



Application

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Application for Change/Transfer of Water Right

For Ecology Use
(Date Stamp)

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

**A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION
IF FILED WITH THE DEPARTMENT OF ECOLOGY**

FOR OFFICIAL USE ONLY

DATE APPLICATION RECEIVED 4/3/14
CHECK NO. _____ FEE \$ 650.00/00
DATE ACCEPTED 4/3/14 BY FCWCB
CHANGE NO. FRAN-14-02
COUNTY Franklin WRIA 36
SPECIAL AREA _____

SEPA: EXEMPT NOT EXEMPT
ECY CODING: 001-002-WR10285-000011
APP NO. _____ PERMIT NO. _____
CERT NO. _____ CERT OF CHG NO. _____

(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: Adding Place of Use and Point(s) of Withdrawal

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

I have participated in a pre-application conference with FCWCB.

1. Applicant Information

APPLICANT/BUSINESS NAME Worsham Farms LLC	PHONE NO. 509-265-4404 509-727-3050	FAX NO.
ADDRESS 2690 SR-17		
CITY Mesa	STATE WA	ZIP CODE 99343
EMAIL ADDRESS (IF AVAILABLE)		

CONTACT (IF DIFFERENT FROM ABOVE) Same	PHONE NO.	FAX NO.
ADDRESS		
CITY	STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE)		

LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE Same	PHONE NO.	FAX NO.
ADDRESS		
CITY	STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE)		

2. Water Right Information

WATER RIGHT OR CLAIM NUMBER G3-24973C	RECORDED NAME(S) See Attachment
DO YOU OWN THE RIGHT TO BE CHANGED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS: _____	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> 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.

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
1		NW	SE	10	9	30	See Attached	

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
1		NW	SE	10	9	30	See Attached	
2		NE	NE	15	9N	30 EWM	See Attached	

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:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation of 155 Acres	1600	640	January 1 to December 31

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation of 212.5 Acres	1600	640	January 1 to December 31

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
SE1/4 of Section 10, T.9N. R.30 EWM.							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO							
IF NO, PROVIDE OWNER(S) NAME: _____							

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:
 Same as above and all within:
 NE1/4 of Section 15, T.9N, R.30 EWM, lying NE of the power line corridor.

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: _____

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?
 ES NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): _____

6. Remarks and Other Relevant Information:

This water right will be used in conjunction with other water rights (G3-24972C and G3-24973C and G3-25285P and G3-25286P and G3-25297P and G3-22265P and G3-24661C, to service a new place of use all within the NE1/4 of Section 15, T.9N, R.30 EWM. In combination with their existing place of use, the water rights will service their existing place of use and proposed place use, per RCW 90.03.380. This will be accomplished through low and high water duty crop rotations and increased use of conservation measures, such as Conservation O&M. The place of use for this specific water right may be combined with all of the above POU-POW per discussions with WRP-Ecology.

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. For further information, contact: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477. Phone (360) 570-3265.

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 hereby grant 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 preparing this above application, I understand that all responsibility for the accuracy of the information rests with me.

_____	_____	_____/_____/_____
<i>Applicant Printed Name – Title</i>	<i>Applicant Signature</i>	<i>(Date)</i>
_____	_____	_____/_____/_____
<i>Water Right Holder Printed Name</i>	<i>Water Right Holder Signature</i>	<i>(Date)</i>
_____	_____	_____/_____/_____
<i>Land Owner of Existing Place of Use Printed Name</i>	<i>Land Owner of Existing Place of Use Signature</i>	<i>(Date)</i>
_____	_____	_____/_____/_____
<i>Land Owner of Existing Place of Use Printed Name</i>	<i>Land Owner of Existing Place of Use Signature</i>	<i>(Date)</i>

Same as above and all within: ^{15 9}
~~NE1/4 of the~~ NE1/4 of Section 9, T.15N, R.30 EWM *lying NE of the power line corridor.*

1/4	1/4	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: _____

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<u>Ronald D Worsham</u> Applicant Printed Name – Title	<u>Ronald Worsham</u> Applicant Signature	<u>3/17/2014</u> (Date)
<u>Ronald D Worsham</u> Water Right Holder Printed Name	<u>Ronald Worsham</u> Water Right Holder Signature	<u>3/17/2014</u> (Date)
<u>Ronald Worsham</u> Land Owner of Existing Place of Use Printed Name	<u>Ronald Worsham</u> Land Owner of Existing Place of Use Signature	<u>3/17/2014</u> (Date)
<u>Ronald Worsham</u> Land Owner of Proposed Place of Use Printed Name	<u>Ronald Worsham</u> Land Owner of Proposed Place of Use Signature	<u>3/17/2014</u> (Date)

*Submit your application to: DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611	<input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	<input checked="" type="checkbox"/> Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1295 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 – 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):	
<input type="checkbox"/> APPLICATION FEE NOT ENCLOSED	<input type="checkbox"/> MAP NOT INCLUDED or INCOMPLETE
<input type="checkbox"/> ADDITIONAL SIGNATURES REQUIRED	<input type="checkbox"/> SECTION _____ IS INCOMPLETE
<input type="checkbox"/> OTHER/EXPLANATION: _____	
STAFF: _____	DATE: ____/____/____