



Application for a Water Right Permit

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MAY 20 2015

DEPARTMENT OF ECOLOGY
EASTERN REGIONAL OFFICE

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION FOR THE FOLLOWING:

- GROUND WATER SURFACE WATER PERMANENT
 SHORT TERM TEMPORARY

NO FEE REQUIRED FOR THE FOLLOWING:

- DROUGHT COST REIMBURSEMENT

Follow the attached instructions. Attach additional sheets as necessary.

Section 1. APPLICANT

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

Applicant/Business Name: City of Newport	Phone No: 509-447-5611	Other No: 509-447-6429
Address: 200 South Washington Avenue		
City: Newport	State: WA	Zip: 99156
Email Address (if available): clerk@newport.wa.org		

Contact Name (if different from above): Necia Maiani	Phone No: 208-664-9382	Other No:
Relationship to Applicant: Water System Engineer		
Address: 350 E Kathleen Avenue		
City: Coeur d'Alene	State: ID	Zip: 83815
Email Address (if available): nmaiani@welchcomer.com		

Legal Land Owner or Part Owner Name of the Proposed Place of Use: Municipal Water Supplier	Phone No:	Other No:
Address:		
City:	State:	Zip:
Email Address (if available):		

For Ecology Use	APPLICATION NO: 63-30739	SEPA Exempt/Not Exempt		
	Fee Paid: _____	Check No: _____	ECY Coding: 001-001-WR1-0285-000011	
Date Returned _____	By _____	Priority Date 5-20-2015	By KY	WRIA: 62
Pre-application interviewer:				

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: 1. Add water right diversion capacity necessary for future growth. 2. Add new points of diversion and integrate with existing system.

Anticipated length of time to compete your project: 6

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 type="checkbox"/> Cubic Feet per Second (CFS)	<input checked="" type="checkbox"/> Gallons per Minute (GPM)		
Municipal Water Supply	350		320	Continuously
TOTAL:	350		320	

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 type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____ Source Name: _____ Tributary to: _____ Number of proposed diversion points: _____ Do you have an existing diversion? <input type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____ Well diameter & depth: Refer to Attach 3Bc ^A Number of proposed points of withdrawal: 9 Do you have an existing well? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If available, attach Water Well Report and pump test. Well Tag ID No. Refer to Attach 3Bc ^A

C.) Point of Diversion/Withdrawal – Legal Description						
Parcel No.	¼	¼	Section	Township	Range	County
Refer to Attach 3C						
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_____.						
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.

Area served by the City of Newport Municipal Supply System within Pend Oreille County, Washington. The place of use (POU) of this water right is the service area described in the most recent Water System Plan approved by the Washington State Department of Health, so long as the City of Newport is and remains in compliance with criteria in RCW 90.03.386(2). RCW 90.03.386 may have the effect of revising the place of use of this water right.

¼	¼	Section	Twp.	Range	County	Parcel No.

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: N/A - Municipal Water Supplier

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: G3-22797C, G3-25887C, G3-26830C

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): Nine wells, pumps, reservoirs and pressure distribution system. Refer to Attachment 5

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: _____ Type of connections: _____ <i>(e.g., home, recreational cabin)</i>	Present population to be served water: <u>2,140</u> Estimate future population to be served: <u>2,400</u> (20 year projection) <u>3,760</u> (buildout)
C.) Water System Planning	
Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If yes, date plan was approved <u>02/20/2002</u> Water System Number: <u>59350</u> Note: Current Water System Plan (2015) under review. Name of water system: <u>City of Newport</u> Are you within the service area of an existing water system? <input type="checkbox"/> YES <input 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 = _____ ACRES

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: _____

Is the proposed project for a dairy farm? YES NO

Other Proposed Farm Uses

Describe all proposed uses: _____

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: Well K - (from Spokane) Follow US-2 to S Calispel Ave in Newport, WA. Turn left onto Calispel Ave to 5th St. Turn left onto 5th St (well site is on left). Well L - (from Spokane) Follow US-2 to Union Ave in Newport, WA. Turn left onto Union St (well site is on right).

Site Address: Well K - 5th St. Newport, WA; Well L - N Union St. Newport, WA

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.

Raymond A. King City Administrator *05/04/2015*

 Print Name (Applicant or authorized representative) Signature Date

 Print Name (Legal Owner or Part Owner Place of Use) Signature Date

 Print Name (Legal Owner or Part Owner Place of Use) Signature Date

Please check the region in which the project is located:

<p>*Submit your application to: 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 have questions about your application, contact the Water Resources program at the regional office in which your project is located.



Attachment for Section 3C

Well Name	1/4	1/4	Section	Township	Range	County	Location Description
Existing Points of Diversion							
Well B	SE	NE	S24	31N	45E	Pend Oreille	465 feet North and 330 feet West of the E 1/4 corner of Sec. 24
Well D	NE	SE	S24	31N	45E	Pend Oreille	50 feet South and 1250 feet West of the E 1/4 corner of Sec. 24
Well E	NE	SE	S24	31N	45E	Pend Oreille	45 feet South and 1230 feet West of the E 1/4 corner of Sec. 24
Well F	SE	NE	S24	31N	45E	Pend Oreille	450 feet North and 650 feet West of the E 1/4 corner of Sec. 24
Well G	SE	NE	S24	31N	45E	Pend Oreille	430 feet North and 800 feet West of the E 1/4 corner of Sec. 24
Well H	NW	NE	S24	31N	45E	Pend Oreille	70 feet South and 70 feet East of the N 1/4 corner of Sec. 24
Well J	SW	SW	S19	31N	46E	Pend Oreille	1100 feet North and 450 feet East of the SW corner of Sec. 19
New Points of Diversion							
Well C	SE	NE	S24	31N	45E	Pend Oreille	410 feet North and 80 feet West of the E 1/4 corner of Sec. 24
Well I	SE	NE	S24	31N	45E	Pend Oreille	410 feet North and 950 feet West of the E 1/4 corner of Sec. 24
Well K	SW	NE	S24	31N	45E	Pend Oreille	1000 feet North and 1750 feet West of the E 1/4 corner of Sec. 24
Well L	SW	NE	S24	31N	45E	Pend Oreille	1000 feet North and 1750 feet West of the E 1/4 corner of Sec. 24

Attachment for Section 5

NOTE: These facilities only include the system in Newport, WA

Wells

Well Name	Diameter (inch)	Depth (feet)	Horsepower	Source Capacity (gpm)
Existing Points of Diversion				
Well B	8	76	7.5	180
Well D	8	67	20	260
Well E	10	105	15	150
Well F	8	80	7.5	120
Well G	8	90	7.5	120
Well H	8	160	7.5	70
Well J	TBD	TBD	TBD	TBD
New Points of Diversion				
Well K	TBD	TBD	TBD	TBD
Well L	TBD	TBD	TBD	TBD

Reservoirs

Name	Size	Material
Upper	1.2 million gallon	Steel
Lower	0.9 million gallon	Concrete

Distribution

Diameter (inch)	Material	Length (feet)
4-10	Asbestos Cement	48,834
1-2	Galvanized Iron	3,961
4-10	PVC	35,020