DEPT OF ECOLOGY
Received
NOV 2 7 2013
CENTRAL REGION OFFICE

WASHINGTON STATE DEPARTMENT OF ECOLOGY

STATE OF WASHINGTON
APPLICATION TO ENTER A WATER RIGHT INTO THE TRUST WATER RIGHT PROGRAM

NOTE: THIS FORM IS **ONLY** TO BE USED FOR THE ACQUISITION OF WATER INTO THE TRUST WATER RIGHT PROGRAM

(Check all that apply.)
- ☐ Lease
- ☐ Purchase
- ☒ Donation

Other
Explain: Trust Transfer for in-stream flow benefit and to mitigate new out-of-stream uses per approval of applications S4-29956 and S4-31083
- ☒ Portion of the identified existing water right

IF FOR SEASONAL OR TEMPORARY, START DATE:
END DATE:

FOR OFFICE USE ONLY CHELAN
FILE No. CS4-30502C WRIA 47
DATE ACCEPTED 12 / 19 / 2013 BY
FEE $ 0 REC'D 11 / 27 / 2013
CHECK No. 0
SEPA: ☐ Exempt ☐ Not exempt

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

1. Applicant Information:

APPLICANT/BUSINESS NAME	PHONE NO	FAX NO.
Bear Mountain Water District		( )
ADDRESS: P.O. Box 3091		
CITY: Chelan	STATE: WA	ZIP CODE: 98816

CONTACT NAME (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
Marc Marquis, Peterson & Marquis Law Office	(509) 679-0337	( )
ADDRESS: 1227 First Street		
CITY: Wenatchee	STATE: WA	ZIP CODE: 98801

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER	RECORDED NAME(S)
CS4-30502C	Bear Mountain Water District

DO YOU OWN THE RIGHT? X YES ☐ NO IF NO, PROVIDE OWNER(S) NAME and ADDRESS:

HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? X YES ☐ NO
ARE WATER DIVERSIONS/WITHDRAWALS OF THIS WATER RIGHT METERED OR MEASURED? X YES NO

IMPORTANT! PROVIDE INFORMATION SHOWING THE EXTENT OF WATER USE FOR EACH OF THE LAST FIVE YEARS

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.

CS4-30502C(A) CL ROE 10-25-2011 (CHEL-08-11)

FOR OFFICE USE ONLY

WATER RIGHT NO. _____ FILE (contract) NO. _____

CS4-30502C(A)01

6. Place of Use (continued)

B. Proposed:

IDENTIFY THE WATER BODY TO BE BENEFITED OR OTHER PLACE TO BE BENEFITED
LAKE CHELAN WHICH IS TRIBUTARY TO THE CHELAN AND COLUMBIA RIVERS

7. Remarks and Other Relevant Information:

Proposed trust transfer is intended to serve as a component of a transfer
for in-stream benefit and to mitigate new downstream uses. Transfer is contingent upon
approval of water applications S4-29956 and S4-31083.

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.

8. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I hereby grant staff from the Department of Ecology 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.

MARC MARQUIS 11/25/2013
(Applicant) ATTY FOR BMWD (Date)

_____ ___/___/___
(Water Right Holder) (Date)

_____ ___/___/___
(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):

☐ ADDITIONAL SIGNATURES REQUIRED ☐ SECTION _____ IS INCOMPLETE

☐ OTHER/EXPLANATION:_____

STAFF: _____ ***DATE:*** ___/___/___