



# Application for a Water Right Permit

**RECEIVED**  
Ecology Use  
(Date Stamp)  
JAN 11 2016

**ENVIRONMENTAL ENHANCEMENT APPLICATION**  
Additional Qi (GPM) Only

DEPARTMENT OF ECOLOGY  
EASTERN REGIONAL OFFICE

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION FOR THE FOLLOWING:

- GROUND WATER       SURFACE WATER       PERMANENT  
 SHORT TERM       TEMPORARY

NO FEE REQUIRED FOR THE FOLLOWING:

- DROUGHT       COST REIMBURSEMENT

Follow the attached instructions. Attach additional sheets as necessary.

## Section 1. APPLICANT

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

Applicant/Business Name: JEAN-PAUL & KAREN GRIMAUD (BLUE MOUNTAIN LAVENDER FARM)		Phone No: (509) 529-3276	Other No:
Address: 345 Short Road			
City: Touchet	State: Washington	Zip: 99360	
Email Address (if available):			

Contact Name (if different from above): Bill Neve/Water Right Solutions		Phone No: (509) 540-4474	Other No:
Relationship to Applicant: Consultant			
Address: PO Box 511			
City: Walla Walla	State: Washington	Zip: 99362	
Email Address (if available): billneve.wrs@gmail.com			

Legal Land Owner or Part Owner Name of the Proposed Place of Use: Jean-Paul & Karen Grimaud		Phone No:	Other No:
Address: 345 Short Road			
City: Touchet	State: Washington	Zip: 99360	
Email Address (if available):			

For Ecology Use	APPLICATION NO: <u>G3-30752</u>	SEPA: <input checked="" type="checkbox"/> Exempt/Not Exempt
	Fee Paid: <input checked="" type="checkbox"/> Check No: _____	ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____	Priority Date <u>1-11-2016</u> By <u>KT</u> WRIA: <u>32 - Walla Walla</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: The purpose of this proposal is to provide additional Qi (gallons per minute) to an existing ground water right to bring the total authorized instantaneous withdrawal rate to 80 gallons per minute. This will allow for more efficient irrigation of the subject lands. No additional Qa (acre-feet) or irrigated acres are being requested.

Anticipated length of time to complete your project: Within 6 months of approval

**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 10.17 acres		47 gallons per minute	47.3 (non-additive)	1/1 - 12/31
<b>TOTAL:</b>		47 gpm (additive)	47.3 ac-ft (non-add)	

### 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 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: <u>6" diameter/203' deep</u> Number of proposed points of withdrawal: <u>1</u> 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. <u>AEQ-785</u>

**C.) Point of Diversion/Withdrawal – Legal Description**

Parcel No.	¼	¼	Section	Township	Range	County
340608420001	NW	SE	8	6N	34E	Walla Walla
Lot(s)	Block(s)		Subdivision			
4			Short Plat Book 3, Page 232			

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:

\_\_\_\_\_ Feet ( North/ South) and \_\_\_\_\_ feet ( East/ West)  
 from the (NW SW NE SE  \_\_\_\_\_) 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 ( North/ South) and \_\_\_\_\_ feet ( East/ West)  
 from the (NW SW NE SE  \_\_\_\_\_) corner of Section \_\_\_\_\_.

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.

Lot 4 of Short Plat recorded June 5, 1999 in Book 3 of Short Plats at Page 232 as Auditor's File No. 9906878 of Official Records of Walla Walla County, State of Washington. Situated in Walla Walla County, State of Washington. APN: 34-36-08-42-0001

¼	¼	Section	Twp.	Range	County	Parcel No.
NW	SE	8	6N	34E	Walla Walla	340608420001

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: \_\_\_\_\_

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: G3-20746(B) WW Adj. Cert. No. 764(B)

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): Well, pump, mainline, drip and above ground sprinkler application systems.

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**Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION**  
 (Complete A or B, and C below)

<b>A.) Domestic Water Systems only</b>	<b>B.) Municipal Water Systems only</b> <i>(defined under RCW 90.03.015)</i>
Projected number of connections to be served: _____  Type of connections: _____ <i>(e.g., home, recreational cabin)</i>	Present population to be served water: _____  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?  YES  NO

If yes, date plan was approved \_\_\_\_/\_\_\_\_/\_\_\_\_ Water System Number: \_\_\_\_\_

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: \_\_\_\_\_

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

**Irrigation**

Total number of acres requested to be irrigated under this application = 10.17 ACRES

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

**Stockwater**

List number and kind of stock: 0

Is the proposed project for a dairy farm?  YES  NO

**Other Proposed Farm Uses**

Describe all proposed uses: N/A

**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: \_\_\_\_\_

**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**

No other uses proposed.

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

**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: See attached map  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Site Address: 345 Short Road, Touchet, WA 99360  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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.

JEAN-PAUL GRIMAUD  
 Print Name  
 (Applicant or authorized representative)

[Signature]  
 Signature

02/5/2016  
 Date

KAREN GRIMAUD  
 Print Name  
 (Legal Owner or Part Owner Place of Use)

[Signature]  
 Signature

01-05-16  
 Date

\_\_\_\_\_  
 Print Name  
 (Legal Owner or Part Owner Place of Use)

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

Please check the region in which the project is located:

<p><b>*Submit your application to:</b>                  DEPARTMENT OF ECOLOGY                  CASHIERING SECTION                  PO BOX 47611                  OLYMPIA, WA 98504-7611</p>	<input type="checkbox"/> Central Regional Office 1250 W. Alder Street Union Gap, WA 98903-0009 (509) 575-2490	<input checked="" type="checkbox"/> Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1265 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 – 160 <sup>th</sup> Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

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



**ATTACHMENT FOR**  
**Application for Change/Transfer of Water Right**

**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 hereby grant 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.

Jean-Paul Grimaud

- Applicant Printed Name – Title
- Water Right Holder Printed Name
- Land Owner of Existing Place of Use Printed Name
- Land Owner of Proposed Place of Use Printed Name

- Applicant Signature
- Water Right Holder Signature
- Land Owner of Existing Place of Use Signature
- Land Owner of Proposed Place of Use Signature

(Date: MM/DD/YR YR)

Karen Grimaud

- Applicant Printed Name – Title
- Water Right Holder Printed Name
- Land Owner of Existing Place of Use Printed Name
- Land Owner of Proposed Place of Use Printed Name

- Applicant Signature
- Water Right Holder Signature
- Land Owner of Existing Place of Use Signature
- Land Owner of Proposed Place of Use Signature

(Date: MM/DD/YR YR)

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