STATE OF OREGON

WATER RESOURCES DEPARTMENT 725 Summer St. N.E. Ste. A RECEIPT # 124207 SALEM, OR 97301-4172 INVOICE # . (503) 986-0900 / (503) 986-0904 (fax) APPLICATION RECEIVED FROM: PERMIT TRANSFER CASH: CHECK:# OTHER: (IDENTIFY) 25697 TOTAL REC'D 4170 WRD MISC CASH ACCT 0407 COPIES \$ OTHER: (IDENTIFY) 0244 Muni Water Mgmt. Plan_____ 0243 I/S Lease . 0245 Cons. Water _ 4270 WRD OPERATING ACCT MISCELLANEOUS 46111 COPY & TAPE FEES 0407 0410 RESEARCH FEES \$ 0408 MISC REVENUE: (IDENTIFY) \$ DEPOSIT LIAB. (IDENTIFY) TC162 EXTENSION OF TIME 0240 RECORD FEE WATER RIGHTS: EXAM FEE \$ 520.00 0201 SURFACE WATER 0202 0203 GROUND WATER 0204 0205 TRANSFER LICENSE FEE WELL CONSTRUCTION **EXAM FEE** 0219 0218 WELL DRILL CONSTRUCTOR 0220 LANDOWNER'S PERMIT OTHER (IDENTIFY) TREASURY 0437 WELL CONST. START FEE 0536 CARD # 0211 WELL CONST START FEE 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 FUND OBJ. CODE VENDOR # DESCRIPTION

DATED:

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

RECEIPT:

Alternate Reservoir Application Completeness Checklist
This is the checklist used by WRD staff Application 1 - 88440 County 10 814.50
replication sounty
Priority Date \$1717 Township 15 Range 44 Section 24 Taxlot 3800
Use Multi-V Caseworker SCOT G.
Amount (AF) 1.5 AF Watermaster David BATES
70 8
Minimum Requirements (ORS 537.409)
/ ⁴ '
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: 1.5 AT
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 ar
crossed by the diversion works. This includes any roads or rights-of-way.)
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 **
□ ¼¼'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.**
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? \(\preceq YES \) \(\preceq NO \) \(\text{If NO, return the application.} \)
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.
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.
Francisco de Printessa francisco de la la
Fees enclosed? Print page from fee calculator
Total Paid \$ \(\text{Total Fees } \)
Completeness Check by: Date: 8.8.17 Revised 2017-8-1