

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **126944**

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

INVOICE # _____

RECEIVED FROM: <u>D and D's Trees LLC</u>	APPLICATION <u>R-88587</u>
BY: _____	PERMIT _____
	TRANSFER _____

CASH: CHECK:# 402 OTHER: (IDENTIFY)

TOTAL REC'D \$ 520.00

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	\$	0202
0203 GROUND WATER	\$	0204
0205 TRANSFER	\$	
WELL CONSTRUCTION		
0218 WELL DRILL CONSTRUCTOR	\$	0219
LANDOWNER'S PERMIT	\$	0220
OTHER (IDENTIFY) _____		

46111

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: **126944** DATED: 6-11-18 BY: [Signature]

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

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **126945**

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

INVOICE # _____

RECEIVED FROM: <u>D and D's Trees LLC</u>	APPLICATION <u>R-88587</u>
BY: _____	PERMIT _____
CASH: <input type="checkbox"/>	TRANSFER _____
CHECK:# <u>403</u>	TOTAL REC'D \$ <u>445.00</u>
OTHER: (IDENTIFY) _____	

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	EXAM FEE \$ <u>445.00</u>	0202	RECORD FEE \$ _____
0203 GROUND WATER	\$ _____	0204	\$ _____
0205 TRANSFER	\$ _____		
WELL CONSTRUCTION			
0218 WELL DRILL CONSTRUCTOR	EXAM FEE \$ _____	0219	LICENSE FEE \$ _____
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 (FW/WRD)		\$ _____
0231 HYDRO LICENSE FEE (FW/WRD)		\$ _____
HYDRO APPLICATION		\$ _____

TREASURY OTHER / RDX

FUND _____ TITLE _____

OBJ. CODE _____ VENDOR # _____

DESCRIPTION _____ \$ _____

RECEIPT: **126945**

DATED: 6-11-18 BY: V. J. [Signature]

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R-89587 County Benton
Priority Date 6/11/18 Township 14S Range 8W Section 2 Taxlot 402
Use Irrigation Caseworker Scott Erew
Amount (AF) .018 AF Watermaster Joel Plahn #16

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
 - Total Quantity of Storage Requested: .018
 - 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.)
 - 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, even scale such as 1" = 400', 1" = 1000', or 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 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? 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.
 - 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.
 - Fees enclosed? Print page from fee calculator
- Total Paid \$ 965.00 Total Fees \$ 965.00
Completeness Check by: E.G. Date: 6/12/18 Revised 2017-8-4