

STATE OF OREGON
WATER RESOURCES DEPARTMENT

RECEIPT # **122356**

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

INVOICE # _____

RECEIVED FROM: DORATION FARMS
 BY: LLC

APPLICATION	*SEE BELOW
PERMIT	
TRANSFER	

CASH: CHECK:# 2229 OTHER: (IDENTIFY)

TOTAL REC'D \$ 2650.00

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			
0407	COPY & TAPE FEES	\$	
0410	RESEARCH FEES	\$	
0408	MISC REVENUE: (IDENTIFY)	\$	
TC162	DEPOSIT LIAB. (IDENTIFY)	\$	
0240	EXTENSION OF TIME	\$	
WATER RIGHTS:			
0201	SURFACE WATER	\$	
0203	GROUND WATER	\$	
0205	TRANSFER	\$	
WELL CONSTRUCTION			
0218	WELL DRILL CONSTRUCTOR	\$	
	LANDOWNER'S PERMIT	\$	
	OTHER (IDENTIFY)	\$	

Handwritten notes:
 46111
 * R-88356 - 620.00
 S-88357 - 1130.00
 EXAM FEE \$1750.00
 RECORD FEE \$900.00
 x2 @ 450.00 each

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	\$

**RECEIVED
 OVER THE COUNTER**

TREASURY OTHER / RDX

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

RECEIPT: **122356** DATED: 1/17/17 BY: [Signature]
 Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R-88356 County Multnomah YALMILL
Priority Date 01.17.2017 Township 35 Range 2W Section 36 Taxlot 280
Use Multi Caseworker Farbe
Amount (AF) 9.0 Watermaster Amy Kim or Bob Palm

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: 9.0 af
- 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 \$** 1070 ✓
- Completeness Check by: B Date: 1.17.17 Revised 2011-3-3