

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **123248**

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

INVOICE # _____

RECEIVED FROM: RICHARD LEE BSCHOFF II	APPLICATION R88395
BY: _____	PERMIT _____
	TRANSFER _____
CASH: <input type="checkbox"/> CHECK:# <input checked="" type="checkbox"/> 421 OTHER: (IDENTIFY) <input type="checkbox"/>	TOTAL REC'D \$ 1400⁰⁰

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:		
0201 SURFACE WATER	EXAM FEE \$ 950⁰⁰	0202 RECORD FEE \$ 450⁰⁰
0203 GROUND WATER	\$ _____	0204 \$ _____
0205 TRANSFER	\$ _____	
WELL CONSTRUCTION		
0218 WELL DRILL CONSTRUCTOR	EXAM FEE \$ _____	0219 LICENSE FEE \$ _____
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 OTHER / RDX

FUND _____	TITLE _____	RECEIVED OVER THE COUNTER
OBJ. CODE _____	VENDOR # _____	
DESCRIPTION _____		

RECEIPT: **123248** DATED: **4-24-17** BY: *[Signature]*

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application RBBAS County POUR
Priority Date 4.24.17 Township 65 Range 6W Section 14 Taxlot 480
Use Multi-P. Caseworker SCOTT GREW
Amount (AF) 5.0 Watermaster JBEL PLANN

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:** 5.0
 - 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 \$ _____
Completeness Check by: [Signature] Date: 4.24.17 Total Fees \$ 950 **OVERPAID**
Revised 2011-3-3