STATE OF OREGON WATER RESOURCES DEPARTMENT

EIPT# 1	.28865	SALE	mmer St. N.E. Ste. A EM, OR 97301-4172 900 / (503) 986-0904 (fax	INVOICE #	
EIVED FROM: Robert K Pond.				APPLICATION	R-886
EIVED FROM.				PERMIT	
		*		TRANSFER	
H: CHECK:# OTHER: (IDENTIFY)					.1 11 1000
X 102 L				TOTAL REC'D	19,595.
1083	TREASURY	4170 W	RD MISC CASH A	ACCT	
0407	COPIES				\$
	OTHER: (IDENTIFY)				
0243 I/S Le	ease 0244	Muni Water M	lgmt. Plan 02	45 Cons. Water	
		4270 W	RD OPERATING	ACCT	
	MISCELLANEOUS	3 4/	/.111	The second of	
0407	COPY & TAPE FE	7	6111		\$
0410	RESEARCH FEES				\$
0408	MISC REVENUE:	(IDENTIFY)	F FF		\$
TC162	DEPOSIT LIAB. (I	DENTIFY)			\$
0240	EXTENSION OF T	IME			\$
	WATER RIGHTS:		EXAM FEE		RECORD FE
0201	SURFACE WATER	1	\$ 075.00	0202	\$520.00
0203	GROUND WATER		\$ 5.00	0204	\$
0205	TRANSFER		\$		
	WELL CONSTRUC	CTION	EXAM FEE		LICENSE FE
0218	WELL DRILL CON	STRUCTOR	\$	0219	\$
	LANDOWNER'S P	ERMIT		0220	\$
	OTHER	(IDENTIFY)			A-12
0536	TREASURY	0437 W	ELL CONST. STA	RT FEE	
0211	WELL CONST STA	ART FEF	\$	CARD#	
0210	MONITORING WE		\$	CARD#	
	OTHER	(IDENTIFY)			
0607			YDRO ACTIVITY	LIC NUMBER	
0233	POWER LICENSE				\$
0233	HYDRO LICENSE				\$
3231	HYDRO APPLICAT				\$
			TUED / DDY		
	TREASURY	0	THER / RDX		
FUND		TITLE:	SECEIVED		
OBJ. COD	E	VENDOR #	LOLIVE	TER	
DESCRIPT	TION	OVER	THE COUN	IEN	\$
		Situation assistant	Towns and the second		

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

Alternate Reservoir Application Completeness Checklist						
Application R-88691 County Benton Counts						
Application K-88691 County Benton Counts						
Priority Date 1-7-2019 Township Range 6W Section 26 Taxlot 1200						
Use MP Caseworker 418 A						
IG.GAF						
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:						
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)*						
\square Scale of the Map, even scale such as 1" = 400', 1" = 1000', or 1" = 1320' **						
□ Reference corner on map						
□ North Directional Symbol **						
□ ½½½'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? \square YES \square 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? \(\preceq YES \) \(\preceq NO \) \(\text{If NO, return the application.} \)						
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						
☐ Fees enclosed? Print page from fee calculator Total Paid \$_1595 Total Fees \$						
Completeness Check by: ALL Date: 1-7-19 Revised 2017-8-4						