E-2 App	
☐ Yes	
□ No	

Standard Application Completeness Checklist

Groundwater and Surface Water Applications Only

Minimum Application Requirements (OAR 690-310-0040 &-0050)

For use by WRD staff only

	For	use by WRD staff only	
Application #:		Receipt #:	
Applicant Name:		Amount Requested:	
Priority Date:		Proposed Use:	
County:		POD's TRS &TL:	
WM #:		Caseworker:	□ KF □ LG
Reviewed by:		Reviewed Date:	
Signature of <u>all</u> ap corporation). Not	ation Name and Mailing Addre plicants (include title or author e: Applicant's agent may NOT ip: Does the applicant own all t	rity of representative if applic sign the application on beha	alf of the applicant.
	ted landowner's name(s) and m	nailing address(s) must be list	ted.
•	statement declaring the exister ad crossed by the proposed dite		ation or an easement permitting be submitted.
☐ For a SW Applica	tion: Source of water must be	indicated.	
	ce is stored water, is the stored or include a non-expired agreen	•	and does the applicant own the 537.400)
☐ If for store	d water, is the source authorize	ed under a permit, certificate	, or decree?
NOTE: An ex	Certificate issued:		filed at the same time. The reservoir must
_	ition: Well development table tive, Threatened, Endangered, F		port included (if existing)
☐ Proposed Water U	J	ish species,	
·	f water from <i>each</i> source in GPI	M, CFS, or AF	
☐ Period of u		,	
• •	lemental irrigation, primary acr y and Supplemental Irrigation c		r certificate number listed.
☐ Water Managemen	nt Section		
☐ Resource Protection	on Section		

☐ Project schedule. (Note: If system i water system has not been designe	-	, indicates "exist	ing.", (Note: Estimates are okay if the
☐ Supplemental data sheets enclosed	l (if needed)		
☐ Form M (Municipal or Qua	si-Municipal)		
•			opriate planning department. Please be osed. Date of signature must be within the
A Legal Description of all the properties	ounds or other gove n provide this inform	rnment survey on ation, or applica	lescription. A copy of the deed, land sales
☐The proposed source IS IS N withdrawn under ORS 538, reject/re	· ·		her appropriation. NOTE: If it is
☐The map must meet all the minimu	m requirements of C	OAR 690-310-00	50.
☐ Township, Range, Section			
\square Location of main canals, di	ches, pipelines or flu	umes (if POA/PO	D is outside of POU)
\square Place of use, 1/4-1/4's and tax	clot clearly identified	b	
\square Even map scale not less that	ın 4" = 1 mile (1"= 1	320 ft.); example	es: 1" = 100 ft., 1" = 200 ft.
\square Location of each diversion	point or well by refe	rence to a recog	nized public land survey corner.
\square Multiple wells shall be uniq	uely labeled, and ide	entified on well l	ogs, if existing.
\square Reference corner on map			
☐ North directional symbol			
☐ Number of acres per 1/4 1/4	f for irrigation, nurse	ery, or agricultur	e
☐ Fees: Amount of Water Requested:	Na	me on Check:	
Exam Fee Due:	\$		
Exam Fee Submitted:	\$		
Difference:	\$		
Recording Fee Paid?	□ Yes □ No \$		
Total:	\$		

Main

□ Help

Return

☐ Contact Us

Today's Date: Friday, January 22, 2021

		1 242 22
Base Application Fee.		\$1,340.00
Number of proposed cubic feet per second (cfs) to be appropriated. (1 cfs = 448.83 gallons per minute)	0.6	\$350.00
Number of proposed Use's for the appropriated water. (i.e. Irrigation, Supplemental Irrigation, Pond Maintenance, Industrial, Commercial, etc) *	2	\$350.00
Number of proposed groundwater points of appropriation. (i.e. number of wells) (include all injection wells, if applicable) **	1	
	Subtotal:	\$2,040.00
Permit Recording Fee. ***		\$520.00
* the 1st Water Use is included in the base cost. ** the 1st groundwater point of appropriation is included in the base cost. *** the Permit Recording Fee is not required when the application is submitted but, must be paid before a permit will be issued. It is fully refundable if a permit is not issued. If the recording fee is not paid prior to issuance of the Final Order, permit issuance will be delayed.		
Estimated cost of Permit Application		\$2,560.00

STATE OF OREGON WATER RESOURCES DEPARTMENT

RECEIPT # 134351 725 Summer St. N.E. Ste. A SALEM, OR 97301-4172

INVOICE #

ECEIVED FROM: R	ingue Aiver	Family	Forms	APPLICATION PERMIT	G-19055
ASH: CHECK:#	• — ,	DENTIFY)	_	TRANSFER	
	270			TOTAL REC'D	\$2,650,0
1083 TREA	ASURY 4170	WRD MI	SC CASH A	CCT	
0407 COPI	ES	1. 194			\$
OTHE	R: (IDENTIFY)			\$
0243 I/S Lease	0244 Muni Wa	ter Mamt Pla	n 024	E Cope Water	
	4270		PERATING A		
MISC	ELLANEOUS			ICCI	
	Y & TAPE FEES		16111		\$
	EARCH FEES				\$
	REVENUE: (IDENTIF	=Y)			\$
	OSIT LIAB. (IDENTIFY				\$
	ENSION OF TIME				\$
WATE	ER RIGHTS:		EXAM FEE		RECORD FEE
	FACE WATER		\$	0202	\$
		13000	\$ 20110 0	0204	\$ 500.00
	NSFER	1120-	\$	0204	3300
WELI	L CONSTRUCTION		EXAM FEE		LICENSE FEE
	L DRILL CONSTRUCTO	OR	\$	0219	\$
LAND	OOWNER'S PERMIT			0220	\$
OTHE	ER (IDENT	TFY)			
0536 TREA	ASURY 0437	WELL C	ONST. STAF	RTFFF	
	CONST START FEE		\$		I
	ITORING WELLS		\$	CARD#	
OTHE		TFY)		CARD#	
0607 TREA	ASURY 0467	HYDRO	ACTIVITY	LIC NUMBER	
	ER LICENSE FEE (FW				\$
0231 HYDF	RO LICENSE FEE (FW.	/WRD)			\$
HYDF	RO APPLICATION				\$
TREA	ASURY	OTHER	/ RDX		
FUND	TITLE	1.174			
OBJ. CODE	VENDO	OR #			
DESCRIPTION					\$

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