

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **125477**

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

INVOICE # _____

RECEIVED FROM: Guan's Sublimity, LLC	APPLICATION: R-88484
BY: _____	PERMIT: _____
	TRANSFER: _____

CASH: CHECK.# **1099** OTHER: (IDENTIFY)

TOTAL REC'D \$ **1100.00**

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 40111

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

EXAM FEE	
0201 SURFACE WATER	\$ 650.00
0203 GROUND WATER	\$
0205 TRANSFER	\$

RECORD FEE	
0202	\$ 450.00
0204	\$

WELL CONSTRUCTION

EXAM FEE	
0218 WELL DRILL CONSTRUCTOR	\$
LANDOWNER'S PERMIT	\$
0219	\$
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: **125477** DATED: **12/18/17** BY: *[Signature]*

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R-88484 County MARION
 Priority Date 12/18/2017 Township 8S Range 1W Section 27 Taxlot 600
 Use MP Caseworker USA G
 Amount (AF) 10 Watermaster Del P

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: _____
- 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.**

RECEIVED BY OWRD

DEC 18 2017

SALEM, OR

Fees enclosed**? Examination: Base Fee\$ 350 Permit Recording Fee\$ 450
 plus\$ 300
 plus\$ _____ *see attached*

Total Paid \$ 1100 Total Fees \$ 1,100
 Completeness Check by: Scott Date: 6/6/16 Revised 2011-3-3

12/18/17

12/18/17

12/18/17