STATE OF WASHINGTON

APPLICATION FOR CHANGE/TRANSFER OF WATER RIGHT

DEPARTMENT OF ECOLOGY State of Washington

For filing with the Department of Ecology or with County Conservancy Boards

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

BENT-12-03

(Check all that apply.)

- ☐ Change purpose(s) of use
- ☐ Add purpose(s) of use
- ☒ Change point(s) of diversion/withdrawal
- ☐ Add point(s) of diversion/withdrawal
- ☐ Change/transfer place of use
- ☐ Other (i.e. consolidation, intertie, trust water)

Explain: One new well is to replace two older wells.

FOR OFFICE USE ONLY

CHANGE No. C64-6WC093-D WRIA 31 BENT

DATE ACCEPTED 07 / 09 / 12 BY S

FEE $ 0 REC'D 06 / 15 / 2012

CHECK No. 0

ECY Coding: 001-002-WR10285-000011

SEPA: ☐ Exempt ☐ Not exempt

DEPT OF ECOLOGY Received JUN 15 2012 CENTRAL REGION OFFICE

IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)

1. Applicant Information:

APPLICANT/BUSINESS NAME	PHONE NO.	FAX NO.
City of Kennewick	(509) 585-4313	(509) 585-4407
ADDRESS		
PO Box 6108		
CITY	STATE	ZIP CODE
Kennewick	WA	99336-0108

CONTACT NAME (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
Gary Deardorff	(509) 585-4301	( )
ADDRESS		
City of Kennewick, PO Box 6108		
CITY	STATE	ZIP CODE
Kennewick	WA	99336-0108

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER	RECORDED NAME(S)
GWC00093-D, GWC00094-D	Pacific Power and Light Company

DO YOU OWN THE RIGHT TO BE CHANGED? ☒ YES ☐ NO

IF NO, PROVIDE OWNER(S) NAME and ADDRESS:

HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? ☐ YES ☒ NO

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

64-*00131SWR15

FOR OFFICE USE ONLY

APP. NO. 00131 PERMIT NO. — CERT. NO 00093 CERT. OF CHANGE NO. _____

BENT-12-03 C64-6WC093-D

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Layton Park Well	**#1**	**SW**	**SW**	**6**	**8N**	**29E**	106803040005001	NA
Layton Park Well	**#2**	**SW**	**SW**	**6**	**8N**	**29E**	106803040005001	NA

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Kennewick ASR Well	**#1**	**NE**	**SE**	**17**	**8N**	**29E**	117894000001004	ALM 112

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: ☒ YES ☐ NO PROPOSED: ☒ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME:

Please include copies of all water well reports involved with this proposal. Also, 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: MUNICIPAL

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Municipal	400 GPM	70	1/1 - 12/31
Municipal	1000 GPM	450	1/1 - 12/31

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Muncipal	1400 GPM	520	1/1 - 12/31

5. Place of Use: CITY OF KENNEWICK

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:

Place of use coincides with City Limits. Please see attached map.

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? ☐ YES ☒ NO – IF NO, PROVIDE OWNER(S) NAME: City of Kennewick landowners.

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:

Place of use coincides with City Limits. Please see attached map.

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? ☐ YES ☒ NO – IF NO, PROVIDE OWNER(S) NAME: see above.

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.

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): Please see attached water right list for the city of Kennewick.

6. Remarks and Other Relevant Information:

As per RCW 90.14.140(2)(d), municipal water rights are exempt from relinquishment.
Please see attached Technical Memo regarding well locations, water use, and finding of no potential to impair existing water users.

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.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, 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 am hereby granting 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 the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

Peter M. Beaudry — 3/21/2012
(Applicant) — *(Date)*

City of Kennewick — ***3/21/2012***
(Water Right Holder) — *(Date)*

City of Kennewick — ***3/21/2012***
(Land Owner(s) of Existing Place of Use) — *(Date)*

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

☐ APPLICATION FEE NOT ENCLOSED ☐ MAP NOT INCLUDED or INCOMPLETE

☐ ADDITIONAL SIGNATURES REQUIRED ☐ SECTION _____ IS INCOMPLETE

☐ OTHER/EXPLANATION:_____

STAFF: _____ ***DATE:*** ____/____/____