



Water Resources Program
Application for New Water Progress Sheet
WATER BUDGET NEUTRALITY

SURFACE WATER

GROUND WATER

WR ID #: **5964442**

Application No. **G4-35650**

WRIA/COUNTY: **39 Kittitas**

Relates to CS4-02255(A)(B) or (C)CTCL@2
 SwiftWater Ranch LLC
 Court Claim 02255(A)(B) or (C)
 (06-30-1890) Subasin 3

Applicant(s):	Contact(s) / Agent
Stan Moshier & Lori Campbell twosquarefeet@comcast.net	Traci Shallbetter, Attorney 3201 Airport Road Cle Elum WA 98922-9222 509.260.0037 traci@shallbetterlaw.com

ASSIGNED (SEE BACK OF PAGE)

Date Application received
 (Request for Determination of
 Water Budget Neutrality):

October 22, 2013

Initial fee rec'd:
 NOT REQUIRED

Yes X No

Additional fee: \$ _____ Date requested: _____ Date rec'd: _____

Returned for completion or correction: _____ Received: _____

PUBLICATION:

Prepared by: _____ Date: _____ Date Notice sent: _____

Date Affidavit rec'd: _____ Checked by: _____ Amended Notice: _____

PROTESTS: Date: _____ By (name): _____

Date: _____ By (name): _____

INTERESTED PARTIES:

WDFW: _____ County DOH: _____ Tribes: _____

USBR: _____ State DOH: _____ Other: _____

SEPA: Yes No - Exempt

EXAM: Exam Date: _____ **WBN Letter/ROE Issued:** _____ Amended ROE Issued: _____

PERMIT: Permit Issued: _____ **2-14-14** Super/Amended Permit: _____ Temp Permit: _____

Beginning of Construction (BC): Due date: _____

Date sent: _____ Date rec'd: _____

Extensions: _____

Completion of Construction (CC): Due date: _____

Date sent: _____ Date rec'd: _____

Extensions: _____

Project Completion (PA): Due date: _____

Date sent: _____ Date rec'd: _____

Extensions: _____

Meter Installed: Yes No Meter ID No. _____

Proof Exam Required: Yes No Date exam made: _____ By: _____

APPROVED FOR CERTIFICATE: Yes No

Cert. fee: _____ Date letter sent: _____ Date rec'd _____ Date Certificate Issued: _____

TAX PARCEL ID: _____ Certificate No. _____

ORIGINAL APPLICANT: Stan Moshier & Lori Campbell
ASSIGNMENT INFO: SUBJECT TO REAL ESTATE EXCISE TAX

Assignment received: _____ **Assignment approved:** _____

Assigned To: _____
Address: _____
Phone: _____

Submitted to Department of Revenue Date: _____ Initial: _____
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Copy of Application/ROE/Permit sent to assignee

Assignment received: _____ **Assignment approved:** _____

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