

**STATE OF OREGON  
WATER RESOURCES DEPARTMENT**

RECEIPT # **123486**

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

INVOICE # \_\_\_\_\_

RECEIVED FROM: **ANETTA SIMPSON**  
BY: \_\_\_\_\_

|             |               |
|-------------|---------------|
| APPLICATION | <b>R88413</b> |
| PERMIT      |               |
| TRANSFER    |               |

CASH: ☐ CHECK: # **X 1074** OTHER: (IDENTIFY) ☐

TOTAL REC'D \$ **830.00**

**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 46111**

|                                |    |
|--------------------------------|----|
| 0407 COPY & TAPE FEES          | \$ |
| 0410 RESEARCH FEES             | \$ |
| 0408 MISC REVENUE: (IDENTIFY)  | \$ |
| TC162 DEPOSIT LIAB. (IDENTIFY) | \$ |
| 0240 EXTENSION OF TIME         | \$ |

|                             |                  |      |                    |
|-----------------------------|------------------|------|--------------------|
| <b>WATER RIGHTS:</b>        | <b>EXAM FEE</b>  |      | <b>RECORD FEE</b>  |
| 0201 SURFACE WATER          | \$ <b>380.00</b> | 0202 | \$ <b>450.00</b>   |
| 0203 GROUND WATER           | \$               | 0204 | \$                 |
| 0205 TRANSFER               | \$               |      |                    |
| <b>WELL CONSTRUCTION</b>    | <b>EXAM FEE</b>  |      | <b>LICENSE FEE</b> |
| 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 OTHER / RDX**

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

RECEIPT: **123486**

DATED: **5-22-17** BY: **M. Corn**

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 2-88413 County WACU  
Priority Date 5.22.17 Township 15 Range 46 Section 39 Taxlot 1000  
Use Multi-purpose Caseworker Michelle Scott  
Amount (AF) .6 Watermaster AMY KIM #20

## 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: .6
- ☒ 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 located .....or..... 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 \$ 830  
Completeness Check by: B

Total Fees \$ 830  
Date: 5.23.17

Revised 2011-3-3