



For Ecology Use
(Date Stamp)

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WA State Department
of Ecology (SWRO)

WATER RESOURCES
Application for Change/Transfer of a Water Right

You must include a \$50.00 minimum filing fee with this application for:

(Check all that apply.)

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

Explain: _____

No filing fee is required for applications for:

- Drought
- Cost Reimbursement
- Water Conservancy Board

FOR OFFICIAL USE ONLY	
DATE APPLICATION RECEIVED	<u>2-2-16</u>
CHECK NO. _____	FEE \$ _____
DATE ACCEPTED <u>2-2-16</u>	BY <u>[Signature]</u>
CHANGE NO. <u>CG2-22154</u>	
COUNTY <u>Clark</u>	WRIA <u>28</u>
SPECIAL AREA _____	
SEPA: <input type="checkbox"/> EXEMPT <input type="checkbox"/> NOT EXEMPT	
ECY CODING: 001-002-WR10285-000011	
APP NO. _____	PERMIT NO. _____
CERT NO. _____	CERT OF CHG NO. _____

I have completed a pre-application consultation with Ecology.

1. Applicant Information

APPLICANT/BUSINESS NAME Clark Public Utilities		PHONE NO. 360-992-8023	FAX NO. 360-992-8026
ADDRESS 8600 NE 117th Avenue			
CITY Vancouver		STATE WA	ZIP CODE 98662
EMAIL ADDRESS (IF AVAILABLE) dcharlson@clarkpud.com			
CONTACT (IF DIFFERENT FROM ABOVE) Jill Van Hulle		PHONE NO. 360-413-1510	FAX NO.
ADDRESS 2377 Eastlake Avenue East			
CITY Seattle		STATE WA	ZIP CODE 98102
EMAIL ADDRESS (IF AVAILABLE) Jill@pgwg.com			
LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE		PHONE NO.	FAX NO.
ADDRESS			
CITY		STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE)			

2. Water Right Information

WATER RIGHT OR CLAIM NUMBER G2-22154	RECORDED NAME(S) Robert McBain and Hockinson Water Association
DO YOU OWN THE RIGHT TO BE CHANGED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS: _____	
HAS THE WATER BEEN USED AS AUTHORIZED IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

- Attach copies of any documentation that shows the historical use of water that has occurred since the right was established.
- If you have a water system plan or conservation plan, please include a copy with your application.

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Well 103		N	NW	28	3	3E		

B. Proposed (if different from 3.A.)

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Well 111		NE	SW	6	2	3E		ABY-234

C. DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: YES NO PROPOSED: YES NO – IF NO, PROVIDE OWNER NAME(S): _____

- Include copies of all associated water well reports.
- 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
Community Domestic Supply	58	93	Continuously

B. Proposed (if different from 4.A.)

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Municipal Supply	58	93	year-round as needed

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
Area served by the Hockinson Water Association, Inc., within Sections 1, 12 - 15, 21 - 28 and 33 and the N 1/2 of Sections 34, 35, and 36, ALL in T. 3 N., R. 2 E.W.M.							
AND Sections 3 - 10, 15 - 22, 27 - 34							
ALL in T. 3 N., R. 3 E.W.M., and Sections 4 - 9 and the N 1/2 of Sections 16 - 18 All in section T. 2 N., R. 3 E.W.M., AND sections 27 - 34, and the S 1/2 of Sections 19 - 22, ALL in T. 4 N., R. 3 E.W.M. EXCEPT rights of way.							
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
					Clark		
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 NAME(S): CPU is a municipal water purveyor							

B. Proposed (if different than 5.A.)

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
Area served by Clark Public Utilities							
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
					Clark		
DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? <input type="checkbox"/> YES <input type="checkbox"/> NO							
IF NO, PROVIDE OWNER NAME(S):							

- 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.

D. Are there any additional water rights or claims related to the same property as the one proposed for change/transfer?
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): CPU has numerous water rights, see WSP

6. Remarks and Other Relevant Information:

Application G2-29293 is pending for this well.
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. For further information, contact:

Department of Revenue Phone (360) 570-3265
 Real Estate Excise Tax

ECY 040-1-97 (Rev 04-2015) To request ADA accommodation including materials in a format for the visually impaired, call Ecology Water Resources Program at 360-407-6872. Persons with impaired hearing may call Washington Relay Service at 711. Persons with speech disability may call TTY at 877-833-6341.

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 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 preparing this above application, I understand that all responsibility for the accuracy of the information rests with me.

<u>Daniel J. Charlson</u> Applicant Printed Name - Title	<u>Daniel J. Charlson</u> Applicant Signature	<u>01-29-2016</u> (Date: MM/DD/YYYY)
<u>Daniel J. Charlson</u> Water Right Holder Printed Name	<u>Daniel J. Charlson</u> Water Right Holder Signature	<u>01-29-2016</u> (Date: MM/DD/YYYY)
<u>Daniel J. Charlson</u> Land Owner of Existing Place of Use Printed Name	<u>Daniel J. Charlson</u> Land Owner of Existing Place of Use Signature	<u>01-29-2016</u> (Date: MM/DD/YYYY)
<u>Daniel J. Charlson</u> Land Owner of Proposed Place of Use Printed Name	<u>Daniel J. Charlson</u> Land Owner of Proposed Place of Use Signature	<u>01-29-2016</u> (Date: MM/DD/YYYY)

<p>*Submit your application to:</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 type="checkbox"/> Northwest Regional Office 3190 - 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input checked="" type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300