

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **128412**

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

INVOICE # _____

RECEIVED FROM: Touchmark

APPLICATION	<u>6-18757</u>
PERMIT	
TRANSFER	

BY: _____

CASH: CHECK:# 108716 OTHER: (IDENTIFY)

TOTAL REC'D \$ 2560.00

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		46111	
0407	COPY & TAPE FEES	\$	
0410	RESEARCH FEES	\$	
0408	MISC REVENUE: (IDENTIFY) _____	\$	
TC162	DEPOSIT LIAB. (IDENTIFY) _____	\$	
0240	EXTENSION OF TIME	\$	
WATER RIGHTS:		EXAM FEE	RECORD FEE
0201	SURFACE WATER	\$	0202 \$
0203	GROUND WATER	\$ <u>2040.00</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 (FW/WRD)	\$
0231	HYDRO LICENSE FEE (FW/WRD)	\$
_____	HYDRO APPLICATION	\$

TREASURY OTHER / RDX

FUND _____ TITLE _____
 OBJ. CODE _____ VENDOR # _____
 DESCRIPTION _____ \$ _____

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DATED: 11/9/18 BY: CDuehrick

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

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-18757 County Washington Priority Date 11/9/18

Township 1S Range 1W Section 1

Amount 60 gpm Use Irrigation, Agriculture WM Dist. # 18

Applicant Name Touchmark Heights, LLC

Receipt No. 128412 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)

Division 33, Public Interest Information (Sensitive, Threatened, Endangered, Fish Species)

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

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.* Receipt only

~~✓~~

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.

TBD

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, 1/4-1/4'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 1/4 1/4 if for irrigation, nursery, or agriculture

Fees: Print out from Fee Calculator

Total Fees	\$ 2,500.00
Fee Paid	\$ 2,500.00
Amount Due	\$ 0

Reviewed by: E.G. Date: 11/13/18