



STATE OF WASHINGTON
**SEASONAL CHANGE
 APPLICATION**

GROUND WATER SURFACE WATER (OFFICIAL USE)WRIA _____

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

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

1. APPLICANT INFORMATION:

APPLICANT/BUSINESS NAME Snoqualmie Valley Preservation Alliance	PHONE NUMBER (425)549-0316	FAX NUMBER ()
ADDRESS P.O. Box 1148		
CITY Carnation	STATE WA	ZIP CODE 98014

CONTACT NAME (IF DIFFERENT FROM ABOVE) Cynthia Krass	PHONE NUMBER (425)922-5725	FAX NUMBER ()
ADDRESS P.O. Box 1148		
CITY Carnation	STATE WA	ZIP CODE 98014

2. WATER RIGHT INFORMATION: (One water right per application)

WATER RIGHT OR CLAIM NUMBER S1-*09221CWRIS	RECORDED NAME(S) Willard Pearson
DO YOU HOLD LEGAL TITLE TO THE RIGHT TO BE CHANGED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME: Sebastian and Lisa Gunningham	

3. POINT(S) OF DIVERSION/WITHDRAWAL:

A. EXISTING

SOURCE	#	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Snoqualmie River		SE	NW	16	25	7E	1625079011	

B. PROPOSED

SOURCE	#	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Snoqualmie River		NE	NE	01	25	6E	0125069002	

DO YOU OWN THE EXISTING AND/OR PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL? no
 EXISTING YES NO PROPOSED YES NO – IF NO, PROVIDE OWNER(S) NAME: Existing: Gunningham; proposed: Michael Blakely
 S1-*09221C@4

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner for the above point(s) of diversion/withdrawal, please include an attachment.

Please send payments to:

**DEPARTMENT OF ECOLOGY
 CASHING OFFICE
 PO BOX 47611
 OLYMPIA, WA 98504-7611**

Department of Ecology

MAR 21 2016

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4. PLACE OF USE:
A. EXISTING

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:						
Government lot 4, SE-NW-16-25-7E						
¼	¼	SEC.	TWP.	RGE.	COUNTY	TOTAL # OF IRRIGATED ACRES
SE	NW	16	25N	7E	King	37
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO – IF NO, PROVIDE OWNER(S) NAME:						
Sebastian and Lisa Gunningham						

B. PROPOSED

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PROPOSED TO BE USED:						
Quarter-Quarter-Section-Township-Range NE-NE-01-25-06						
¼	¼	SEC.	TWP.	RGE.	COUNTY	TOTAL # OF IRRIGATED ACRES
NE	NE	01	25	6E	King	2
DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO – IF NO, PROVIDE OWNER(S) NAME:						
Michaele Blakely						

Attach a detailed map of your proposed seasonal change. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. Also, for irrigation purposes, you must indicate on the map those lands that will not be irrigated within the original place of use.

ARE THERE ANY PENDING APPLICATIONS, WATER RIGHTS OR CLAIMS RELATED TO THE SAME PROPERTY AS THE ONE PROPOSED FOR CHANGE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO – IF YES, PROVIDE THE NUMBER(S):
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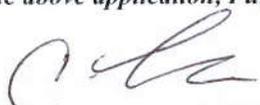
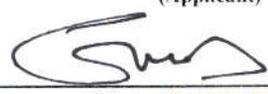
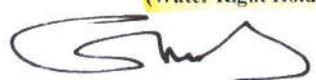
Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. This may be included in your irrigation plan.

5. REMARKS AND OTHER RELEVANT INFORMATION:

SVPA is a nonprofit active in the Snoqualmie Valley, acting as applicant as part of a larger effort to develop an irrigation strategy for the Snoqualmie Valley Agricultural Production District.
This transaction is similar to the seasonal change authorized in 2015 using the control number CS1-*09221C2. Only the quantity has changed for the 2016 application.

6. 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 grant staff from the Department of Ecology 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.

 _____ (Applicant)	3 / 3 / 16 _____ (Date)
 _____ (Water Right Holder)	3 / 12 / 16 _____ (Date)
 _____ (Land Owner(s) of Existing Place of Use)	3 / 12 / 16 _____ (Date)

Department of Ecology

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