DEPARTMENT OF ECOLOGY
State of Washington

Application for a Water Right Permit

For Ecology Use
(Date Stamp)
RECEIVED
NOV 17 2014
Department of Ecology
Eastern Regional Office

Follow the attached instructions. Attach additional sheets as necessary.

☒ **GROUND WATER** ☐ **SURFACE WATER**

☐ **PERMANENT** ☐ **SHORT TERM** ☐ **TEMPORARY**

☐ **DROUGHT**

***A NON-REFUNDABLE MINIMUM FEE OF $50.00 MUST ACCOMPANY THIS APPLICATION.**

Section 1. APPLICANT

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

Applicant/Business Name: OLESLEIPNESS, SLEIPNESS RESERVE I. LLC	Phone No: 864.506.5458	Other No:
MAILING ADDRESS → Address: 1789 COUNTRY CLUB DR		
City: LOGAN	State: UT	Zip: 84321
Email Address (if available):		

Contact Name (if different from above):	Phone No:	Other No:
Relationship to Applicant:		
Address:		
City:	State:	Zip:
Email Address (if available):		

Legal Land Owner or Part Owner Name of the Proposed Place of Use: SLEIPNESS RESERVE I. LLC	Phone No: 864.506.5458	Other No:
PHYSICAL SITE ADDRESS → Address: 2788 HWY 20 EAST		
City: COLVILLE	State: WA	Zip: 99114
Email Address (if available):		

For Ecology Use	APPLICATION NO: G3-30728 SEPA: Exempt/Not Exempt Fee Paid: ✓ Check No: ECY Coding: 001-001-WR1-0285-000011
Date Returned By Priority Date 11-17-2014 By KT WRIA: 59	
Pre-application interviewer: 6325165	

Section 2. STATEMENT OF INTENT

Do you own the land on which the proposed point of diversion/withdrawal is located? ☐ YES ☐ NO
If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO

Briefly describe the purpose of your proposed project: Heat exchange system for Home

Anticipated length of time to complete your project: 1 month

Water Use List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only) ☐ Cubic Feet per Second (CFS) ☒ Gallons per Minute (GPM)	Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
Heat exchanger	20	0	continously
TOTAL:	20	0	

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☒ NO

Is this request for a temporary permit? ☐ YES ☒ NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: ____/____/____ TO: ____/____/____

Section 3. POINT OF DIVERSION OR WITHDRAWAL
(Complete A or B, and C below)

A.) If Surface Water Source	B.) If Ground Water Source
☐ Spring ☐ Creek ☐ River ☐ Lake ☐ Other:	☒ Well(s) ☐ Other:
Source Name:	Well diameter & depth: 6"
Tributary to:	Number of proposed points of withdrawal: 180
	Do you have an existing well? ☒ YES ☐ NO
Number of proposed diversion points:	If available, attach Water Well Report and pump test.
Do you have an existing diversion? ☐ YES ☐ NO	Well Tag ID No. BCH023

C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	¼	¼	Section	Township	Range	County
5885101	~~SE~~	SE	4	36	42	Stevens

Lot(s)	Block(s)	Subdivision

E½ per phone call on 11/25/14 Appaz

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_____.

Parcel No.	¼	¼	Section	Township	Range	County

Lot(s)	Block(s)	Subdivision

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 two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Section 4. 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.

Legal

INC S/L GOVT LOT 5, 1s hwy & tax nos INC S/L OR PVT ESMT RD GOVT LOT 6, 1s tax nos; TAX #7 (COE 3-2011).

¼	¼	Section	Twp.	Range	County	Parcel No.
	SE	4	36	42	STEVENS	5885101

Do you own all the lands on which the proposed place of use is located? ☒ YES ☐ NO.

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO
Provide owner name(s), address, and phone number:_____

_____

Are there any other water rights or claims associated with this property or water system? ☐ YES ☐ NO

If yes, provide the water right and/or claim numbers:_____

_____

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.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): Well to remove water & well to reinject water back in

All water for Heat pump system will be reinjected back into ground in another well ~~At Water to~~ house Water for House use to

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

(Complete A or B, and C below)

A.) Domestic Water Systems only	**B.) Municipal Water Systems only** *(defined under RCW 90.03.015)*
Projected number of connections to be served: N/A	Present population to be served water: _____
Type of connections: _____ *(e.g., home, recreational cabin)*	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? ☐ YES ☐ NO N/A

If yes, date plan was approved ____/____/____ Water System Number: _____

Name of water system: _____

Are you within the service area of an existing water system? ☐ YES ☐ NO

If yes, explain why you are unable to connect to the system: _____

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = 0 ACRES
NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: 0

Is the proposed project for a dairy farm? ☐ YES ☐ NO

Other Proposed Farm Uses
Describe all proposed uses: None

Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only: N/A

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☐ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO

If yes, enter Permit No: _____

Section 8. OTHER WATER USES

Hydropower NO

Indicate total feet of head _____ and proposed capacity in kilowatts: _____

Describe works: _____

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use
Describe use, method of supplying and utilizing water: N/A

Other Use

For Home use

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO N/A

Are you proposing to store more than 10 acre-feet of water? ☐ YES ☐ NO

Will the water depth be 10 feet or more? ☐ YES ☐ NO

If you answered yes to any of the above questions, please describe:

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site:

Site Address:

We encourage you to contact the Ecology Regional Office in your area to request a **pre-application conference** PRIOR to filing your application. Contacts are listed on the previous page. We will review your project needs and assist you in determining options for obtaining the water you need.

