Alternate Reservoir Application Completeness Checklist Minimum Requirements (ORS 537.409)

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:					
□ 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.							
☐ Reservoir Location. TRSQQ and tax lot provided.							
☐ Dam height, if applicable:							
☐ Property ownership indicated?							
☐ If applicant does <u>not</u> 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 reserve	oir injure an existing water righ	t? 🗆 YES 🗆 N	10				
If YES, can con-	ditions be applied to mitigate in	njury? 🗆 YES 🗆 N	O If NO, retu	urn 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 □ 1/41/4'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. 							
	Exam Fee Due:	\$					
	Exam Fee Submitted:	\$					
	Difference:	\$					
	Recording Fee Paid?	□ Yes □ No \$					
	Total	¢					