

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

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

RECEIPT # **128959**

INVOICE # _____

RECEIVED FROM: CONSER DESIGN & CONSTRUCTION
BY: _____

APPLICATION	G-18780
PERMIT	
TRANSFER	

CASH: CHECK:# 18802 OTHER: (IDENTIFY) _____

TOTAL REC'D \$ 2390.00

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:

0201 SURFACE WATER	EXAM FEE	0202	RECORD FEE
0203 GROUND WATER	\$ 2390.00	0204	\$ _____
0205 TRANSFER	\$ _____		

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR	EXAM FEE	0219	LICENSE FEE
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 _____ \$ _____

**RECEIVED
OVER THE COUNTER**

RECEIPT: **128959** DATED: 1/17/19 BY: S. Phillips

CONSER DESIGN & CONSTRUCTION

18802

Oregon Water Resources Department

Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
11/1/18	Bill	groundwater applicat	2,390.00	2,390.00	11/5/18	2,390.00
					Check Amount	2,390.00

RECEIVED

JAN 17 2019

OWRD

CDC - Washington Fe

2,390.00

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 6-18780 County Linn Priority Date 1-14-19

Township 10S Range 3W Section 35

Amount 50 AF Use Q-M WM Dist. # 2

Applicant Name Diversified Shelters Inc. DBA Corner Homes Inc.

Receipt No. 128959 Caseworker Assigned: [] Barbe [] Kim [x] Lisa [] Scott

- [x] Applicant/Organization Name and Mailing Address
[x] Signature of all applicants (include title or authority of representative if applicant is an organization or corporation). *Applicant's agent may NOT sign application.

[x] Property Ownership: Does the applicant own all the land for the proposed project? [x] 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 #

[x] For a GW Application: Well Development Tables completed and/or a well log report included (if existing)

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

[x] 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)

[x] Resource Protection Section

[x] 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)

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. 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, 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	\$ 2390 ²⁹¹⁰
Fee Paid	\$ 2390
Amount Due	\$ 525 - P.F.

Reviewed by: KHC + JKS Date: 1-17-19