	·	STAT	E OF OREGON		
	WAT	ER RESOL	JRCES DEPARTN	IENT	
CEIPT#	128318	SALEN	nmer St. N.E. Ste. A /, OR 97301-4172 00 / (503) 986-0904 (fax)	INVOICE #	
CEIVED FRO	M: Kichard	Va59	WEZ	APPLICATION	6-18749
:	JTEFfer	2	Nicholson	PERMIT	
		/	· · · · · · · · · · · · · · · · · · ·	TRANSFER	
SH: C			IFY)	TOTAL REC'D	\$ 2,910:.0
1083	TREASURY	4170 WF	RD MISC CASH AC	CT	
0407	COPIES				\$
	_ OTHER: (I	DENTIFY)			\$
0243 1/S L	ease 0244	Muni Water Mg	mt. Plan 0245	Cons. Water	
		4270 WF	RD OPERATING AC	CT 1.	
	MISCELLANEOUS	. /	46111		
0407	COPY & TAPE FEE	S			\$
0410	RESEARCH FEES				\$
0408	MISC REVENUE:	(IDENTIFY)	· · · · · · · · · · · · · · · · · · ·		\$
TC162	DEPOSIT LIAB. (II	DENTIFY)			\$
0240	EXTENSION OF T	ME			\$
	WATER RIGHTS:		EXAM FEE]	RECORD FEE
0201	SURFACE WATER		\$	0202 ·	\$
0203	GROUND WATER		\$ 2,39000	0204 .	\$ 520.00
0205 .	TRANSFER		\$	4	
¥.,	WELL CONSTRUC		EXAM FEE		
0218	WELL DRILL CONS	STRUCTOR	\$	0219	\$ -0
	LANDOWNER'S PI	ERMIT ·	<u> </u>	0220	\$
	OTHER	(IDENTIFY)			
0536	TREASURY	0437 WE	LL CONST. STAR	T FEE	۰
0211	WELL CONST STA	RT FEE	\$	CARD #	
0210	MONITORING WE	LS	\$	CARD #	
	OTHER	(IDENTIFY) _			· · ·
0607	TREASURY	0467 HY	DRO ACTIVITY	LIC NUMBER	
0233	POWER LICENSE	FEE (FW/WRD))		\$
0231	HYDRO LICENSE	FEE (FW/WRD)			\$
	_ HYDRO APPLICAT		File Star		\$
	TREASURY	and the second			
FUND		TITLE	THE COUNT	ER	
OBJ. COD)E	VENDOR#_			
DESCRIP	TION	ра. ЧРц.,		17	\$ *
	28318	DATED:_	10-30-18 _{84:}	17:0	Mi.

Distribution - White Conv - Customer Vellow Conv - Fiscal Rive Conv - File Ruff Conv - Fiscal . .

E-2 Yes No Yes No Standard Application Completeness Checklist 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 <u>G-18749</u> County <u>Clackamas</u> Priority Date <u>10/20/18</u>						
Township <u>35</u> Range <u>2E</u> Section <u>30</u>						
Amount <u>91gpm</u> Use <u>Nursery</u> <u>Commercial</u> WM Dist. # <u>20</u>	-					
Applicant Name CARUS Road Francin LLC						
Receipt No. $\frac{4282844}{28284}$ Caseworker Assigned Barbe \Box Kim \Box Lisa \Box Scott						
1283/9 Applicant/Organization Name and Mailing Address						
Signature of <i>all</i> 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? $\square Y \square N$ 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 <u>must</u> 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 \Box Y \Box N Permit or Certificate #						
For a GW Application: Well Development Tables completed and/or a well log report included (if existing)						
Division 33, Public Interest Information (Sensitive, Threatened, Endangered, Fish Species)						
Proposed Water Use						
 Amount of water from <i>each</i> source in <u>GPM</u>, CFS, or AF Period of use indicated If for supplemental irrigation, primary acreage or underlying permit or certificate number listed (<i>Primary and Supplemental Irrigation counts as 2 uses</i>) 						
Water Management Section (Estimates if the water system has not been designed)						
Resource Protection Section						
Project schedule (If system is already completed, indicate "existing.")						

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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. <u>Copies of tax bills are not acceptable</u>.

The proposed source <u>IS / IS NOT</u> (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, 1/4-1/4's and tax lot clearly identified

4 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

A Number of acres per 1/4 1/4 if for irrigation, nursery, or agriculture

Gamma Fees: Print out from Fee Calculator

Total Fees	\$ <u>2, 910.</u> 00
Fee Paid	\$ <u>2,910.00</u>
Amount Due	\$

Reviewed by: <u>E.G.</u>

Date: 10/30/18