STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 126167 725 Summer St. N.E. Ste. A SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-0904 (fax)

INVOICE #

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0408	MISC REVENUE: (IDENTIFY)						\$
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0240	EXTENSION OF T	IME					\$
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0203	GROUND WATER			\$	• 1.7.9	0204	\$
0205	TRANSFER .			\$			
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RECEIPT: 126167 DATED: 3/22/8 BY: Thurston - White Conv. - Customer Vallow Conv. - Fiscal Rus Conv. - File Ruff Conv. - Fiscal

Alternate Reservoir Application Completeness Checklist
This is the checklist used by WRD staff Application R-8896 County Yam hill
Priority Date 3 22/18 Township 55 Range 5w Section 33 Taxlot 200
Use Multipupose Caseworker Lisa (Lefter 5 iven
Amount (AF) 50 Watermaster 16 Applica
Minimum Requirements (ORS 537.409)
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
Fotal Quantity of Storage Requested: 50
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.) [Invironmental 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, even scale such as $1'' = 400'$, $1'' = 1000'$, or $1'' = 1320'$ **
Reference corner on map
North Directional Symbol **
1/41/4'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.**
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? PYES DINO If NO, return the application.
Did the watermaster determine when water is available for the proposed use? VES 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.
Wi∥ 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.
Transmitted 19 District many for the 1
Fees enclosed? Print page from fee calculator
Total Paid \$ 2,686.00 Completeness Check by: Date: Revised 2017-8-4
Completeness Check by: E-6- Date: 3/22/18 Revised 2017-8-4