



Application for a Water Right Permit

For Ecology Use
(Date Stamp)



14 JAN 24 8:39

DEPT. OF ECOLOGY
FISCAL & BUDGET

Follow the attached instructions. Attach additional sheets as necessary.

- GROUND WATER SURFACE WATER
 PERMANENT SHORT TERM TEMPORARY
 DROUGHT

***A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION.**

Section 1. APPLICANT

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

Applicant/Business Name: Tom Burnett	Phone No: 509-687-3246	Other No:
Address: 19626 S Lakeshore Road		
City: Chelan	State: WA	Zip: 98816
Email Address (if available): Tburnett63@hotmail.com		

Contact Name (if different from above): Don Phelps, PE	Phone No: 509-679-3116	Other No: 509-687-9065
Relationship to Applicant: Consultant		
Address: PO Box 159		
City: Chelan	State: WA	Zip: 98816
Email Address (if available): DonPhelps@aol.com		

Legal Land Owner or Part Owner Name of the Proposed Place of Use: Tom Burnett	Phone No: 509-687-3246	Other No:
Address: 19626 S Lakeshore Road		
City: Chelan	State: WA	Zip: 98816
Email Address (if available): Tburnett63@hotmail.com		

For Ecology Use	APPLICATION NO: <u>64-33117</u>	SEPA: Exempt/Not Exempt
	Fee Paid: <u>50⁰⁰</u>	Check No: <u>62926 01-24-14</u> ECY Coding: 001-001-WR1-0285-000011
Date Returned	By	Priority Date <u>01-24-2014</u> By <u>[Signature]</u> WRIA: <u>47 CHELAN</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: Create public water supply for 40 homes

Anticipated length of time to complete your project: 10 years

COST REIMBURSEMENT

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)		
Domestic/Municipal	50		13.3	Continuous
TOTAL:	50		13.3	

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 inch x 410 ft</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>AHK986</u>

C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	¼	¼	Section	Township	Range	County
292130110050	NE	NE	30	29	21	Chelan
Lot(s)	Block(s)		Subdivision			Well log has the wrong location identified

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

775 Feet (North/ South) and 640 feet (East/ West)
 from the (NW SW NE SE) corner of Section 19, 20, 29 & 30.

This parcel is in the SWSWSW of section the number sec 29 - NOT in sec 30

Parcel No.	¼	¼	Section	Township	Range	County
Lot(s)	Block(s)		Subdivision			County

If known, enter the distances in feet from the point of diversion or withdrawal to the

_____ feet (North/ South) and _____ feet (East/ West)
 from the (NW SW NE SE) corner of Section _____

Meters + boards puts well on parcel 292129130200 owned by JKOS LLC NE NE SEC 30

NOTE: If more than two points of diversion/withdrawal attach additional information on a sep

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.

Sections 29 & 30 of T29N, R21E (see attached map)						
¼	¼	Section	Twp.	Range	County	

NO Legal or map attached

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: As manger of the Ranch at Lake Chelan water supply system I
have the authority to act on behalf of all users of the water system and I own the remainder of the property

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: SWC 4525 and SWC 2532

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): System will consist of a pump and reservoir with distribution system serving the existing and proposed homes

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: _____	Present population to be served water: <u>24</u>
Type of connections: _____ <i>(e.g., home, recreational cabin)</i>	Estimate future population to be served: <u>80-100</u> (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? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, date plan was approved <u>3/27/2012</u> Water System Number: <u>AC742A</u> <u>Well # AHK986</u>	
Name of water system: <u>The Ranch at Lake Chelan</u>	
Are you within the service area of an existing water system? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
If yes, explain why you are unable to connect to the system: _____	

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = 0 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: _____

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

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: A Mt Baker Silo type reservoir will be constructed with under 250,000 gallons of storage

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: Leave Wenatchee on SR97-A and turn left on SR 971, go to the stop sign and turn left on S Lakeshore Road, follow road up Lake Chelan until you come to 19626 S Lakeshore Road on the left side of the road.

Site Address: 19626 S Lakeshore Road, Chelan WA

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>THOMAS W. BURNETT</u> Print Name (Applicant or authorized representative)</p>	<p><u>[Signature]</u> Signature</p>	<p><u>1/18/14</u> Date</p>
<p><u>THOMAS W. BURNETT</u> Print Name (Legal Owner or Part Owner Place of Use)</p>	<p><u>[Signature]</u> Signature</p>	<p><u>1/18/14</u> Date</p>
<p><u>THOMAS W. BURNETT</u> Print Name (Legal Owner or Part Owner Place of Use)</p>	<p><u>[Signature]</u> Signature</p>	<p><u>1/18/14</u> Date</p>

Please check the region in which the project is located:

<p>*Submit your application to: DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611</p>	<input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	<input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Spokane, WA 99205-1295 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 – 160 th 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 need this document in an alternate format, please call the Water Resources Program at 360-407-6872. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

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

