

**WATER RESOURCES**  
**Application for Change/Transfer of Water Right**

**RECEIVED**

NOV 07 2014

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

Department of Ecology  
 Eastern Regional Office

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

14 NOV -3 A8:52

(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: \_\_\_\_\_

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

FOR OFFICIAL USE ONLY	
DATE APPLICATION RECEIVED	DEPT. OF ECOLOGY
CHECK NO. _____	FISCAL BUDGET
DATE ACCEPTED _____	BY _____
CHANGE NO. _____	
COUNTY _____	WRIA _____
SPECIAL AREA _____	
SEPA: <input type="checkbox"/> EXEMPT <input type="checkbox"/> NOT EXEMPT	
ECY CODING: 001-002-WR10285-000011	
APP NO. _____	PERMIT NO. _____
CERT NO. _____	CERT OF CHG NO. _____

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

**1. Applicant Information**

APPLICANT/BUSINESS NAME <i>CAROL J. Winnett</i>	PHONE NO. <i>509-529-0499</i>	FAX NO.
ADDRESS <i>3315 MORRISON LN.</i>		
CITY <i>WACCA WACCA</i>	STATE <i>WA.</i>	ZIP CODE <i>99362</i>
EMAIL ADDRESS (IF AVAILABLE) <i>win_ite@yahoo.com</i>		

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

LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE <i>CAROL J. Winnett</i>	PHONE NO.	FAX NO.
ADDRESS		
CITY	STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE)		

**2. Water Right Information**

WATER RIGHT OR CLAIM NUMBER <i>63-27140C</i>	RECORDED NAME(S) <i>SUSAN MARK Winnett</i>
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 #
irrigation domestic well	1			4	6	36E	360604550004	well

**B. Proposed**

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
domestic well	2			4	6	36E	360604550003	Lot 3
IRRIGATION							360604550007	on Lot 7

KT  
11-18

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: No change**

**A. Existing**

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
2 domestic uses	50		Throughout year
IRRIGATION	50		MAY 1 to Sept. 15

**B. Proposed**

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
1 domestic use		1.697	Throughout year
IRRIGATION		TOTAL	MAY 1 to Sept 15

**5. Place of Use: No change**

**A. Existing**

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:  
See (63-27140C)

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: \_\_\_\_\_

**B. Proposed**

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:  
(No change) adding well to supply personal house AND irrigate parcels # 360604550003 which I own # 360604550007

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?

YES  NO - IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): \_\_\_\_\_

Because of my age I'm aware my property will need to be sold sometime in the future. There is now no existing well on my property; which makes it difficult to sell as a "shred well" is not preferred by buyers.

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.

<u>Carol Winnett</u> Applicant Printed Name - Title	<u>Carol Winnett</u> Applicant Signature	<u>10/28/2014</u> (Date)
→ <u>MARK Winnett</u> Water Right Holder Printed Name	<u>Mark Winnett</u> Water Right Holder Signature	<u>10/28/2014</u> (Date)
→ <u>MARK Winnett</u> Land Owner of Existing Place of Use Printed Name	<u>Mark Winnett</u> Land Owner of Existing Place of Use Signature	<u>10/28/2014</u> (Date)
<u>C Winnett</u> Land Owner of Proposed Place of Use Printed Name	<u>Carol Winnett</u> Land Owner of Proposed Place of Use Signature	<u>10/28/2014</u> (Date)

Please check the region in which the project is located:

<p>*Submit your application to:</p> <p>DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611</p>	<input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902-3463 (509) 575-2490	<input checked="" type="checkbox"/> Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1265 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 - 160 <sup>th</sup> 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):**

APPLICATION FEE NOT ENCLOSED       MAP NOT INCLUDED or INCOMPLETE  
 ADDITIONAL SIGNATURES REQUIRED       SECTION \_\_\_\_\_ IS INCOMPLETE  
 OTHER/EXPLANATION: \_\_\_\_\_

STAFF: \_\_\_\_\_ DATE:   /  /

**ATTACHMENT FOR  
Application for Change/Transfer of Water Right**

**Point(s) of Diversion/Withdrawal**  Existing  Proposed:

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
See change ROE (63-271406)								

DO YOU OWN THE ABOVE POINT(S) OF DIVERSION/WITHDRAWAL?  YES  NO

IF NO, PROVIDE OWNER(S) NAME: \_\_\_\_\_

**Purpose(s) of Use** -  Existing  Proposed:

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
parcel # 36060455003	?		
36060455007			

**Place of Use** -  Existing  Proposed:

LEGAL DESCRIPTION OF LANDS
See (63-271406) ROE

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

DO YOU OWN ALL THE LANDS IN ABOVE PLACE OF USE?  YES  NO

IF NO, PROVIDE OWNER(S) NAME: \_\_\_\_\_

**ATTACHMENT FOR  
Application for Change/Transfer of Water Right**

**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 the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.*

MARK Winnett *Mark Winnett* 10/28/2014  
 Applicant Printed Name - Title      Applicant Signature      (Date)  
 Water Right Holder Printed Name      Water Right Holder Signature  
 Land Owner of Existing Place of Use Printed Name      Land Owner of Existing Place of Use Signature  
 Land Owner of Proposed Place of Use Printed Name      Land Owner of Proposed Place of Use Signature

Margaret La Duke *Margaret La Duke* 10/28/2014  
 Applicant Printed Name - Title      Applicant Signature      (Date)  
 Water Right Holder Printed Name      Water Right Holder Signature  
 Land Owner of Existing Place of Use Printed Name      Land Owner of Existing Place of Use Signature  
 Land Owner of Proposed Place of Use Printed Name      Land Owner of Proposed Place of Use Signature

\_\_\_\_\_  
 Applicant Printed Name - Title      Applicant Signature      / /  
 Water Right Holder Printed Name      Water Right Holder Signature      (Date)  
 Land Owner of Existing Place of Use Printed Name      Land Owner of Existing Place of Use Signature  
 Land Owner of Proposed Place of Use Printed Name      Land Owner of Proposed Place of Use Signature

\_\_\_\_\_  
 Applicant Printed Name - Title      Applicant Signature      / /  
 Water Right Holder Printed Name      Water Right Holder Signature      (Date)  
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 Land Owner of Proposed Place of Use Printed Name      Land Owner of Proposed Place of Use Signature

\_\_\_\_\_  
 Applicant Printed Name - Title      Applicant Signature      / /  
 Water Right Holder Printed Name      Water Right Holder Signature      (Date)  
 Land Owner of Existing Place of Use Printed Name      Land Owner of Existing Place of Use Signature  
 Land Owner of Proposed Place of Use Printed Name      Land Owner of Proposed Place of Use Signature

\_\_\_\_\_  
 Applicant Printed Name - Title      Applicant Signature      / /  
 Water Right Holder Printed Name      Water Right Holder Signature      (Date)  
 Land Owner of Existing Place of Use Printed Name      Land Owner of Existing Place of Use Signature  
 Land Owner of Proposed Place of Use Printed Name      Land Owner of Proposed Place of Use Signature

\_\_\_\_\_  
 Applicant Printed Name - Title      Applicant Signature      / /  
 Water Right Holder Printed Name      Water Right Holder Signature      (Date)  
 Land Owner of Existing Place of Use Printed Name      Land Owner of Existing Place of Use Signature  
 Land Owner of Proposed Place of Use Printed Name      Land Owner of Proposed Place of Use Signature