$ 150.00
CK# 48053
1-13-16
VRJ

1 of 3

STATE OF WASHINGTON

APPLICATION FOR CHANGE/TRANSFER OF WATER RIGHT

For filing with the Department of Ecology or with County Conservancy Boards

A NON-REFUNDABLE MINIMUM FEE OF $50.00 PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION

(Check all that apply.)

- ☐ Change purpose(s) of use
- ☐ Add purpose(s) of use
- ☒ Change point(s) of diversion/withdrawal
- ☐ Add point(s) of diversion/withdrawal
- ☐ Change/transfer place of use
- ☐ Other (i.e. consolidation, intertie, trust water)

Explain: **Change in Point of Diversion**

FOR OFFICE USE ONLY

CHANGE No. CS4-CV1P45@1
WRIA 46 CHELAN
DATE ACCEPTED 02/27/2016 BY CS
FEE $ 150.00 REC'D 01/13/2016
CHECK No. 48053
SEPA: ☐ Exempt ☐ Not exempt

*****IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)*****

1. Applicant Information:

APPLICANT/BUSINESS NAME	PHONE NO.	FAX NO.
Taylor Orchards, LLC/E.R.V Orchards, LLC.	**(509) 669-6349**	( )
ADDRESS **6609 Roaring Creek Road**		
CITY **Entiat**	STATE **WA**	ZIP CODE **98822**

CONTACT NAME (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
Trout Unlimited-Washington Water Project c/o Aaron Penvose	**(509) 881-7689**	**(509) 888-4352**
ADDRESS **103 Palouse #14**		
CITY **Wenatchee**	STATE **WA**	ZIP CODE **98801**

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER	RECORDED NAME(S)
S4-CV1P45	Packwood
DO YOU OWN THE RIGHT TO BE CHANGED? X YES NO IF NO, PROVIDE OWNER(S) NAME and ADDRESS:	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? X YES ☐ NO	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application. **See Attachment B.**

FOR OFFICE USE ONLY

APP. NO._____ PERMIT NO. _____ CERT. NO._____ CERT. OF CHANGE NO._____

CS4-CV1P45@1

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Entiat River		NE	SW	3	25	20		

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Entiat River		NW	NW	3	25	20	262034330100	

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?
EXISTING: NO PROPOSED: YES, PROVIDE OWNER(S) NAME:

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation	.425 cfs	119.5	April 1st-October 31st

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation	.425 cfs	119.5	April 1st-October 31st

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:

Parcels 252003230050 and 252004140050 located within the W1/2 of Section 3 and the E1/2 E1/2 of Section 4, Township 25 North, Range 20 E.W.M.

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
		3 & 4	25	20	Chelan	See above	25

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? **YES** NO – IF NO, PROVIDE OWNER(S) NAME:

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:

Parcels 252003230050 and 252004140050 located within the W1/2 of Section 3 and the E1/2 E1/2 of Section 4, Township 25 North, Range 20 E.W.M.

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
		3 & 4	25	20	Chelan	See above	25

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? **YES** NO – IF NO, PROVIDE OWNER(S) NAME:

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?
YES **X** NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S):
CS4-02004J@1and CS4-02006J@1

6. Remarks and Other Relevant Information:

This water right change is part of the Roaring Creek Flow Restoration and Barrier Removal Project. The ESA listed salmonids that utilize the mainstem Entiat River and Roaring Creek subbasin include endangered Upper Columbia River spring Chinook (*Oncorhynchus tshawytscha*), as well as endangered steelhead (*Oncorhynchus mykiss*) and threatened bull trout (*Salvelinus confluentus*). Non-listed salmonids such as summer Chinook and Coho, and resident fish species such as westslope cutthroat trout are also found here.

The primary goal of this change is to improve flow conditions in Roaring Creek for the benefit of steelhead rearing. Therefore, we request expedited processing under WAC 173-152-050(2)(b) and (3)(a).

IF FOR SEASONAL OR TEMPORARY, START DATE ____/____/____ END DATE ____/____/____

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.

7. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

Michael R Jurgens — 12/7/15
(Applicant) **(Date)**

Michael R Jurgens — 12/7/15
(Water Right Holder) **(Date)**

Michael R Jurgens — 12/7/15
(Land Owner(s) of Existing Place of Use) **(Date)**

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

☐ APPLICATION FEE NOT ENCLOSED ☐ MAP NOT INCLUDED or INCOMPLETE

☐ ADDITIONAL SIGNATURES REQUIRED ☐ SECTION _____ IS INCOMPLETE

☐ OTHER/EXPLANATION:_____

STAFF: _____ ***DATE:*** ____/____/____