) _____		\$ _____
TC162 DEPOSIT LIAB. (IDENTIFY) _____		\$ _____
0240 EXTENSION OF TIME		\$ _____
WATER RIGHTS:		
0201 SURFACE WATER (ALT RES.)	EXAM FEE	RECORD FEE
0203 GROUND WATER	\$ 700.00	X2 @ 450.00 each \$ 900.00
0205 TRANSFER	\$ _____	0204 \$ _____
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 ACTIVITY LIC NUMBER

0233 POWER LICENSE FEE (FW/WRD)	\$ _____
0231 HYDRO LICENSE FEE (FW/WRD)	\$ _____
HYDRO APPLICATION	\$ _____

TREASURY

FUND _____	TITLE _____
OBJ. CODE _____	VENDOR # _____
DESCRIPTION _____	\$ _____

RECEIPT: **122343**

DATED: **1/12/17**

BY: **[Signature]**

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

**RECEIVED
OVER THE COUNTER**

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application 288352 County Lincoln
Priority Date 1.12.17 Township 4S Range 10W Section 1 Taxlot _____
Use Multi Caseworker Lisa
Amount (AF) .7 Watermaster Henriette

Rond # 2

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.**

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

☒ Total Quantity of Storage Requested: .7 ac

☒ 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

☒ 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\$ _____ Permit Recording Fee\$ _____

plus\$ _____

plus\$ _____

Total Paid \$ _____

Total Fees \$ 800

Completeness Check by: B

Date: 1.12.17

Revised 2011-3-3