



# Application for a Water Right Permit



For Ecology Use  
(Date Stamp)

OCT 26 8:25

Follow the attached instructions. Attach additional sheets as necessary.

- GROUND WATER     SURFACE WATER     DROUGHT  
 PERMANENT     SHORT TERM     TEMPORARY

DEPT. OF ECOLOGY  
FISCAL & BUDGET

**\*A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY COMPANY THIS APPLICATION.**

## Section 1. APPLICANT

I have participated in a pre-application conference with Ecology.

Applicant/Business Name: Alan Bird, Columbia River Investors, LLC		Phone No: 509-787-4578	Other No:
Address: 3559 RD. K NW			
City: Quincy	State: WA	Zip: 98848	
Email Address (if available): alan@weberfarms.net			

Contact Name (if different from above): Dan Haller		Phone No: 509-895-5462	Other No:
Relationship to Applicant: Consultant			
Address: 123 East Yakima Avenue, Suite 200			
City: Yakima	State: WA	Zip: 98901	
Email Address (if available): dhaller@aspectconsulting.com			

Legal Land Owner or Part Owner Name of the Proposed Place of Use: Jerry Milbrandt, Evergreen Vineyards, LLC		Phone No:	Other No:
Address: PO Box 1260			
City: Quincy	State: WA	Zip: 98848	
Email Address (if available): jerry@milbmgmt.com			

Department of Ecology  
 Water Resources Program  
 OCT 26 2015

For Ecology Use	APPLICATION NO: <u>64-33164</u>		SEPA: Exempt/Not Exempt
	Fee Paid: <u>358.75</u>	Check No: <u>19180</u>	ECY Coding: 001-001-WR1-0285-000011
Date Returned	By	Priority Date <u>10-26-2015</u>	By <u>CS</u> WRIA: <u>41 5006285</u>
Pre-application interviewer:			

## Section 2. STATEMENT OF INTENT

Do you own the land on which the proposed point of diversion/withdrawal is located?  YES  NO  
 If no, do you have legal authority to make this application for use of another's land?  YES  NO

Briefly describe the purpose of your proposed project: Obtain a water right through the Lake Sullivan Water Supply Project, or other Office of Columbia River Program, for near-term irrigation supply, and long-term municipal supply for the phased development of Spanish Castle Resort development and long-term irrigation supply for Evergreen Vineyards.\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Anticipated length of time to complete your project: 20\_\_

**Water Use** List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only)		Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
	<input type="checkbox"/> Cubic Feet per Second (CFS)	<input checked="" type="checkbox"/> Gallons per Minute (GPM)		
Irrigation of 180 acres and Municipal	1,616		590	Continuously
<b>TOTAL:</b>	1,616		590	

### Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)?  YES  NO

Is this request for a temporary permit?  YES  NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: \_\_\_/\_\_\_/\_\_\_ TO: \_\_\_/\_\_\_/\_\_\_

## Section 3. POINT OF DIVERSION OR WITHDRAWAL

(Complete A or B, and C below)

A.) If Surface Water Source

B.) If Ground Water Source

<input type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input checked="" type="checkbox"/> Lake <input type="checkbox"/> Other: _____ Source Name: _____ Tributary to: _____ Number of proposed diversion points: _____ Do you have an existing diversion? <input type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____ Well diameter & depth: To Be Determined (TBD) _____ Number of proposed points of withdrawal: TBD Do you have an existing well? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If available, attach Water Well Report and pump test. Well Tag ID No. BIF-384, BHT-566, BAT-163, BAT-162, BHT-564, APT - 322, BHW-041, APC-560, ALN-802, and three unspecified (one Pratt and two Taplett) _____
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C.) Point of Diversion/Withdrawal – Legal Description						
Parcel No.	¼	¼	Section	Township	Range	County
TBD			4, 9, 10, 15, 16	20	22E	Douglas
Lot(s)	Block(s)		Subdivision			
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: _____ Feet ( <input type="checkbox"/> North/ <input type="checkbox"/> South) and _____ feet ( <input type="checkbox"/> East/ <input type="checkbox"/> West) from the ( <input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> _____ ) corner of Section _____.						
Parcel No.	¼	¼	Section	Township	Range	County
Lot(s)	Block(s)		Subdivision			
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: _____ feet ( <input type="checkbox"/> North/ <input type="checkbox"/> South) and _____ feet ( <input type="checkbox"/> East/ <input type="checkbox"/> West) from the ( <input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> _____ ) corner of Section _____.						

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NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

### Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

See attached legal description						
¼	¼	Section	Twp.	Range	County	Parcel No.
		4, 9, 15, 10, & 16	20	22E	Douglas	

Do you own all the lands on which the proposed place of use is located?  YES  NO.