INSTRUCTIONS for the Application for a Water Right Permit

Please read these instructions carefully. Be accurate and complete in filling out your application, as the information you provide is very important in processing your application. Be sure to attach your fees, maps, and any additional information related to the water uses you are proposing.

If you need assistance, please contact the regional office in which your project will be located. A map of the Ecology regions is on the back page of the application. If your answers to any questions are longer than the space provided, you may attach additional sheets as necessary.

Check Boxes

Check the appropriate box for Surface or Ground Water.
Check the appropriate box for Permanent, Temporary, Drought, or Short Term use (duration of 4 months or less).

***Application Fee**

- A minimum fee of $50.00 is required for each new application for a water right permit.
- No fees are required for applications to be processed under a Cost Reimbursement contract.
- No fees are required for Emergency Drought Applications (only when a drought is declared).

If additional fees are required, Ecology will send you a letter requesting those fees. If you are unsure of the appropriate fee amount, contact your regional office for more information, or visit our website: <http://www.ecy.wa.gov/programs/wr/rights/wr_fees.html>.

Please make checks or money orders payable to the "Department of Ecology." Cash cannot be accepted. ALL FEES ARE NONREFUNDABLE.

Section 1. APPLICANT

Enter the name of the person, organization, or water system for which the water right permit is requested. For instance, if the permit is required for a community water system, enter the name of the system (e.g. Green Acres Water Works). Enter a mailing address, including zip, daytime telephone, an alternate or cell phone number, and an Email address (if you have one).

Provide the name of a contact person (if different from above) to call in case we have questions about the application or proposed project. Describe the relationship of the contact person to the applicant, e.g. "consultant," "water systems engineer," "realtor," "chair of community well organization," etc.

Enter the name of the legal or part owner (person or business) of the land where the water is to be used. Enter a mailing address, including zip, daytime telephone, an alternate or cell phone number, and an Email address (if available).

Section 2. STATEMENT OF INTENT

Mark the check box if you own the land containing the proposed point of diversion/withdrawal.
Mark the check box if you have legal authority to make this application for use of another's land.
Provide a brief description of the purpose of your proposed project and the anticipated length of time to complete the project.

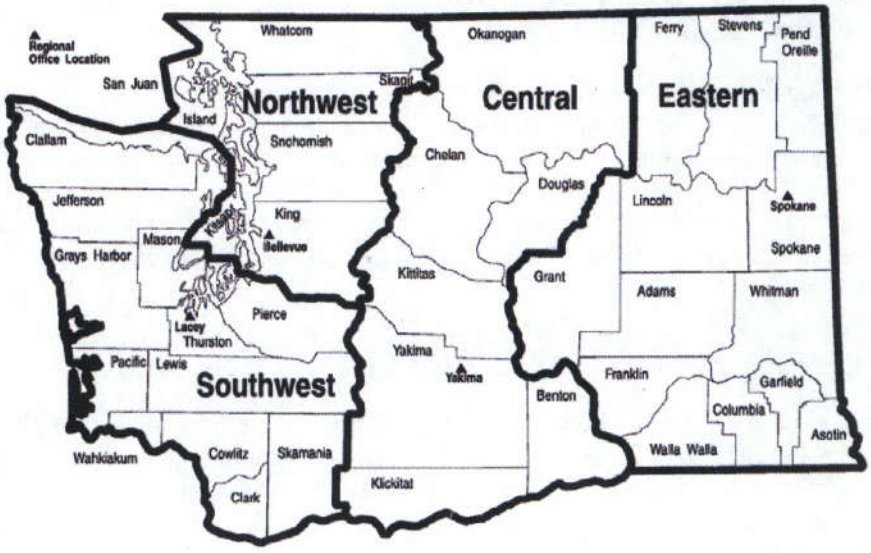
Section 11. REQUIRED SIGNATURES

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 application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Print Name	Signature	Date
Andrews Mechanical Inc Edwin L Andrews III (Applicant or authorized representative)		11-16-2014
OLE SLEIPNESS, MANAGING MEMBER (Legal Owner or Part Owner Place of Use)		10.16.2014
SLEIPNESS RESERVE I, LLC (Legal Owner or Part Owner Place of Use)		10.16.2014

Please check the region in which the project is located:

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

If you need this document in an alternate format, please call the Water Resources Program at 360-407-6872.
Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.