STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 128758 725 Summer St. N.E. Ste. A

INVOICE #

	Valla	Farme 1	503) 986-0904 (fax)	APPLICATION	14. 88 18
ECEIVED FROM: Kelly Farms III			110	PERMIT	0000
γ:					
ASH:	CHECK:#	OTHER: (IDENTIFY)		TRANSFER	
	16151			TOTAL REC'D	\$ 1,418.00
1083	TREASURY	4170 WRD	MISC CASH AC	СТ	
0407	COPIES				\$
0407		(IDENTIFY)			\$
0243 1/5 1			Plan 0245 (Cons Water	
0243 1/3 1	024		OPERATING AC		
	MISCELLANEOU	11	6111		
0407	COPY & TAPE FE	""		\$	
0410	RESEARCH FEES	3			\$
0408	MISC REVENUE:	(IDENTIFY)			\$
TC162	DEPOSIT LIAB. (IDENTIFY)			\$
0240	EXTENSION OF T	ГІМЕ			\$
	WATER RIGHTS:	4	EXAM FEE		RECORD FEE
0201	SURFACE WATER	3	\$ 1,418.00	0202	\$
0203	GROUND WATER	r i	\$	0204	\$
0205	TRANSFER		\$		
	WELL CONSTRU	CTION	EXAM FEE		/ LICENSE FEE
0218	WELL DRILL CON	ISTRUCTOR	\$	0219	\$
	LANDOWNER'S F	PERMIT		0220	\$
	OTHER	(IDENTIFY)			
0536	TREASURY	0437 WELL	CONST. START	FEE	
0211	WELL CONST ST		\$	CARD	
0210	MONITORING WE		\$	CARD	ENGLISHED TO SERVICE AND ADDRESS OF THE PARTY OF THE PART
02.0	OTHER		Ψ	J OANS	
0607	TREASURY		O ACTIVITY L	IC NUMBER	
0233	POWER LICENSE	FEE (FW/WRD)			\$
0231	HYDRO LICENSE		The second of the second		\$
	HYDRO APPLICA	TION			\$
	TREASURY	OTHE	R / RDX		
FUND			CEIVED		
	DE				
		- OVER H	HE COUNT	EH	\$
DESCRIP	TION				

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

KELLY FARMS INC

16751

OREGON WATER RESOURCES DEPT Type Reference

11/17/2018 Bill

Original Amt. 1,418.00 Balance Due 1,418.00 11/17/2018 Discount

Payment 1,418.00 1,418.00

Check Amount

RECEIVED

NOV 2 0 2018

OWRD

Cneci. West Coa Application Fee

1,418.00



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 5-88685 County Marion Priority Date 12/19/2018
Application $\frac{5-88685}{45}$ County Marion Priority Date $\frac{12}{19}$ Range $\frac{2W}{2018}$ Section $\frac{17}{19}$, $\frac{19}{19}$, $\frac{19}{20}$
Amount 184.53 AF Use crigation WM Dist. # 16
Applicant Name Kelly Farms c/o Tom Kelly
Receipt No. 128758 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? $\square Y \square N$
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
☐ 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 Symplemental Irrigation accounts as 2 years)
(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.")

	Supplemental data sheets enclosed (if needed)			
	☐ Form M (Municipal or Quasi-Municipal)			
	☐ Spring Description Sheet (if source is a spring)			
	= spring Bescription sheet (it source is a spring)			
	A completed Land-Use Form or receipt signed and dated by the appropriate planning department officials. <i>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.</i>			
	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 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 <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			
	Total Fees \$3398.00 Fee Paid \$1418.00			
	Fee Paid \$1418,00			
	Amount Due \$ 1.980.00			
Rev	viewed by: Date: Date:			