



For Ecology Use  
(Date Stamp)



## 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: David and Adrienne Kuhn	Phone No: 503-957-3234	Other No:
Address: 1712 Skyline Ridge Lane SW		
City: Tumwater	State: WA	Zip: 98512
Email Address (optional): kuhndavid@hotmail.com		

Contact Name (if different from above): Jessica Kuchan	Phone No: 206-838-7650	Other No:
Relationship to Applicant: Attorney for Seller of Mitigation Water		
Address: 315 5 <sup>th</sup> Ave S.		
City: Seattle	State: WA	Zip: 98104
Email Address (optional): Kuchan@mentorlaw.com		

### Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: To secure water mitigation for three residential units so parcel 20500 can be subdivided. On January 24, 2012, Ecology approved a Request for Determination of Water Budget Neutrality made by Applicant for two residential units under water right file no. G4-35527. Applicant now seeks water for one additional unit (for a total of three).

Anticipated length of time to complete your project: 10 years

Is this for an existing use, established prior to July 16, 2009?    Yes   x   No

If yes, when was the water first regularly and beneficially used? \_\_\_\_\_

For Ecology Use	APPLICATION NO: <u>64-35549</u>	SEPA: Exempt/Not Exempt
	Fee Paid: <u>  </u> Check No: <u>  </u>	ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____	Priority Date <u>03-05-2012</u> By <u>  </u> WRIA: <u>39 RITT</u>

**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.)

Purpose(s) of Use	Rate (check one box only)		Total Water Use* in 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	TBD		0.392/ 0.118 (CU)	Continuously
Irrigation	TBD		0.022/ 0.019 (CU)	Seasonal
<b>TOTAL:</b>	<b>TBD</b>		<b>0.414</b> <b>0.137 (CU)</b>	

\*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/wtrxchng.html>

### 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	Do you have an existing well? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Well(s) <input type="checkbox"/> 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
20500			25	20N	15E	Kittitas
Lot(s)	Block(s)		Subdivision			

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)

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:  
Up to 2 per well (one requested in this application)

Type of connections: Residential  
*(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

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

**E.) Sanitary Sewer System**

Will domestic wastewater be discharged to a sanitary sewer system?  YES  NO

If yes, please provide a copy of the sewer utility agreement that serves the proposed project.

**F.) Irrigation**

Total number of acres requested to be irrigated under this application = 0.011 \_\_\_\_\_ Acres

NOTE: Outline the area to be irrigated on your attached map. (1 acre = 43,560 square feet)

**Section 5. MITIGATION**

To request a determination of Water Budget Neutrality under Chapter 173-539A WAC, the applicant must identify an existing trust water right or pending application to place a water right in trust. The trust water right(s) must:

- Contribute an equal or greater amount to Yakima River flow during the irrigation season, as measured at Parker.
- Have a priority date earlier than May 10, 1905.
- Be eligible to be used for instream flow protection and mitigation of out-of-priority uses.

**A) Existing Trust Water Right**

Please identify existing trust water right(s) for use as mitigation.

Water Right No.	Rate (check one box only)		Acre-Feet per Year (AF/YR) (If known)	Priority Date
	<input checked="" type="checkbox"/> Cubic Feet per Second (CFS)	<input type="checkbox"/> Gallons per Minute (GPM)		
Claim No. 5259	0.5 cfs		64.57	Oct 30, 1884
			██████	██████
<b>TOTAL:</b>			<b>64.57</b>	

**B) Proposed Trust Water Right Application**

Please identify the pending application(s) to place a water right(s) into trust for use as mitigation.

Water Right No.	Rate (check one box only)		Acre-Feet per Year (AF/YR) (If known)	Priority Date
	<input type="checkbox"/> Cubic Feet per Second (CFS)	<input type="checkbox"/> Gallons per Minute (GPM)		
			██████	██████
			██████	██████
<b>TOTAL:</b>			██████	

**C) Quantity of Trust Water Right(s) listed in Section 5 (A) and (B) Acquired for Mitigation**

Please list the specific quantity in AFY of Trust Water Right(s) listed in Sections 5(A & B) that have been acquired to offset consumptive use associated with this proposed new use of groundwater: 0.137 AFY

Note: You may wish to refer to the online water use calculator for example consumptive use calculations: <http://www.ecy.wa.gov/programs/wr/cro/wtrxchg.html>

Additional information regarding consumptive use can be found in Chapter 173-539(A)-050(3) WAC.

**Section 6. 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.

Lot 2, of SKY RIDGE SHORT PLAT, Kittitas County Short Plat No. SP-2004-19, as recorded January 26, 2005, in Book G of Short Plats, page 240, under Auditor's File No. 200501260008, records of Kittitas County, State of Washington; being a portion of the Northwest Quarter of the Northwest Quarter of Section 25, Township 20 North, Range 15 East, W.M., in the County of Kittitas, State of Washington.

¼	¼	Section	Twp.	Range	County	Parcel No.
NW	NW	25	20N	15E	Kittitas	20500

**Section 7. 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 request, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though employees of the Department of Ecology may have assisted me in the preparing this application, I am fully responsibility for the accuracy of the information provided.

David Kuhn  
 \_\_\_\_\_  
 Print Name  
 (Applicant or authorized representative)

  
 \_\_\_\_\_  
 Signature

02/11/12  
 \_\_\_\_\_  
 Date

\_\_\_\_\_  
 Print Name  
 (Land Owner, if seeking to use the ground water exemption)

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

**Submit this form to:**  
 DEPARTMENT OF ECOLOGY  
 WATER RESOURCES PROGRAM  
 CENTRAL REGIONAL OFFICE  
 15 W. YAKIMA AVE, SUITE 200  
 YAKIMA, WA 98902-3452