

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **122577**

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

INVOICE # _____

RECEIVED FROM: Kristine Miller
BY: _____

APPLICATION	<u>618452</u>
PERMIT	
TRANSFER	

CASH: ☐ CHECK: # 120330 OTHER: (IDENTIFY) ☐

TOTAL REC'D \$ 2,200.00

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)	\$

EXAM FEE
\$
\$ <u>1,750.00</u>
\$
EXAM FEE
\$

RECORD FEE
\$
\$ <u>450.00</u>
LICENSE FEE
\$
\$

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 OTHER / RDX

FUND	TITLE	
OBJ. CODE	VENDOR #	
DESCRIPTION		\$

RECEIPT: **122577**

DATED: 2/16/17

BY: K. Gilinski

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

Standard Application Completeness Checklist

Minimum Requirements (OAR 690-310-0040)(ORS 537.400)

Yes No

This is the checklist used by WRD staff

Application GW 6-18452 County Josephine Priority Date 02.06.2017
 Township 39S Range 8W Section 34
 Amount 1st 25600 Use Nursery WM Dist. # 14
 Applicant Name Valerie Montague
 Receipt No. 122577 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.")

P/A

TBD

- ☐ 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, 1/4-1/4'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 1/4-1/4 if for irrigation, nursery, or agriculture

NA

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

see print out.

☐ Fees:

Base Fee	\$ _____	Permit Recording Fees	\$ _____
1" 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	\$ <u>1100</u>
		Amount Due	\$ _____

Reviewed by: B Date: 2.07.17.