

**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 # **134276**

INVOICE # _____

RECEIVED FROM: Bandon Dunes

APPLICATION	<u>R-88913</u>
PERMIT	
TRANSFER	

BY: _____

CASH: CHECK:# 149210 OTHER: (IDENTIFY) _____

TOTAL REC'D \$2225.00

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		<u>46111</u>	
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	RECORD FEE
0203	GROUND WATER	\$ <u>1705.00</u>	0202 \$ <u>520.00</u>
0205	TRANSFER	\$	0204 \$
WELL CONSTRUCTION			
0218	WELL DRILL CONSTRUCTOR	EXAM FEE	LICENSE FEE
_____	LANDOWNER'S PERMIT	\$	0219 \$
_____	OTHER (IDENTIFY) _____	\$	0220 \$

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 _____	RECEIVED OVER THE COUNTER
OBJ. CODE _____	VENDOR # _____	
DESCRIPTION _____	\$ _____	

RECEIPT: **134276**

DATED: 11/8/2002 BY: Mindy Cook

Alternate Reservoir Application Completeness Checklist

Minimum Requirements (ORS 537.409)
For use by WRD staff only

* SOURCE, GW Permit
G-15437

Application #:	R-88913 A17	Receipt #:	134276
Applicant Name:	Billy Brandon	Amount Requested:	37 AF
Priority Date:	2-1-2021 (revised page)	Proposed Use:	MP
County:	Coos	POD's TRS & TL:	27s, 14w, 19/20 TL
WM #:	15	Caseworker:	<input checked="" type="checkbox"/> KF <input type="checkbox"/> LG
Reviewed by:	CM	Reviewed Date:	2-5-2021

100, 400,
1000, 1100,
1200

- Landowner name, mailing address and telephone number provided.
- Source and tributary listed. Notes: NO WELLS-MUST HAVE GW APP TO USE A WELL AS A SOURCE. Cannot accept an E2 application and a storage application at the same time. * GW Permit G-15437 *
- Reservoir Location. TRSQQ and tax lot provided.
- Dam height, if applicable: 0 ft
- Property ownership indicated?
- N/A* If applicant does not own all the land is the affected landowner's name and mailing address listed?
 YES NO (Note: this includes lands not owned by applicant, upon which the source is located OR that are crossed by the diversion works, and any roads or rights-of-way.)
- Application signed by the landowner(s)? All parties noted as applicants must sign the application.
- Completed Watermaster review sheet**, signed and dated. Note: Must be completed within last 6 months.
 - Will the reservoir injure an existing water right? YES NO
 - If YES, can conditions be applied to mitigate injury? YES NO If NO, return application.
- Completed ODFW review sheet**, signed and dated. Note: Must be completed within last 6 months.
 - Will reservoir pose a significant detrimental impact to an existing fishery resource? YES NO
 - If YES, can conditions be applied to mitigate the impact? YES NO N/A If NO, return application.
- Completed Land-Use Form** or receipt signed by the appropriate planning department official enclosed?
 Note: Does the use on land-use form match the proposed use on the application? Must be signed within the last 12 months.
- Provide a Legal Description** of all the property involved with this application. A copy of a deed, land sales contract, or title insurance meets this requirement.

Acceptable Map. Note: Requirements set forth by the Commission; 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

1/4 1/4's clearly identified

Reservoir clearly identified **

Dam, or POD (if off-channel), coordinates referenced to a government land survey corner
Note: If no dam, use coordinates to the center of reservoir.

Fees: Amount of Water Requested: 37 AF Name on check: Bandon Dunes \$2225.00

Exam Fee Due:	\$ 1705
Exam Fee Submitted:	\$ 1705
Difference:	\$ 0
Recording Fee Paid?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No \$ 520.00
Total:	\$ 2225.00



**Oregon Water Resources Department
Alternate Reservoir Application**

- [Main](#) [Help](#)
- [Return](#) [Contact Us](#)

For impoundments less than 10 feet in height or storing less than 9.2 acre feet of water.

