

Limited License Completeness Checklist

Minimum Requirements (OAR 690-340-0030) (ORS 537.143)

| | | | |
|---------------------|--|--------------|-----------------------------|
| Received Date: | 10/26/2020 | POD TRSQQ: | T2N, R13E, Section 28, SWSW |
| Public Notice Date: | 11/10/2020 | | |
| Earliest Issue Date | 11/25/2020 | POU TRSQQ: | See Map |
| Source: | A Well | | |
| Amount: | 2.0 CFS | | |
| Duration: | 1/15/2021 thru 5 years or completed xfer | Watermaster: | Robert Wood #3 |
| County: | Wasco | ODFW: | Jason Brandt |
| Basin: | Hood | DEQ: | Smita Mehta, Karen Whisler |

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|--|---|---|-----------------|
| <input checked="" type="checkbox"/> | Applicant/Organization Name, Mailing Address, Telephone Number, and Contact Person. <i>Signature in ink.</i> | | |
| <input checked="" type="checkbox"/> | Source listed? | | |
| <input checked="" type="checkbox"/> | If source is groundwater... are well log(s) or sufficient information for the Department to determine aquifer, well depth, well seal, open interval, etc. included? Was the intended aquifer identified? If for multiple wells, each map location shall be clearly tied to a well log. | | |
| <input checked="" type="checkbox"/> | Proposed use of the water — is each proposed use identified? | | |
| <input type="checkbox"/> | N/A - If source is stored water — Is there a contract for delivery of stored water? Must have a copy. | | |
| <input type="checkbox"/> | N/A - If use is supplemental — is the primary water right listed? | | |
| <input checked="" type="checkbox"/> | Amount of water — from each source listed in GPM, CFS or AF? | | |
| <input type="checkbox"/> | N/A - Acreage proposed, if applicable. | | |
| <input checked="" type="checkbox"/> | Duration of Limited License being requested by applicant. | | |
| <input checked="" type="checkbox"/> | Project schedule — Date when water use will start and date when water use will be completed | | |
| <input checked="" type="checkbox"/> | Is the application signed in ink by the applicant(s) or by the authorized agent with title or authority if an organization or corporation? | | |
| <input checked="" type="checkbox"/> | Watermaster Report — Is the local Watermaster’s report on water availability included? | | |
| <input checked="" type="checkbox"/> | Land Use Form — Is a Land Use Form included, and completed by local planning officials? <i>Signature must be within the last 12 months.</i> | | |
| <input checked="" type="checkbox"/> | Does the map meet requirements of OAR 690-340-0030? If map is larger than 11 x 17, four copies must be submitted. | | |
| | <input checked="" type="checkbox"/> | Township, Range, Section | |
| | <input checked="" type="checkbox"/> | Location of each diversion point, well or dam | |
| | <input checked="" type="checkbox"/> | Reference corner on map | |
| | <input checked="" type="checkbox"/> | Each POD coordinate by reference to a recognized public land survey corner | |
| | <input checked="" type="checkbox"/> | Scale of the map, not less than 2" = 1 mile | |
| | <input checked="" type="checkbox"/> | Other topographical features such as roads, streams, railroads, etc., which may be helpful in locating the diversion points in the field. | |
| <input checked="" type="checkbox"/> | Fees enclosed? | | |
| | \$280.00 including the first point of diversion: | | \$280.00 |
| | \$30.00 for each additional point of diversion: | | 0 |
| | Total fee: | | \$280.00 |
| | Fee Paid: | | \$280.00 |
| | Still Owed: | | 0 |
| Completeness Check by: Mary Bjork | | Date: 11/2/2020 | |