



Application for Change/Transfer of Water Right

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JAN 12 2015

Department of Ecology
Eastern Washington Office

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

(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: Add additional irrigated acres

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

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

1. Applicant Information

APPLICANT/BUSINESS NAME NICK J. TARUSCIO	PHONE NO.	FAX NO.
ADDRESS 2668 Old Milton Highway		
CITY Walla Walla	STATE Washington	ZIP CODE 99362-7152
EMAIL ADDRESS (IF AVAILABLE)		

CONTACT (IF DIFFERENT FROM ABOVE) Bill Neve, Water Right Solutions	PHONE NO. (509) 540-4474	FAX NO.
ADDRESS P.O. Box 511		
CITY Walla Walla	STATE Washington	ZIP CODE 99362
EMAIL ADDRESS (IF AVAILABLE) billneve.wrs@gmail.com		

LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE Nick J. Taruscio	PHONE NO.	FAX NO.
ADDRESS 2055 Plaza Way		
CITY Walla Walla	STATE Washington	ZIP CODE 99362
EMAIL ADDRESS (IF AVAILABLE)		

2. Water Right Information

WATER RIGHT OR CLAIM NUMBER Ground Water Declaration Cert. No. 169-D	RECORDED NAME(S) Leonard Taruscio
DO YOU OWN THE RIGHT TO BE CHANGED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS: Mike Neary, 2055 Plaza Way, Walla Walla, WA 99362	
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.

C63-#002565
6416342

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
A well (alluvial aquifer)		SE	SW	32	7	36 E	360732310006	
(See note)								

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
A well (alluvial aquifer)		SE	SE	3	6	35 E	350603440012	

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: YES NO PROPOSED: YES NO - IF NO, PROVIDE OWNER(S) NAME: Existing - Mike Neary

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 10 acres	150	40	Seasonal (irrigation season)

B. Proposed -

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation of 12.5 acres	150	40	Seasonal (irrigation season)

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:
See attached Certificate of Ground Water Right No. 169-D

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
N½	SW	32	7	36 E	Walla Walla	Various	9.49

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:
See Attachment "Proposed Place of Use"

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
SE	SE	3	6	35 E	Walla Walla	350603440012	14.5 (12.5 irr)

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): WW Adj. Cert. 482 w/Cert. of Chg. V-2, Pg 943

6. Remarks and Other Relevant Information:

The well for Cert. 169-D was originally applied for, and published as, being located within the SE¹/₄SW¹/₄ of Sec. 32. The well was actually located within the NE¹/₄SW¹/₄ of Sec. 32. Notations were made in the file to correct the location of the well.

This application proposes to (1) change the authorized POW to a well located in the SE¹/₄SE¹/₄ of Sec. 3, (2) change the place of use of the right to lands within the SE¹/₄SE¹/₄ of Sec. 3, both within T. 6 N., R. 35 E.W.M., and (3) add irrigated acres to the water right through transition to lower water use crops.

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>Nick J. Taruscio</u> Applicant Printed Name - Title	<u><i>Nick J. Taruscio</i></u> Applicant Signature	<u>12/29/14</u> (Date)
_____ Water Right Holder Printed Name	_____ Water Right Holder Signature	<u> / /</u> (Date)
_____ Land Owner of Existing Place of Use Printed Name	_____ Land Owner of Existing Place of Use Signature	<u> / /</u> (Date)
<u>Nick J. Taruscio</u> Land Owner of Proposed Place of Use Printed Name	<u><i>Nick J. Taruscio</i></u> Land Owner of Proposed Place of Use Signature	<u>12/29/14</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 (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):

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

STAFF: _____ DATE: ___/___/___

