STATE OF OREGON WATER RESOURCES DEPARTMENT 725 Summer St. N.E. Ste. A RECEIPT # 123089 INVOICE # SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-0904 (fax) hre abacher or application PERMIT renbache1 BY: TRANSFER CHECK:# CASH: TOTAL REC'D 00 **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** \$ RESEARCH FEES 0410 \$ MISC REVENUE: (IDENTIFY) 0408 \$ TC162 DEPOSIT LIAB. (IDENTIFY) 0240 EXTENSION OF TIME RECORD FEE WATER RIGHTS: EXAM FEE \$450.0C SURFACE WATER 0202 0201 390.00 0203 GROUND WATER 0204 0205 TRANSFER LICENSE FEE **EXAM FEE** WELL CONSTRUCTION \$ 0219 WELL DRILL CONSTRUCTOR 0218 0220 LANDOWNER'S PERMIT OTHER (IDENTIFY) 0536 TREASURY 0437 WELL CONST. START FEE WELL CONST START FEE 0211 CARD # 0210 MONITORING WELLS \$ CARD# OTHER (IDENTIFY) 0467 HYDRO ACTIVITY 0607 TREASURY LIC NUMBER \$ 0233 POWER LICENSE FEE (FW/WRD) \$ 0231 HYDRO LICENSE FEE (FW/WRD) \$

HYDRO APPLICATION TREASURY OTHER / RDX

_____ TITLE FUND __ OBJ. CODE _ _____ VENDOR # DESCRIPTION

RECEIPT:

DATED:

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

Minimum Requirements (ORS 537.409)

JACKSON,

Priority Date Dy. 06. 1017 Township 365 Range 4W Section 16A Taxlot 1408
Use Multi-P. Caseworker BARBE

Watermaster SHANDO HATNES

2-88389 County

Completed Watermaster review sheet signed and dated by Watermaster.

Will the reservoir injure an existing water right?

YES NO

Amount (AF)

If YES, can conditions be applied to mitigate the injury?

YES INO 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 UNO If YES, can conditions be applied to mitigate the impact? AYES DNO 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: Y 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 ** 1414'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.** Permit Recording Fee\$ plus\$ plus\$ Total Paid \$ 87 **Total Fees \$** Completeness Check by: Revised 2011-3-3