

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **124118**

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

INVOICE # _____

RECEIVED FROM: **OWED STINSON PITCAIRN**

APPLICATION: **R88431**

BY: _____

PERMIT

TRANSFER

CASH: ☐ CHECK: # **287** OTHER: (IDENTIFY) ☐

TOTAL REC'D \$ **1070.00**

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

\$ **550.00**

\$

\$

EXAM FEE

\$

RECORD FEE

\$ **526.00**

\$

LICENSE FEE

\$

\$

0536 TREASURY 0437 WELL CONST. START FEE

0211 WELL CONST START FEE

0210 MONITORING WELLS

OTHER

(IDENTIFY) _____

CARD #

CARD #

0607 TREASURY 0467 HYDRO ACTIVITY

LIC NUMBER

0233 POWER LICENSE FEE (FW/WRD)

0231 HYDRO LICENSE FEE (FW/WRD)

HYDRO APPLICATION

RECEIVED

OVER THE COUNTER

TREASURY

OTHER / RDX

FUND

TITLE

OBJ. CODE

VENDOR #

DESCRIPTION

\$

RECEIPT:

124118

DATED:

7-28-17

BY:

MC

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

Alternate Reservoir Application Completeness Checklist

PRIORITY 7
7-31-2017

This is the checklist used by WRD staff

Application R-88471 County Yamhill
Priority Date 7-28-17 Township 35 Range 30 Section 31 Taxlot 1000
Use MULTI-USE Caseworker SCOTT
Amount (AF) 3.5 AF Watermaster JOEL 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 8'

☒ Total Quantity of Storage Requested: 3.5 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 a 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 1/4's clearly identified

☐ Reservoir clearly identified **

☐ Dam or POD (If off channel) Location coordinates referenced to a government landsurvey corner*

If no dam, use coordinates to center of reservoir.**

☐ Fees enclosed? Print page from fee calculator

Total Paid \$ 1070

Total Fees \$ 1070 see printout

Completeness Check by: [Signature]

Date: 4-17-17

Revised 2017-7-6

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