

Water Resources Program
Request for Determination of Water Budget Neutrality

SURFACE WATER GROUND WATER

Please ensure that the form is completely filled out.

Incomplete forms will lead to longer processing times, and may be rejected.

Section 1. APPLICANT		
Applicant/Business Name: <i>RICHARD S. HOWARD</i>	Phone No: <i>(425) 602-6079</i>	Other No: <i>(509) 925-9745</i>
Address: <i>12914 176th R NE</i>		
City: <i>REDMOND</i>	State: <i>WA</i>	Zip: <i>98052</i>
Email Address (optional): <i>RICH HOWARD @ EAGLE HM. COM</i>		

Contact Name (if different from above): <i>Suzanne Blakney</i> <i>Assistant</i> Jason McCormick	Phone No: <i>509.607.3513</i>	Other No: <i>509.925.5601</i>
Project Manager, Washington Water Trust		
Relationship to Applicant: Consultant to the Estate of Harry Masterson <i>929-2822</i>		
Address: 103 East 4 th Avenue, Ste 203		
City: Ellensburg	State: WA	Zip: 98926
Email Address (optional): <i>jason@washingtonwatertrust.org</i> <i>Suzanne</i>		

Section 2. STATEMENT OF INTENT
Briefly describe the purpose of your proposed project: <u>APPLICATION FOR RESIDENTIAL</u> <u>WATER WELL DOMESTIC, LAWN &/OR NON-COMMERCIAL GARDEN FOR ONE HOME</u>
Anticipated length of time to complete your project: <u>12 mos.</u>
Is this for an existing use, established prior to July 16, 2009? ___ Yes <input checked="" type="checkbox"/> No
If yes, when was the water first regularly and beneficially used? _____

For Ecology Use	APPLICATION NO: <i>64-35731</i>	SEPA: Exempt/Not Exempt
	Fee Paid: <i>0</i>	Check No: <i>8</i>
Date Returned _____	By _____	Priority Date <i>11-21-2014</i> By <i>CS</i> WRIA: <i>39 Kitt</i>

Water Use: List all proposed uses and the quantity required for each. (For example: domestic, group domestic, lawn or commercial garden, municipal water supply, stock watering or industrial.)

DOMESTIC + 500 S.F. GARDEN

Purpose(s) of Use	Rate (check one box only) <input type="checkbox"/> Cubic Feet per Second (CFS) <input type="checkbox"/> Gallons per Minute (GPM)	Total Water Use* in Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
DOMESTIC		0.393	CONTINUOUS
GARDEN		0.022	SEASONAL
TOTAL:		0.414	

*Total water use is the total quantity of water required for each use. (1 acre-foot = 325,851 gallons). For example calculations, located at:
<http://www.ecy.wa.gov/programs/wr/cro/wtrchg.html>

Section 3. POINT OF DIVERSION OR WITHDRAWAL

Complete A or B, and C below

A.) If Surface Water Source

Spring Creek River Lake
 Other: _____
 Source Name: _____
 Tributary to: _____
 Number of proposed diversion points: _____
 Do you have an existing diversion? YES NO

B.) If Ground Water Source

Do you have an existing well? YES NO
 Well(s) Other: _____
 Existing well diameter & depth: _____
 If available, attach Water Well Report and pump test.
 Well Tag ID No. _____
 Number of proposed points of withdrawal: _____

C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	¼	¼	Section	Township	Range	County
20-14-17050-0411	SE	SW	17	20 N	14 E	KITITAS
Lot(s)	Block(s)		Subdivision			
11	4		PINE GLEN			

If available, GPS (Global Positioning System) device location:

Latitude: _____ N Longitude: _____ W

Datum and units (for example NAD83 and decimal degrees, etc): _____ (required for all GPS locations)

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)

39
KIT

from the (NW SW NE SE) corner of Section _____.

NOTE: If more than one point of diversion/withdrawal, attach additional information on a separate sheet of paper. A map identifying the well location within the parcel is required for all existing wells proposed for use under this request (see below).

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. Please ensure that the well location and parcel number listed in Section 3 matches the well location on the site map and on the well log. If there are any differences please provide an explanation on a separate sheet of paper. Unclear well locations may cause delays in processing the request.

Section 4. WATER SYSTEM INFORMATION

Complete A or B, C, D, E and F below

A.) Domestic Water Systems only

Projected number of connections to be served:

_____ 1 _____

Type of connections: _____ HOME _____
(e.g., home, recreational cabin)

B.) Municipal Water Systems only

(defined under RCW 90.03.015)

Present population to be served water:

Estimate future population to be served:
_____ (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? YES 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? YES NO

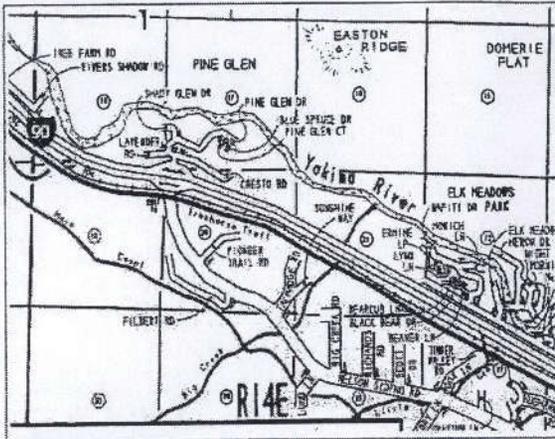
If yes, explain why you are unable to connect to the system: _____

D.) On-Site Septic

Will there be an on-site septic system? YES NO

NONE AVAILABLE; SEPTIC IN STUBLES 2007
SEE ATTACHED.

