STATE OF OREGON WATER RESOURCES DEPARTMENT 725 Summer St. N.E. Ste. A RECEIPT # 128485 **INVOICE** # SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-0904 (fax) **APPLICATION** RECEIVED FROM: **PERMIT** BY: **TRANSFER** CASH: CHECK:# OTHER: (IDENTIFY) TOTAL REC'D TREASURY 4170 WRD MISC CASH ACCT 1083 \$ COPIES 0407 \$ OTHER: (IDENTIFY) 0244 Muni Water Mgmt. Plan _____ 0245 Cons. Water 0243 I/S Lease **4270 WRD OPERATING ACCT MISCELLANEOUS** \$ 0407 **COPY & TAPE FEES** \$ 0410 RESEARCH FEES \$ 0408 MISC REVENUE: (IDENTIFY) \$ TC162 **DEPOSIT LIAB. (IDENTIFY)** \$ 0240 **EXTENSION OF TIME** RECORD FEE WATER RIGHTS: **EXAM FEE** \$ 0201 SURFACE WATER 0202 \$ \$ 0204 0203 **GROUND WATER** \$ 0205 TRANSFER LICENSE FEE **EXAM FEE** WELL CONSTRUCTION \$ 0219 \$ 0218 WELL DRILL CONSTRUCTOR \$ 0220 LANDOWNER'S PERMIT. OTHER (IDENTIFY) 0437 WELL CONST. START FEE 0536 TREASURY 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** FUND TITLE OBJ. CODE **VENDOR#** \$ DESCRIPTION RECEIPT: DATED:

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 6-18759 County Clackamas Priority Date 11 15/18
Township 35 Range W Section 28, 280, 33
Amount 37 Cfs. Use Trugation WM Dist. # 20 -
Applicant Name Mayfield Faran LLC
Receipt No. 128485 Caseworker Assigned: Barbe Kim Lisa Scott
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?
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
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 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.")

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y 🗖	Supplemental data sheets enclosed (if needed)
	☐ Form M (Municipal or Quasi-Municipal)
	☐ Spring Description Sheet (if source is a spring)
1	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.
4	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.
	The proposed source <u>IS / IS NOT</u> (circle one) restricted or withdrawn from further appropriation. <i>NOTE:</i> If it is withdrawn under ORS 538, return application and fees.
A	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, ½-½'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 <i>each</i> 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
	Fotal Fees \$ 2,910.00
	Fee Paid \$ <u>2,39ao</u>
	Amount Due \$ <u>520.06</u>
Re	ewed by: E. G. Date: 11 15 17

s/groups\wr\customer service group\checklists\standard application checklist Last modified: 7/11/2018