Today's Date: Thursday, January 14, 2021

Base Application Fee.		\$410.00
Proposed Dam Height in feet.	0	
Proposed Reservoir volume in Acre Feet.	37	\$1,295.00
Subtotal:		\$1,705.00
Permit Recording Fee. ***		\$520.00
*** 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.	Recalculate	
Estimated cost of Permit Application		\$2,225.00



Oregon
Kate Brown, Governor

Water Resources Department
725 Summer St NE, Suite A
Salem, OR 97301
(503) 986-0900
Fax (503) 986-0904

February 5, 2021

Dear Applicant:

The Oregon Water Resources Department has received your application to store water in a reservoir under the Alternate Review process. Your application has been assigned file number **R-88913**. Please refer to this number when contacting the Department. Should you have any questions about your application, please contact the following Water Rights Specialist assigned to your application:

Kim French, Water Rights Specialist	Phone: 503-986-0816
	Email: kim.r.french@oregon.gov

A description of the steps that are used for processing an application to stored water in a reservoir are shown on the reverse side of this letter.

Included with this letter is a Wetland Determination Request form provided by the Department of State Lands (DSL) Wetland Program to determine if wetlands or other regulated water bodies (such as creeks) are in the project area. Please complete and return the form to DSL.

Please note that your application is subject to review and comment from other state agencies and interested parties.

Sincerely,

Cory Middleton
Customer Service Representative
Oregon Water Resources Department

cc:
File
Warren Felton, Agent.

Encl. - DSL Wetland Offsite Form

Water-Use Permit Application Processing Steps

Oregon Water Resources Department

Alternate Review Process for a Reservoir Applications:

After a completed application has been received by the Department, the Department must make public notice of the application within 60 days. Applications are noticed to the public every Tuesday and can be accessed from the Department's website: <https://www.oregon.gov/owrd>.

The Department does not notify individual, neighboring landowners of an application, unless they are identified in the application as affected landowners. The public notice is to ensure that any person may submit detailed information requesting the Department deny an application based upon whether the proposed use causes injury to existing water rights or poses a significant detrimental impact to an existing fishery resource. All comments must be submitted within 60 days of the public notice.

Following the 60-day public comment period, the Department can issue a Final Order. Alternate Reservoir applications typically take between 3-5 months to process, depending upon the number of pending applications in the queue.

The Department recommends applicants not schedule excavation work or otherwise expend financial resources until an ODFW fish passage plan and the alternate reservoir application have been approved. Also note that other permits may be required for any construction activities in waterways, wetlands, or riparian areas.

**Wetland Determination Request
Wetlands Program**
Oregon Department of State Lands
775 Summer Street, NE, Suite 100, Salem, OR 97301-1279

BATCH
WD#: _____

The Department of State Lands (DSL) conducts *offsite* wetland determinations upon request. There is no fee for this service. An offsite determination consists of reviewing wetlands and soils maps, aerial photos and other information to determine if wetlands or other regulated water bodies (such as creeks) are present, likely to be present, or unlikely to be present. Only an *onsite* check can verify whether or not there are regulated wetlands on a site. As time allows, DSL staff may be able to conduct a site visit to verify an offsite determination. Please allow 2-3 weeks for an initial response.

If wetlands are present or likely to be present on a parcel or near a project area, a wetland delineation by a qualified wetland consultant may be needed. Wetland delineation reports and the required fee should then be submitted to DSL for review and agency approval.

Please provide the following information:

1. Vicinity map (like a city map) with the precise parcel location indicated.
2. Large scale map (1" = 100' if possible) of the parcel showing existing buildings, property boundaries, any creeks and other features. An annotated tax assessor's map is fine, and a hand-drawn map is acceptable.
3. City, County, and site address. Please fill in below.
City _____ (or nearest town if outside City limits)
County _____
Site address _____ (or nearest cross streets if no address)
4. Township, Range, Section, Quarter/Quarter Section and Tax Lot number(s) (Tax Map number is equivalent). Please fill in below.
Township _____ Range _____ Section _____ QQ _____ Tax Lot (s) _____

Property owner Legal representative Other (specify): _____

Name: _____

Firm: _____

Mailing Address: _____

Phone: _____ Fax: _____ E-Mail _____

I either own or have legal authority to allow access to the property for which this request is made. My signature below authorizes DSL staff to conduct a wetland determination and to access the property to confirm the wetland determination, as needed. *(DSL will phone prior to conducting a site visit.)*

Signature: _____ Date: _____

Print Name: _____

WORK COPY

SE1/4 SEC.28 T27S R14W W.M.
COOS COUNTY

27S 14W 20D
& INDEX

THIS MAP WAS PREPARED FOR
ASSESSMENT PURPOSE ONLY

1" = 200'

CANCELLED NO.