If yes, please provide a copy of the property covenant that restricts or prohibits trees or shrubs over the septic



Vicinity Map: NTS

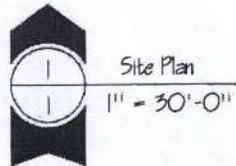
General Notes:

1. All work shall be in accordance with uniform plumbing code; WA State Dept. of Health Chapter 246-272 WAC On-Site Sewage Systems JAN.1,95 and the National Electrical Code
2. System designed in accordance with:
 - a) Kittitas County Health Dept. Site Evaluation Report
 - b) DOH Guidelines For Pressure Systems; April 1999
 - c) DOH Guidelines For Sand Lined Trench Systems; April, 1999
3. All Construction Inspection by Kittitas County Health Department and/ or Engineer / Designer.

Legend:

- E.G. - Existing Grade
- F.G. - Finish Grade
- TBM - Temporary Bench Mark
- P/L - Property Line
- 98.3 - Existing Elevation

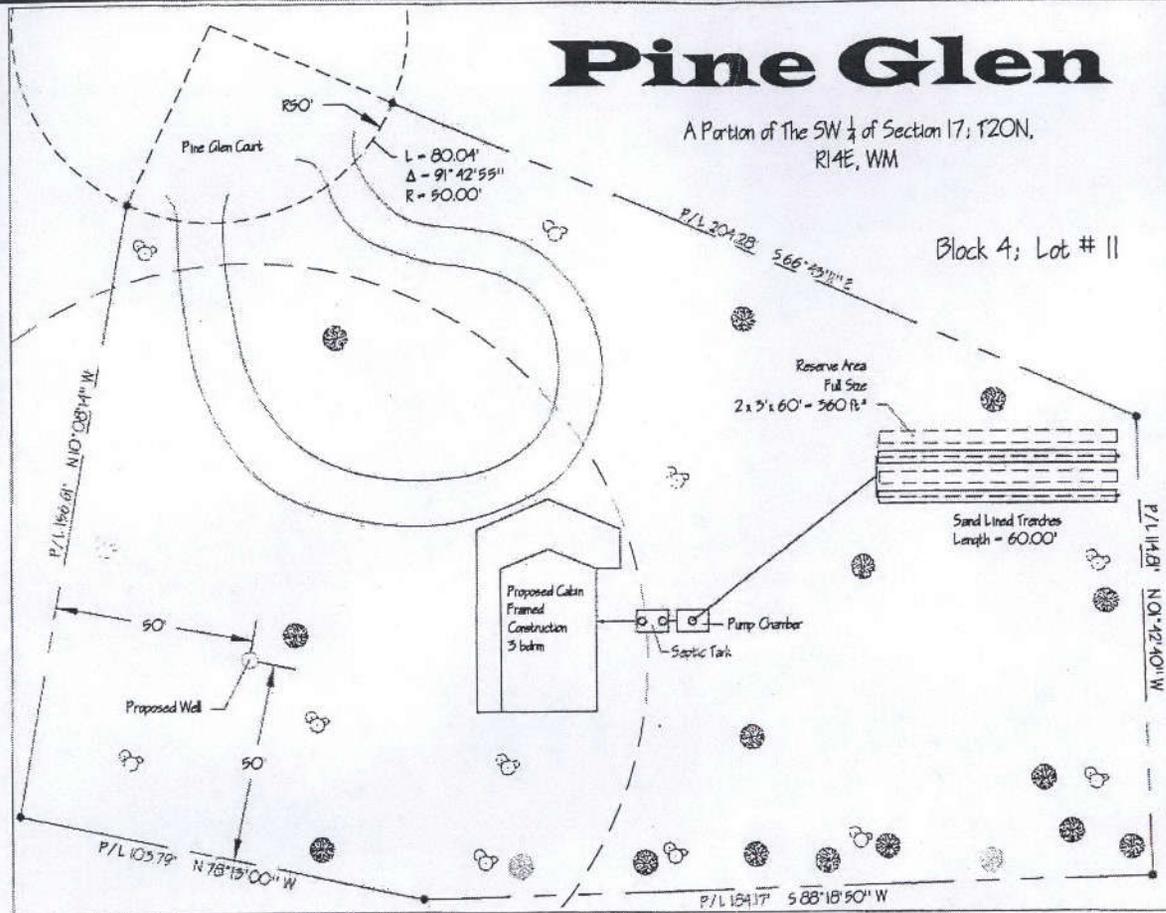
- TH - Soil Log Test Holes
- E.L. - Elevation
- D - Drains
- E - Underground Power
- Tel - Underground Telephone



Pine Glen

A Portion of The SW 1/4 of Section 17; T20N, R14E, WM

Block 4; Lot # 11



Survey References: Volume 3 of Plats, Page 51, Records of Kittitas County, State of Washington

Assessors Parcel # 20-14-17050-0411



AMERIA ENGINEERING
 504 Columbia Ave.
 Cle Elum, WA. 98922 (509) 674-9125

Ernest & Judy Huertas
 3846 52nd Ave. W.
 Seattle, WA 98199

0/5 Sewer System

09/22/06

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