

# Application for a Water Right Permit

For Ecology Use  
(Date Stamp)

76 JAN -6 8 51

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: MARVIN D. KOORN	Phone No: 360-675-9611	Other No: 360-914-0811
Address: 1923 Hastie LAKE ROAD		
City: OAK Harbor	State: WA	Zip: 98277
Email Address (if available): POP KOORN M @ yahoo . com		

Contact Name (if different from above):	Phone No:	Other No:
Relationship to Applicant:		
Address:		
City:	State:	Zip:
Email Address (if available):		

Legal Land Owner or Part Owner Name of the Proposed Place of Use: MARVIN D. KOORN	Phone No: 360-675-9611	Other No: 360-914-0811
Address: 1923 Hastie LAKE RD.		
City: OAK Harbor	State: WA	Zip: 98277
Email Address (if available): POP KOORN M @ yahoo . com		

For Ecology Use	Department of Ecology	
	APPLICATION NO: 51-28813	SEPA: Exempt/Not Exempt 151
	JAN 06 2016	
	ECY Coding: 001-001-WR1-0285-000011	
Date Returned	By	Priority Date 1/6/16 By DAD WRIA: 6
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: Continue to pump MARSH FOR  
IRRIGATING MY HAY + PASTURE FIELDS. MARSH HAS BEEN PUMPED  
FOR LAST 100 YEARS.

Anticipated length of time to complete your project: Completed.

**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				
Irrigation	100	0.223 cfs		Summer.
<b>TOTAL:</b>	100			

### 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: <u>MARSH.</u>	<input type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____
Source Name: <u>N/A</u>	Well diameter & depth: _____
Tributary to: <u>N/A</u>	Number of proposed points of withdrawal: _____
Number of proposed diversion points: <u>3</u>	Do you have an existing well? <input type="checkbox"/> YES <input type="checkbox"/> NO
Do you have an existing diversion? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	If available, attach Water Well Report and pump test.
	Well Tag ID No. _____

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

Parcel No.	¼	¼	Section	Township	Range	County
RI 367-1170 295-1450			32 32	17 17	1 1	ISLAND
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 \_\_\_\_\_.

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.

¼	¼	Section	Twp.	Range	County	Parcel No.

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: \_\_\_\_\_ Eugene KOORN  
 360-679-1799 664 NE LATEEN  
 OAK Harbor WA.  
 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: \_\_\_\_\_

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.

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## Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): Electric 3hp pump and/or portable 5hp flush pumps. 3" irrigation pipe, up to 20 sprinklers, irrigation used on pasture and hay land. Irrigation has been done from Marsh for 40+ years. Prior to that for 50+ years the water was pumped into Hastie Lake. County allowed developments have blocked the ditches and ability to pump to Hastie Lake. Irrigation is used on land that surrounds the Marsh. This is not a spring, creek, river, lake or pond. If we had known in 1974 that Marsh land need a permit we would have checked the box at that time.

## 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: _____  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)
<b>C.) Water System Planning</b>	
Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input type="checkbox"/> YES <input type="checkbox"/> 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? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, explain why you are unable to connect to the system: _____ _____ _____ _____ <div style="text-align: right;">                         Department of Ecology                           JAN 06 2013                           Water Resources Program                     </div>	

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

**Irrigation**

Total number of acres requested to be irrigated under this application = 4/0 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: \_\_\_\_\_

**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: Department of Ecology

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

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**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: take SR20 South From OAK Harbor  
take a right onto Hashekk Rd. around 5 Corners up hill on your  
left. 1000 Feet East of Zylstra Road

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

Site Address: 1923 Hashe Lake Rd and 1900 Nubian way  
OAK Harbor, WA. 98277

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

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## Section 11. REQUIRED SIGNATURES

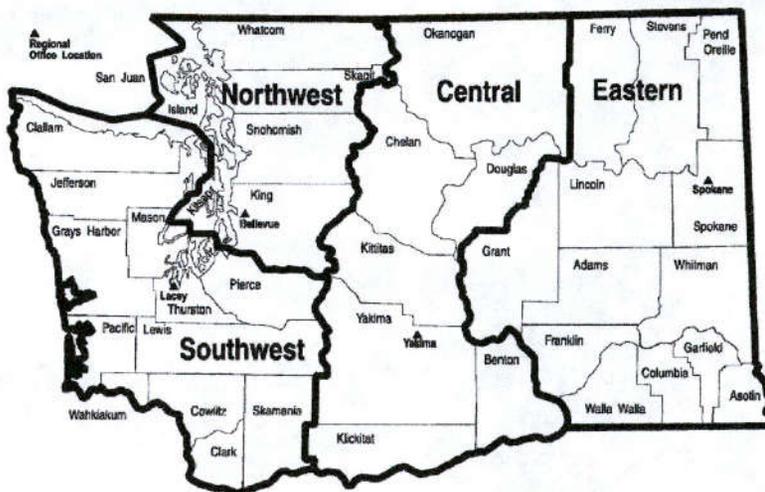
I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the 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.

<p><u>MARVIN D KOORN</u>                  Print Name                  (Applicant or authorized representative)</p>	<p><u>Marvin D Koorn</u>                  Signature</p>	<p><u>12/28/15</u>                  Date</p>
<p><u>MARVIN D KOORN</u>                  Print Name                  (Legal Owner or Part Owner Place of Use)</p>	<p><u>Marvin D Koorn</u>                  Signature</p>	<p><u>12/28/15</u>                  Date</p>
<p>_____                  Print Name                  (Legal Owner or Part Owner Place of Use)</p>	<p>_____                  Signature</p>	<p>_____                  Date</p>

**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 type="checkbox"/> Central Regional Office 1250 W. Alder Street Union Gap, WA 98903-0009 (509) 575-2490	<input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1265 (509) 329-3400
	<input checked="" 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.



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