



State of Washington
Application for a Water Right Permit

SURFACE WATER GROUND WATER
 Permanent Temporary Short Term

For Ecology Use
(Date Stamp)

8 MAY -2 A8 :26

DEPT. OF ECOLOGY
& BUDGET

Follow the attached instructions. Attach additional sheets as necessary.

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO
THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION.

Section 1. APPLICANT

FEEL OK - EG 666-67 /
5.5.08

Applicant/Business Name: City of Bridgeport	Phone No: (509) 686-4041	Other No:
Address: P.O. Box 640		
City: Bridgeport	State: WA	Zip: 98813-0640
Email Address (optional): bportcty@nwi.net		

Contact Name (if different from above): Peter A. Fraley	Phone No: (509) 662-1954	Fax: (509) 663-1553
Relationship to Applicant: City Attorney		
Address: P.O. Box 1606		
City: Wenatchee	State: WA	Zip: 98807-1606
Email Address (optional): pfraley@omwlaw.com		

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: To provide potable water to the residents of the City within the service area described in the comprehensive water plan approved by the Department of Health.

Anticipated length of time to complete your project: 20 years

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)		
Municipal	Approx. 3,000		Approx. 3,000	Continuously
TOTAL:	3,000		3,000	

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: ___/___/___

For Ecology Use	APPLICATION NO: <u>G4-35176</u>	SEPA: Exempt/Not Exempt		
	Fee Paid: <u>\$668.00</u>	Check No: <u>12632</u>	ECY Coding: 001-001-WR1-0285-000011	
Date Returned	By	Priority Date <u>5/2/2008</u>	By <u>50 - Douglas</u>	WRIA: <u>50 - Douglas</u>



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: _____ Number of proposed points of withdrawal: <u>4</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. _____

C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	¼	¼	Section	Township	Range	County
004 000 000 21	NW	SW	14	29N	25E	Douglas
Lot(s)	Block(s)		Subdivision			
	SW					

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

Parcel No.	¼	¼	Section	Township	Range	County
033 004 000 00			15	29N	25E	Douglas
Lot(s)	Block(s)		Subdivision			
1	J		Plat of Riverside Addition to Bridgeport			

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

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

SEE ATTACHED

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
 Provide the owner name(s), address, and phone number: Three of the four wells are owned by the City of Bridgeport and are included as part of the City's municipal system. The City will need to acquire the property associated with the fourth well and well head protection, which is located within the southwest quarter of the southwest quarter of Sec. 14, T. 29 N. R. 25 EWM.

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.

The service area of the City of Bridgeport as set forth in the most recent Comprehensive Water System Plan approved by the Department of Health.

¼	¼	Section	Twp.	Range	County	Parcel No.
		14	29N	25E	Douglas	
		15				
		16				
		22				
		23				
		24				

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: _____

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: GWC G3-0034C, GWC 6718, GWC 1341

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): Municipal water system with capacity to meet the projected full build out of the Urban Growth Area of an estimated 10,500 people.

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>2000</u> _____
Type of connections: _____ <i>(e.g., home, recreational cabin)</i>	Estimate future population to be served: <u>10,500</u> _____ (UGA build out)

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 July 2000 Water System Number: 083506

Name of water system: City of Bridgeport 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: _____

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

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

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: _____

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: _____

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: City of Bridgeport is located in north central Washington along the banks of the Columbia River downstream from Chief Joseph Dam along State Route 17, Washington.

Site Address: Bridgeport, Washington



Supplemental Information for the Points Of Diversion

Section 3. POINT OF DIVERSION OR WITHDRAWAL

C.) Point of Diversion/Withdrawal – Legal Description						
Parcel No.	¼	¼	Section	Township	Range	County
031 006 001 00			23	29N	25E	Douglas
Lot(s)	Block(s)		Subdivision			
1 & 2	6		Plat of the replat of Orchard Park Addition to Bridgeport			
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: _____ Feet (<input type="checkbox"/> North/ <input type="checkbox"/> South) and _____ feet (<input type="checkbox"/> East/ <input type="checkbox"/> West) from the (<input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> _____) corner of Section_____.						
Parcel No.	¼	¼	Section	Township	Range	County
	SW	SW	14	29N	25E	Douglas
Lot(s)	Block(s)		Subdivision			
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: _____ feet (<input type="checkbox"/> North/ <input type="checkbox"/> South) and _____ feet (<input type="checkbox"/> East/ <input type="checkbox"/> West) from the (<input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> _____) corner of Section_____.						