- 500
- 600
- 700
- 800



SEE MAP 27S 14W 21

SEE MAP 27S 14W 20

SEE MAP 27S 14W 29

SEE MAP 27S 14W 29AA

12-11-2008

27S 14W 20D
& INDEX

21
28
29

THIS MAP WAS PREPARED FOR
ASSESSMENT PURPOSE ONLY

NE1/4 SEC.20 T.27S. R.14W. W.M.
COOS COUNTY

WORK COPY

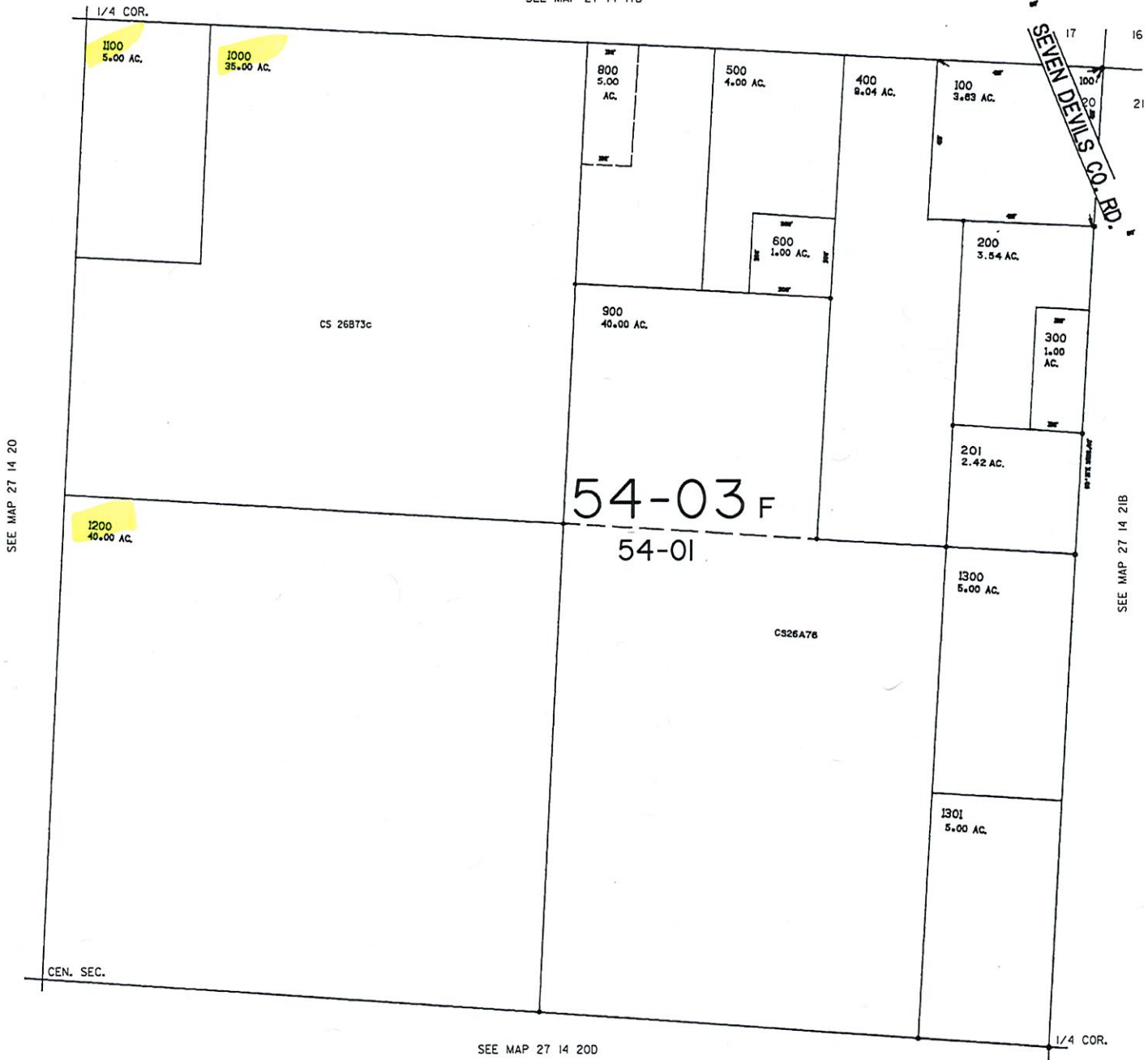
27 14 20A

1" = 200'

CANCELLED

700

SEE MAP 27 14 17D



DATE

27 14 20A