### **MONEY SLIP**

DAT	E: 5-19. 2021	RECEIPT #: /3	35296	
	11 0	on HC	APPLICATION PERMIT TRANSFER	R-89111
CASH	X 1016	OTHER (IDENTIFY)	TOTAL REC'D	\$ 1,245.00
1083 TF	REASURY 4170 N	MISC CASH ACCT.		
0407	COPIES OTHER: (IDENTIFY)			\$
0243 ln	stream Lease 0244 N			ons. Water
1083 TF	REASURY 4270 V	VRD OPERATING ACCT		
0407 0410 0408 TC162 0240	MISCELLANEOUS COPY & TAPE FEES RESEARCH FEES MISC REVENUE (IDENTIFY) DEPOSIT LIAB. (IDENTIFY) EXTENSION OF TIME WATER RIGHTS SURFACE WATER	EXAM FEE	0202	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
0203	GROUND WATER	\$	0204	\$
0205	TRANSFER  WELL CONSTRUCTION  WELL DRILL CONSTRUCTOR  LANDOWNER'S PERMIT  OTHER (IDENTIFY)	EXAM FEE \$	0219 0220	RECORD FEE
0607 TR	EASURY 0467 H	IYDROELECTRIC		
0233 0231	POWER LICENSE FEE (FW/W HYDRO LICENSE FEE (FW/WI		LIC NUMBER	  \$  \$

**SPECIAL INSTRUCTIONS:** 

RETURN TO	APPLICANT	LETTER	ATTACHED
TILI OTHER	ALL LIVALLE		ALIAOHED

# Alternate Reservoir Application Completeness Checklist Minimum Requirements (ORS 537.409)

For use by WRD staff only

Application #:	0 79111	Receipt #:	12 = 201			
	P-89111 - AIT		135296			
Applicant Name:	HOB LLC (Frank Foti)	Amount Requested:	9.0AF			
Priority Date:	5/19/2021	Proposed Use:	Multi-purpose			
County:	Yamhill	POD's TRS &TL:	35, 5w, 22 TL: 1700			
WM #:	22 2004	Caseworker:	KF LG			
Reviewed by:	CM	Reviewed Date:	5/25/2021			
		- 52 L	AG SATING CO.			
🛚 Landowner nan	ne, mailing address and telephone	e number provided.				
Source and trib	utary listed. Notes: <u>NO WELLS-MUST HA</u> age application at the same time.	VE GW APP TO USE A WELL A	AS A SOURCECannot accept an E2			
🛚 Reservoir Locat	ion. TRSQQ and tax lot provided.	a distillation X is	ty certain and a			
🔀 Dam height, if a	applicable: 9	1245.0				
🛮 Property owner	ship indicated?					
If applicant doe	NO (Note: this includes lands not owned by diversion works, and any roads or right	applicant, upon which the so	e and mailing address listed? ource is located OR that are crossed by the			
Application sign	ned by the landowner(s)? All partic	es noted as applicants	s must sign the application.			
	termaster review sheet, signed					
	rvoir injure an existing water righ					
If YES, can conditions be applied to mitigate injury? YES NO If NO, return application.						
Completed OD	FW review sheet, signed and da	ted. Note: Must be complete	ed within last 6 months.			
	r pose a significant detrimental in					
If YES, can co	onditions be applied to mitigate t	he impact? 🔀 YES 🗀	NO N/A If NO, return application.			
Completed Lar Note: Does the use o	nd-Use Form or receipt signed by on land-use form match the proposed use on t	the appropriate plan	ning department official enclosed ed within the last 12 months.			
	<b>I Description</b> of all the property ir title insurance meets this require		lication. A copy of a deed, land			

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
1/41/4's clearly identified
Reservoir clearly identified **
Dam, or POD (if off-channel), coordinates referenced to a government land survey corne
Note: If no dam, use coordinates to the center of reservoir.
<b>▼Fees:</b> Amount of Water Requested:

Exam Fee Due:	\$ 725.00	
Exam Fee Submitted:	\$ 725.00	
Difference:	\$ 780	
Recording Fee Paid?	☐ Yes ☐ No \$	520.00
Total:	\$ 1245.00	



## Oregon Water Resources Department Alternate Reservoir Application

Main

Help

3 Return

Contact Us

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

Today's Date: Tuesday, May 25, 2021

Base Application Fee.		\$410.00
Proposed Dam Height in feet.	9	
Proposed Reservoir volume in Acre Feet.	9	\$315.00
	Subtotal:	\$725.00
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		\$1,245.00



Water Resources Department

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

May 25, 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-89111. 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		
Killi French, water Rights Specialist	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

C. MeblAm

Oregon Water Resources Department

cc:

File

HOB LLC

Kellan Lancaster, 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

BATCH	
<b>WD#:</b> _	

Oregon Department of State Lands 775 Summer Street, NE, Suite 100, Salem, OR 97301-1279

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.

1. Vicinity map (like a city map) with the precise parcel location indicated.

#### Please provide the following information:

2.					wing existing buildings, propert	
		my creeks and oth of the map is acceptable.		annotated	tax assessor's map is fine, and a	ì
3.		, and site address.		elow.		
٥.					wn if outside City limits)	
					,,	
	Site address			(or	nearest cross streets if no addre	ss)
4.	Township, R number is eq	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)	_
					fy):	
				-		
Phone		Fax		E-	Mail	
signatu	re below author	rizes DSL staff to co	onduct a wetland	determinati	which this request is made. My on and to access the property to to conducting a site visit.)	
Signat	ure:		Date			
Print N	Name:					

