

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:	\$	

MONEY SLIP

DATE: 8-13-2021	RECEIPT #: 136149
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RECEIVED FROM: <i>The Luce Family Trust</i> <i>Jack E Luce; Cynthia R Luce</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">APPLICATION</td><td style="width: 50px;"></td></tr> <tr><td style="padding: 2px;">PERMIT</td><td></td></tr> <tr><td style="padding: 2px;">TRANSFER</td><td></td></tr> </table>	APPLICATION		PERMIT		TRANSFER	
APPLICATION							
PERMIT							
TRANSFER							

<input type="checkbox"/>	CASH	<input checked="" type="checkbox"/>	CHECK # <u>1034</u>	<input type="checkbox"/>	OTHER (IDENTIFY) _____	TOTAL REC'D \$ <u>1,384.00</u>
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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

		EXAM FEE			RECORD FEE
0201	SURFACE WATER	\$	0202		\$
0203	GROUND WATER	\$	0204		\$
0205	TRANSFER	\$			

WELL CONSTRUCTION

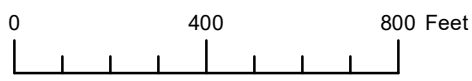
		EXAM FEE			RECORD FEE
0218	WELL DRILL CONSTRUCTOR	\$	0219		\$
_____	LANDOWNER'S PERMIT		0220		\$
_____	OTHER (IDENTIFY) _____				

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

SPECIAL INSTRUCTIONS:

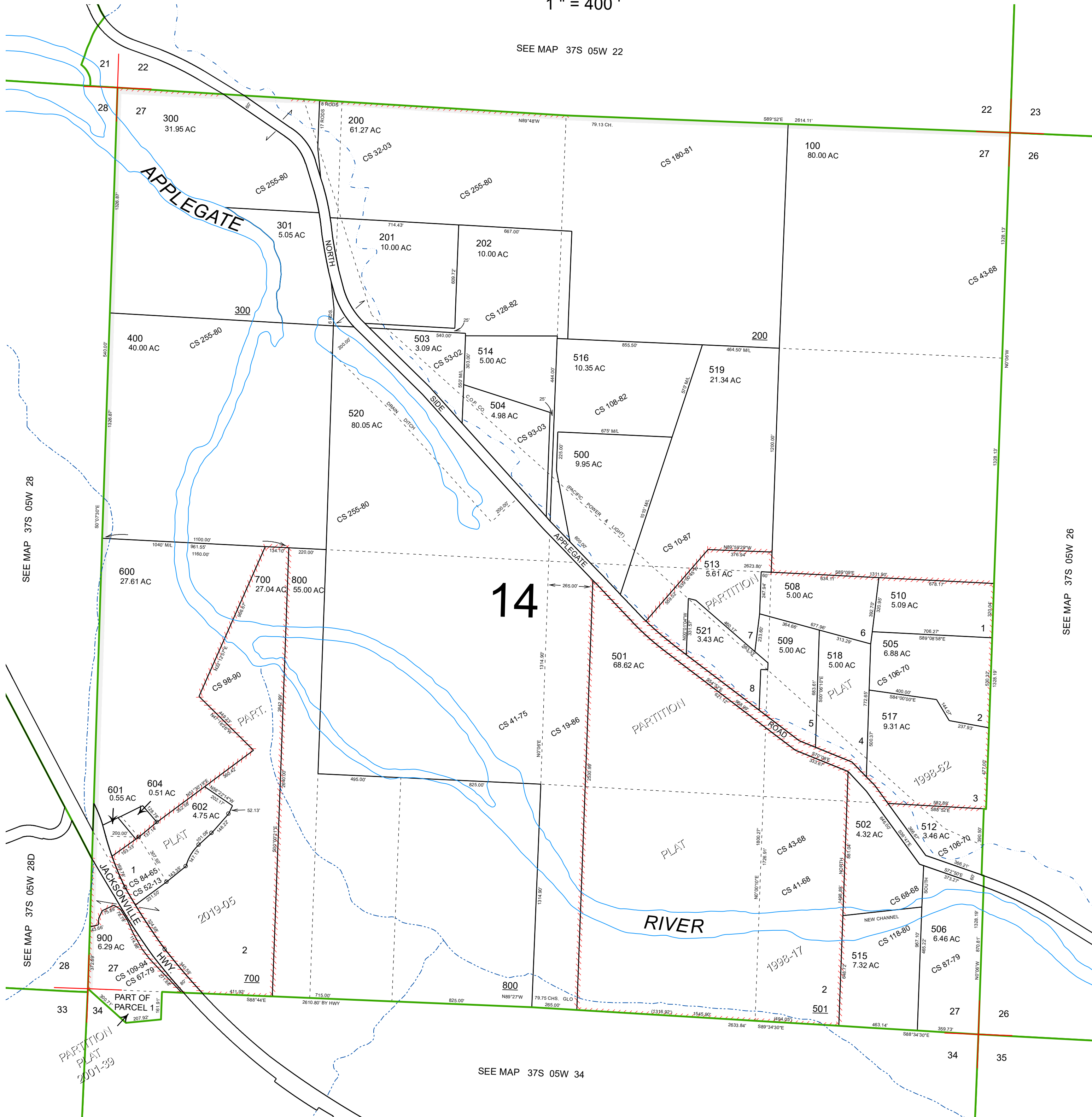
RETURN TO APPLICANT -- LETTER ATTACHED



SECTION 27 T.37S. R.5W. W.M.
JOSEPHINE COUNTY
1" = 400'

SEE MAP 37S 05W 22

- CANCELLED:
- 603
- 690
- 590
- 605
- 507
- 511



SEE MAP 37S 05W 28

SEE MAP 37S 05W 26

SEE MAP 37S 05W 28D

SEE MAP 37S 05W 34