

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **126412**

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

INVOICE # _____

RECEIVED FROM: Benjamin James
BY: Alsha James

APPLICATION	6-18652
PERMIT	
TRANSFER	

CASH: CHECK: # 1196 OTHER: (IDENTIFY)

TOTAL REC'D \$ 2,210.00

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

46111

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

WATER RIGHTS:		EXAM FEE		RECORD FEE
0201	SURFACE WATER	\$	0202	\$
0203	GROUND WATER	\$ <u>1,690.00</u>	0204	\$ <u>520.00</u>
0205	TRANSFER	\$		
WELL CONSTRUCTION		EXAM FEE		LICENSE FEE
0218	WELL DRILL CONSTRUCTOR	\$	0219	\$
	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 (FWWRD)		\$
0231	HYDRO LICENSE FEE (FWWRD)		\$
_____	HYDRO APPLICATION		\$

TREASURY OTHER / RDX

FUND _____ TITLE _____ **RECEIVED**
OBJ. CODE _____ VENDOR # _____ **OVER THE COUNTER**
DESCRIPTION _____ \$ _____

RECEIPT: **126412**

DATED: 4-16-18 BY: [Signature]

E-2

Standard Application Completeness Checklist

Yes No

For use with Groundwater and Surface Water Applications Only

Minimum Requirements (OAR 690-310-0040)(ORS 537.400)

For use by WRD staff only

Application G-18652 County Benton Priority Date 4/16/18

Township 11S Range 4W Section 6,7

Amount .25 cfs Use Irrigation WM Dist. # 16

Applicant Name Benjamin & Alisha James

Receipt No. 126412 Caseworker Assigned: Barbe Kim Lisa Scott

Applicant/Organization Name and Mailing Address

Signature of all applicants (include title or authority of representative if applicant is an organization or corporation). *Applicant's agent may NOT sign application.

Property ownership: Does the applicant own all the land for the proposed project? Y N

If No:

The affected landowner's name(s) and mailing address(s) must be listed

A signed statement declaring the existence of either written authorization or an easement permitting access to land crossed by the proposed ditch canal or other work must be submitted.

For a SW Application: Source of water must be indicated.

If the source is stored water, is the stored water component filled out and does the applicant own the reservoir or include a non-expired agreement for stored water? (ORS 537.400)

NOTE: A surface water application cannot be filed at the same time as a Reservoir or Alt Reservoir if it will be for the use of the stored water under the PROPOSED Reservoir application. Exp. Secondary (E2)(ORS 537.147).

If for stored water not under contract, is the source authorized under a permit, certificate, or decree?

Permit or Certificate issued Y N Permit or Certificate # _____

For a GW Application: Well Development Tables completed and/or a well log report included (if existing)

Proposed water use

Amount of water from each source in GPM, CFS, or AF

Period of use indicated

If for supplemental irrigation, primary acreage or underlying permit or certificate number listed
(Primary and Supplemental Irrigation counts as 2 uses)

Water Management Section (Estimates if the water system has not been designed)

Resource Protection Section (N/A for Groundwater)

Project schedule (If system is already completed, indicate "existing.")

N/A

- Supplemental data sheets enclosed (if needed)
 - Form M (Municipal or Quasi-Municipal)
 - Spring Description Sheet (if source is a spring)

A completed **Land-Use Form** or receipt signed and dated by the appropriate planning department officials. *Please be certain that the Land-Use form lists all lands involved and all uses proposed. Date of signature must be within the past 12 months.*

A **Legal Description** of all the properties involved where water is diverted, crossed, and used. The Legal description includes a metes and bounds or other government survey description. A copy of the deed, land sales contract or title insurance policy can provide this information, or applicant may submit a lot book report prepared by a title company. Copies of tax bills are not acceptable.

TSD

The proposed source **IS / IS NOT** (circle one) restricted or withdrawn from further appropriation. *NOTE: If it is withdrawn under ORS 538, return application and fees.*

The **map** must meet all the minimum requirements of OAR 690-310-0050.

- Township, Range, Section
- Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU)
- Place of use, ¼-¼'s and tax lot clearly identified
- Even map scale not less than 4" = 1 mile (1" = 1320 ft.); examples: 1" = 100 ft., 1" = 200 ft.
- Location of *each* diversion point or well by reference to a recognized public land survey corner. Multiple wells shall be uniquely labeled, and identified on well logs, if existing.
- Reference corner on map
- North Directional Symbol
- Number of acres per ¼ ¼ if for irrigation, nursery, or agriculture

Fees: Print out from Fee Calculator

Total Fees	\$ <u>2,210.00</u>
Fee Paid	\$ <u>2,210.00</u>
Amount Due	\$ <u>0</u>

Reviewed by: E.G.

Date: 4/16/18