

WATER RESOURCES DEPARTMENT

RECEIPT # 123519

725 Summer St. N.E. Ste. A

SALEM, OR 97301-4172

(503) 986-0900 / (503) 986-0904 (fax)

INVOICE #

RECEIVED FROM: COLTS VI, LLC

APPLICATION R88414

BY:

PERMIT

TRANSFER

CASH:

CHECK: #

OTHER: (IDENTIFY)



1028



TOTAL REC'D \$ 4000

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

EXAM FEE

\$ 380.00

0202

RECORD FEE

\$ 20.00

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

OBJ. CODE

VENDOR #

DESCRIPTION

\$

RECEIPT:

123519

DATED:

5-26-17

BY:

V. Carr

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 2-88414 County COLUMBIA
Priority Date 6.7.17 Township 6N Range 3W Section 2500 Taxlot 1408
Use MULTI-P. Caseworker SCOTT
Amount (AF) .75 Watermaster #18

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:** .75 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 ECVD: 6.7.17.
- ☒ **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 \$ 400

Completeness Check by: B

Total Fees \$ 830

Date: 6.7.17

Revised 2011-3-3