



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: POU error; Sec. 35 should be Sec. 36

No filing fee is required for applications for:

- Drought
- Cost Reimbursement
- Water Conservancy Board

FOR OFFICIAL USE ONLY	
DATE APPLICATION RECEIVED	<u>07-24-2015</u>
CHECK NO. <u>4</u>	FEE \$ <u>4</u>
DATE ACCEPTED <u>07-24-2015</u>	BY <u>[Signature]</u>
CHANGE NO. <u>C64-27311C</u>	
COUNTY <u>YAKIMA</u>	WRIA <u>38</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 State of Washington Department of Fish & Wildlife Naches Hatchery attn: Matthew Mathes	PHONE NO. 509-965-1495	FAX NO.
ADDRESS 3410 South Naches Road		
CITY NACHES	STATE WA	ZIP CODE 98937
EMAIL ADDRESS (IF AVAILABLE) matthew.mathes@dfw.wa.gov		
CONTACT (IF DIFFERENT FROM ABOVE) State of Washington Department of Fish & Wildlife Real Estate Section attn: Katherine Ryf	PHONE NO. 360-902-8393	FAX NO.
ADDRESS 600 Capitol Way North		
CITY Olympia	STATE WA	ZIP CODE 98501
EMAIL ADDRESS (IF AVAILABLE) katherine.ryf@dfw.wa.gov		

C64-27311C

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 G4-27311C	RECORDED NAME(S) Washington State Department of Game
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 #
Infiltration Trench N46.66177 W120.63941	#2	SE	NE	36	14N	17E	17143614001	

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

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Well (domestic) N46.66121 W120.64026	1	SE	NE	36	14N	17E	17143614001	TBD
Well - TBD	2	SE	NE	36	14N	17E	17143614001	BIO520

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
Non-consumptive fish propogation	900 gpm	(1448)	continuous

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

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
No Change			

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:

That portion of the SENE of Section 35, T. 14 N., R. 17; E.W.M., lying east of the Congdon Canal and west of the South Naches Road (county).

****NOTE:** The ROE and Certificate appear to have an error referencing Sec. 35 vs. the applied for Sec. 36.

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
SE	NE	35	14 N	17 E	Grant		

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? YES NO

IF NO, PROVIDE OWNER NAME(S):

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

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:

That portion of the SENE of Section 36, T. 14 N., R. 17; E.W.M., lying east of the Congdon Canal and west of the South Naches Road (county).

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
SE	NE	36	14 N	17 E	Grant	17143614001	

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? YES NO

IF NO, PROVIDE OWNER NAME(S):

36
YAK
NOT
GRANT

- 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?

YES NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): SWC Nos. 3676, 10284, 10285, 10286 and G4-27311C

6. Remarks and Other Relevant Information:

Seek & develop an alternative water supply through a groundwater well as a result of water availability concerns related to drought conditions.

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

PO Box 47477
Olympia, WA 98504-7477

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.

Mikel R. Lewis
 Priest Rapids Complex Manager
 Applicant Printed Name – Title


 Applicant Signature

6/21/2015
 (Date: MM/DD/YYYY)

Water Right Holder Printed Name

Water Right Holder Signature

(Date: MM/DD/YYYY)

Land Owner of Existing Place of Use Printed Name

Land Owner of Existing Place of Use Signature

(Date: MM/DD/YYYY)

Land Owner of Proposed Place of Use Printed Name

Land Owner of Proposed Place of Use Signature

(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 checked="" 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 type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300