



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: Todd Czapiewski | | Phone No: 425-890-6430 | Other No: |
| Address: PO Box 2876 | | | |
| City: Kirkland | State: WA | Zip: 98083 | |
| Email Address (optional): todd@skicoelectric.com | | | |

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

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: Currently in the process of building a dry shop with a proposed future bathroom. Future plans to build an approximate 2000 sq. ft. single family dwelling. Unknown time frame.

Anticipated length of time to complete your project: Unknown
Is this for an existing use, established prior to July 16, 2009? No
If yes, when was the water first regularly and beneficially used? N/A

| | | |
|-----------------|---------------------------------------|---|
| For Ecology Use | APPLICATION NO: <u>64-35644</u> | SEPA: Exempt/Not Exempt |
| | Fee Paid: <u>⓪</u> Check No: <u>⓪</u> | ECY Coding: 001-001-WR1-0285-000011 |
| Date Returned | By | Priority Date <u>08202013</u> By <u>OX</u> WRIA: <u>39 K177</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.)

Domestic single family home and lawn or commercial garden

| Purpose(s) of Use | Rate (check one box only) Cubic Feet per Second (CFS) X Gallons per Minute (GPM) | Total Water Use* in Acre-Feet per Year (AF/YR) (If known) | Period of Use (Continuously or Seasonal) |
|---------------------------------|--|--|---|
| Domestic Single Family Dwelling | 15 | 0.392 | Continuous |
| Lawn or Non Commercial Garden | 15 | 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/wtrxchg.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? YES <input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____ Log ID No. 404292 Existing well diameter & depth: 6" & 247 feet If available, attach Water Well Report and pump test. Well Tag ID No. ALF760 Number of proposed points of withdrawal: 7 |

C.) Point of Diversion/Withdrawal – Legal Description

| Parcel No. | ¼ | ¼ | Section | Township | Range | County |
|------------|----------|----|-------------|----------|-------|----------|
| 949635 | NE | SE | 25 | 20N | 16E | Kittitas |
| Lot(s) | Block(s) | | Subdivision | | | |
| 3 | | | Woodridge | | | |

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 | B.) Municipal Water Systems only <i>(defined under RCW 90.03.015)</i> |
| Projected number of connections to be served: 7 _____ | Present population to be served water: _____ |
| Type of connections: <u>Home</u> <i>(e.g., home, recreational cabin)</i> | 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? 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? 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 | |
| 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? 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 = .02 Acres or 500 square feet
 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) 36.77 | Priority Date |
|------------------|---|---|---------------|
| | <input checked="" type="checkbox"/> Cubic Feet per Second (CFS) Gallons per Minute (GPM) | | |
| CS4-01467@11sb3a | 0.335 cfs – 05/01-09/15 0.045 cfs – 09/16-04/30 | 49.035 af/yr - 05/01-09/15 0.075 af/yr – 09/16-04/30 | June 30, 1883 |
| | | | |
| TOTAL: | | 49.11 | |

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) | | |
| | | | |
| | | | |
| TOTAL: | | | |

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/wtrchng.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.

TRACT A: Parcel 5 of that certain Survey as recorded November 8, 2005, in Book 31 of Surveys, at pages 239 and 240, under Auditor's file No. 200511080052. In the County of Kittitas, State of Washington; being a portion of the Northeast Quarter of the Southeast Quarter of Section 25, Township 20 North, Range 16 East, W.M., in the County of Kittitas, State of Washington

| ¼ | ¼ | Section | Twp. | Range | County | Parcel No. |
|----|----|---------|------|-------|----------|------------|
| NE | SE | 25 | 20N | 16E | Kittitas | 949637 |

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.

Todd M Czapiewski
 Print Name
 (Applicant or authorized representative)


 Signature

07/28/2013
 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