If no, do you have legal authority to make this application for use of another's land?  YES  NO

Provide owner name(s), address, and phone number: Jerry Milbrandt, Manager, Evergreen Vineyards, LLC, PO Box 1260, Quincy, WA 98848 \_\_\_\_\_

Are there any other water rights or claims associated with this property or water system?  YES  NO

If yes, provide the water right and/or claim numbers: G3-00374C, G4-24250P, CG4-GWC6371-A(A)@1, CG4-GWC6371-A(A)@2, G4-31516, G3-00670C@2, G4-24169CWRIS, G3-00374C, S4-013131CL@1(D) \_\_\_\_\_

**Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.**

**Section 5. WATER SYSTEM DESCRIPTION**

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): Water supply will be used to irrigate up to 180 acres via existing points of withdrawal, conveyance, and irrigation infrastructure. Future municipal water supply system will be developed as part of the Spanish Castle development, per pending design and an approved Department of Health Water System Plan. \_\_\_\_\_

**Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION**

(Complete A or B, and C below)

A.) Domestic Water Systems only	B.) Municipal Water Systems only <i>(defined under RCW 90.03.015)</i>
Projected number of connections to be served: Pending _____	Present population to be served water: Pending _____
Type of connections: _____ <i>(e.g., home, recreational cabin)</i>	Estimate future population to be served: _____ (20 year projection)
C.) Water System Planning	
Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
If yes, date plan was approved ____/____/____ Water System Number: Pending _____	

Name of water system: \_\_\_\_\_

Are you within the service area of an existing water system?  YES  NO

If yes, explain why you are unable to connect to the system: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES**

**Irrigation**

Total number of acres requested to be irrigated under this application = 180 \_\_\_\_\_ ACRES

*NOTE: Outline the area to be irrigated on your attached map.*

**Stockwater**

List number and kind of stock: \_\_\_\_\_

\_\_\_\_\_

Is the proposed project for a dairy farm?  YES  NO

**Other Proposed Farm Uses**

Describe all proposed uses: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Family Farm Water Act (RCW 90.66):**

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres?  YES  NO

Do you have a controlling interest in a Family Farm Development Permit?  YES  NO

If yes, enter Permit No: G4-24250P \_\_\_\_\_

## Section 8. OTHER WATER USES

### Hydropower

Indicate total feet of head \_\_\_\_\_ and proposed capacity in kilowatts: \_\_\_\_\_

Describe works: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Indicate all uses to which power is to be applied: \_\_\_\_\_

FERC License No: \_\_\_\_\_

### Mining/Industrial Use

Describe use, method of supplying and utilizing water: \_\_\_\_\_  
\_\_\_\_\_

### Other Use

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?  YES  NO

Are you proposing to store more than 10 acre-feet of water?  YES  NO

Will the water depth be 10 feet or more?  YES  NO

If you answered yes to any of the above questions, please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.*

## Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site: The Project Site is located at the intersection of Spanish Castle Road and WA-28W, approximately 10 miles west of Quincy, WA along WA-28W. \_\_\_\_\_  
\_\_\_\_\_

Site Address: 1803 Washington 28, Rock Island, WA 98850 \_\_\_\_\_

## Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Alan Birds  
 Print Name  
 (Applicant or authorized representative)

Nanbuil member of Columbia River Industries LLC 9-22-15  
 Signature Date

Alan Birds  
 Print Name  
 (Legal Owner or Part Owner Place of Use)

Nanbuil member of Columbia River Industries LLC 9-22-15  
 Signature Date

Jerry C Milbrandt  
 Print Name  
 (Legal Owner or Part Owner Place of Use)

Jerry C Milbrandt 9/22/15  
 Signature Date

Please check the region in which the project is located:

<p><b>*Submit your application to:</b></p> <p>DEPARTMENT OF ECOLOGY          CASHIERING SECTION          PO BOX 47611          OLYMPIA, WA 98504-7611</p>	<input checked="" type="checkbox"/> <b>Central Regional Office</b> 15 W Yakima Avenue, Suite 200 Yakima, WA 98902-3463 (509) 575-2490	<input type="checkbox"/> <b>Eastern Regional Office</b> 4601 N. Monroe Street Spokane, WA 99205-1265 (509) 329-3400
	<input type="checkbox"/> <b>Northwest Regional Office</b> 3190 – 160 <sup>th</sup> Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input type="checkbox"/> <b>Southwest Regional Office</b> PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

If you need this document in an alternate format, please call the Water Resources Program at 360-407-6872.  
 Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.

