## STATE OF OREGON WATER RESOURCES DEPARTMENT

RECEIPT # 129225 725 Summer St. N.E. Ste. A SALEM, OR 97301-4172

INVOICE #

			(503) 986-0	900 / (50	3) 986-0904 (fa	x)			
RECEIVED FROM: William & Jenniter APPLICATION							LICATION	R 88 753	
BY: VOGE PERMIT							ERMIT	")	
			4			TR	ANSFER		
CAS	SH: C		OTHER: (IDEN	TIFY)				. 2 220	
L		× 1498				ТОТА	L REC'D	\$ 2,350.	
	1083	TREASURY	4170 W	RD M	ISC CASH	ACCT			
	0407	COPIES						\$	
	0407		DENTIFY)					\$	
	0243 I/S L	ease 0244		III III III II II II II II II II II II			Water	_	
	4270 WRD OPERATING ACCT								
		MISCELLANEOUS		461	110				
	0407				\$				
	0410	RESEARCH FEES			\$				
	0408 MISC REVENUE: (IDENTIFY) TC162 DEPOSIT LIAB. (IDENTIFY)					\$			
							\$		
	0240	EXTENSION OF TI	ME					\$	
		WATER RIGHTS:			EXAM FEE			RECORD FEE	
	0201	SURFACE WATER			\$ 1,810 .	00 0	202	\$ 520.00	
	0203	GROUND WATER			\$	0	204	\$	
	0205	TRANSFER			\$				
		WELL CONSTRUC	TION		EXAM FEE			LICENSE FEE	
mercy	0218	WELL DRILL CONS	STRUCTOR		\$	0	219	\$	
		LANDOWNER'S PE	ERMIT			0:	220	\$	
		OTHER	(IDENTIFY)						
	0536	TREASURY	0437 W	ELL C	ONST. STA	RT FEI		•	
	0211	WELL CONST STA	RT FEE		\$		CARD#		
	0210	MONITORING WEL	LS		\$		CARD#		
		OTHER	(IDENTIFY)						
	0607	TREASURY	0467 H	YDRO	ACTIVITY	LIC NU	MBER		
		POWER LICENSE			ACTIVITY			\$	
		HYDRO LICENSE I					1.50	\$	
		HYDRO APPLICAT						\$	
								Ψ	
		TREASURY	0	THER	/ RDX				
	FUND		TITLE						
	OBJ. COD	E	VENDOR #						
	DESCRIPT	TION						\$	
						- 1	1		
	4	29225		21-	28/19	10	3:1.	1	
KEC.	FIPI:	-11/	DATED.	diamen 4	BY.	0/1	3 V A	41	

Dietribution - White Cony - Customer Vallow Cony - Fiscal Rlue Cony File Buff Cony Fiscal

Alternate Reservoir Application Completeness Checklist
TILL ALL LINE AND AND AND
Application - 8 8753 County Douglas
Priority Date 2-28-19 Township 245 Range 5W Section 36 Taxlot 100
Amount (AF) 40 Watermaster Susan Douthit
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9'9" Dant. Minimum Requirements (ORS 537.409)
millian requirements (ORS 557.409)
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: 40 A F
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 <b>OR</b> 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)*
Scale of the Map, even scale such as $1'' = 400'$ , $1'' = 1000'$ , or $1'' = 1320' **$
Reference corner on map
North Directional Symbol **
1/41/4'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 and conditions be applied to mitigate the impact?   YES also MO. If NO.
If YES, can conditions be applied to mitigate the impact? \( \text{YES} \) \( \text{DNO} \) \( \text{If NO, return the application.} \)
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.
<b>Provide a Legal Description</b> 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
Total Paid \$ Total Fees \$ 2300.
Completeness Check by: Judy Forel Date: 3/01/19 Revised 2017-8-4
Completeness Check by: Judy Zerrell Date: 3/01/19 Revised 2017-8-4  Mary Bjor E 3-1-19
110 7010 2 3-1-19
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