



Application for a Water Right Permit

For Ecology Use
(Date Stamp)

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DEPT. OF ECOLOGY
FISCAL & BUDGET

Follow the attached instructions. Attach additional sheets as necessary.

- GROUND WATER SURFACE WATER DROUGHT
 PERMANENT SHORT TERM TEMPORARY

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

Section 1. APPLICANT

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

Applicant/Business Name: KON & LINDA WILSON	Phone No: (509) 445-0765	Other No:
Address: 1772 KINGS LAKE RD.		
City: USK	State: WA	Zip: 99180
Email Address (if available): wilson_farms92@aol.com		

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:	Phone No:	Other No:
Address:		
City:	State:	Zip:
Email Address (if available):		

For Ecology Use	APPLICATION NO: S3-30732	SEPA: <input checked="" type="checkbox"/> Exempt / <input type="checkbox"/> Not Exempt
	Fee Paid: <input checked="" type="checkbox"/> Check No: _____	ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By KT	Priority Date 12.18.2014
Pre-application interviewer:		WRIA: 62; Pend Oreille

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: In house and stock

Anticipated length of time to complete your project: 1 year

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)		Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
	<input checked="" type="checkbox"/> Cubic Feet per Second (CFS)	<input type="checkbox"/> Gallons per Minute (GPM)		
<u>Single Domestic</u>	<u>.02</u>		<u>.5</u>	<u>All year</u>
<u>Stock Water</u>				
TOTAL:	<u>.02</u>		<u>.5</u>	

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
<input type="checkbox"/> Spring <input checked="" type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____	<input type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____
Source Name: <u>SKOOKUM CREEK</u>	Well diameter & depth: _____
Tributary to: <u>PEND OREILLE RIVER</u>	Number of proposed points of withdrawal: _____
Number of proposed diversion points: <u>1</u>	Do you have an existing well? <input type="checkbox"/> YES <input type="checkbox"/> NO
Do you have an existing diversion? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	If available, attach Water Well Report and pump test.
	Well Tag ID No. _____

C.) Point of Diversion/Withdrawal – Legal Description						
Parcel No.	¼	¼	Section	Township	Range	County
443328000001	NE	NE	28	33	44	PEND OREILLE
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 (<input type="checkbox"/> North/ <input type="checkbox"/> South) and _____ feet (<input type="checkbox"/> East/ <input type="checkbox"/> West) from the (<input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> _____) corner of Section _____						
POINT OF DIVERSION 48° 20' 12.08" N 117° 14' 22.81" W						
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 (<input type="checkbox"/> North/ <input type="checkbox"/> South) and _____ feet (<input type="checkbox"/> East/ <input type="checkbox"/> West) from the (<input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> _____) 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.

SW ¼ NE ¼, LESS S 420' FRD 28-33-44						
1592 KINGS LAKE RD						
LISK, WA 99180						
¼	¼	Section	Twp.	Range	County	Parcel No.
SW	NE	28	33	44		
LESS S 420' FRD						

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: # 11502, # 6535, # 7874

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): _____

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

(Complete A or B, and C 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: <u>1</u> Type of connections: <u>HOME/STOCK</u> <i>(e.g., home, recreational cabin)</i>	Present population to be served water: <u>TWO PEOPLE/PLUS STOCK WATERERS</u> Estimate future population to be served: <u>TWO PEOPLE</u> (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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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: 2-5 ANIMALS (BEEF CATTLE)

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:

- 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

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: _____

Other Use

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? YES NO

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: HWY 2 to NEWPORT, WA.
THEN WEST ON HWY 20 (APPROX 15 MILES) TO USK, WA.
AT USK CROSS RIVER ON KINGS LAKE RD, CONTINUE ON
NORTH. 1592 KINGS LAKE RD IS APPROX 2 MILES
FROM THE NORTH END OF THE BRIDGE. IT IS ON THE
RIGHT ACROSS FROM A RED LOG HOME.

Site Address: _____

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.

<u>RONALD D WILSON</u>	<u>Ronald D. Wilson</u>	
Print Name	Signature	
(Applicant or authorized representative)		
<u>LINDA A. WILSON</u>	<u>Linda A. Wilson</u>	<u>11-18-2014</u>
Print Name	Signature	Date
(Legal Owner or Part Owner Place of Use)		
<u>RONALD D WILSON</u>	<u>Ronald D. Wilson</u>	<u>11-18-2014</u>
Print Name	Signature	Date
(Legal Owner or Part Owner Place of Use)		
<u>LINDA A WILSON</u>	<u>Linda A. Wilson</u>	<u>11-18-2014</u>
Print Name	Signature	Date
(Legal Owner or Part Owner Place of Use)		

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 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

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.

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.