

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

Application #:		Receipt #:	
Applicant Name:		Amount Requested:	
Priority Date:		Proposed Use:	
County:		POD's TRS &TL:	
WM #:		Caseworker:	<input type="checkbox"/> KF <input type="checkbox"/> LG
Reviewed by:		Reviewed Date:	

 Applicant/Organization Name and Mailing Address Signature of **all** applicants (include title or authority of representative if applicant is an organization or corporation). Note: Applicant's agent may NOT sign the application on behalf of the applicant. Property Ownership: Does the applicant own all the land for the proposed project? Yes No

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) If for stored water, is the source authorized under a permit, certificate, or decree?Permit or Certificate issued: Y N Permit or Certificate #: _____**NOTE:** An expedited secondary (E2) application and a reservoir application cannot be filed at the same time. The reservoir must be legally authorized first, under an existing water right, in order to accept and process an E2 application. **For a GW Application:** Well development table completed and a well log report included (if existing) Division 33 (Sensitive, Threatened, Endangered, Fish Species) 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.

(Note: Primary and Supplemental Irrigation counts as 2 uses)

 Water Management Section Resource Protection Section

- Project schedule. (Note: If system is already completed, indicates "existing.", (Note: Estimates are okay if the water system has not been designed))
- Supplemental data sheets enclosed (if needed)
 - Form M (Municipal or Quasi-Municipal)
- A completed **Land-Use Form** or receipt signed and dated by the appropriate planning department. 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, conveyed, 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** restricted or withdrawn from further appropriation. **NOTE:** If it is withdrawn under ORS 538, reject/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:** Amount of Water Requested: _____ Name on Check: _____

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



Today's Date: Thursday, May 13, 2021

Base Application Fee.		\$520.00
Acre feet of Stored Water to be diverted.	454.75	\$1,222.00
	Subtotal:	\$1,742.00
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.		
Estimated cost of Permit Application		\$2,262.00

MONEY SLIP

DATE: <u>5-17-2021</u>	RECEIPT #: <u>135276</u>
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RECEIVED FROM: <u>W.A. McGill Surveying LLC</u>	APPLICATION
	PERMIT
	TRANSFER

CASH	<input type="checkbox"/>	CHECK #	<input checked="" type="checkbox"/> <u>1845</u>	OTHER (IDENTIFY)	<input type="checkbox"/>				
								TOTAL REC'D	\$ <u>2,262.00</u>

1083 TREASURY	4170 MISC CASH ACCT.
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0407	COPIES	\$
_____	OTHER: (IDENTIFY) _____	\$

0243 Instream Lease _____ 0244 Muni Water Mgmt. Plan _____ 0245 Cons. Water _____

1083 TREASURY	4270 WRD OPERATING ACCT.
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MISCELLANEOUS

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	\$	0202	\$
0205	TRANSFER	\$	0204	\$

WELL CONSTRUCTION

0218	WELL DRILL CONSTRUCTOR	EXAM FEE		RECORD FEE
_____	LANDOWNER'S PERMIT	\$	0219	\$
_____	OTHER (IDENTIFY) _____		0220	\$

0607 TREASURY	0467 HYDROELECTRIC
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0233	POWER LICENSE FEE (FW/WRD)		LIC NUMBER	
0231	HYDRO LICENSE FEE (FW/WRD)			\$

_____ HYDRO APPLICATION	\$
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SPECIAL INSTRUCTIONS:

RETURN TO APPLICANT -- LETTER ATTACHED

JF-11

Application for a Permit to Use Surface Water



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
503-986-0900
www.oregon.gov/OWRD

RECEIVED

MAY 17 2021

SECTION 1: APPLICANT INFORMATION AND SIGNATURE

OWRD

Applicant

NAME DEMERGASSO FAMILY OREGON FARM TRUST			PHONE (HM)
PHONE (WK)	CELL (206) 384-8683	FAX	
ADDRESS 30946 WYATT DR.			
CITY HARRISBURG	STATE OR	ZIP 97446	E-MAIL * SDEMERGA@GMAIL.COM

Organization

NAME		PHONE	FAX
ADDRESS			CELL
CITY	STATE	ZIP	E-MAIL *

Agent - The agent is authorized to represent the applicant in all matters relating to this application.

AGENT / BUSINESS NAME WILL MCGILL SURVEYING LLC		PHONE (503) 510-3026	FAX
ADDRESS 15333 PLETZER RD. SE			CELL (503) 931-0210
CITY TURNER	STATE OR	ZIP 97392	E-MAIL * WILLMCGILL.SURVEYING@GMAIL.COM

Note: Attach multiple copies as needed

* By providing an e-mail address, consent is given to receive all correspondence from the Department electronically. (Paper copies of the proposed and final order documents will also be mailed.)

By my signature below I confirm that I understand:

- I am asking to use water specifically as described in this application.
- Evaluation of this application will be based on information provided in the application.
- I cannot legally use water until the Water Resources Department issues a permit.
- The Department encourages all applicants to wait for a permit to be issued before beginning construction of any proposed diversion. Acceptance of this application does not guarantee a permit will be issued.
- If I begin construction prior to the issuance of a permit, I assume all risks associated with my actions.
- If I receive a permit, I must not waste water.
- If development of the water use is not according to the terms of the permit, the permit can be cancelled.
- The water use must be compatible with local comprehensive land use plans.
- Even if the Department issues a permit, I may have to stop using water to allow senior water right holders to receive water to which they are entitled.



I (we) affirm that the information contained in this application is true and accurate

Applicant Signature

Applicant Signature

Trustee

Print Name and Title if applicable

Trustee

Print Name and Title if applicable

5/8/21

Date

5/8/21

Date

For Department Use: App. Number: _____



Grant McGill <grantmcgill.wr@gmail.com>

Water Right Application JF-11 has been accepted

1 message

RECEIVED

MAY 17 2021

OWRD Submit WR App* WRD <OWRD.SubmitWRApp@oregon.gov>
To: Grant McGill <grantmcgill.wr@gmail.com>
Cc: **OWRD Submit WR App* WRD** <OWRD.SubmitWRApp@oregon.gov>

Thu, May 13, 2021 at 8:54 AM

OWRD

Hi Grant, OWRD has received and accepted the e-application for DeMergasso Family Oregon Farm Trust. The temporary application number is: JF-11

Please print this email and include a copy of it when mailing in the payment. The fees due for this application are: \$1,742.00 (If opting to include recording fee: \$2,262.00).

A copy of the fee calculator is attached for your reference.

Once the payment has been received, OWRD will assign an application number and priority date.

Thanks,

Judy