STATE OF WASHINGTON

APPLICATION FOR CHANGE/TRANSFER OF WATER RIGHT

For filing with Ecology or with County Conservancy Boards

A MINIMUM FEE OF $10.00 PAYABLE TO ECOLOGY MUST ACCOMPANY THIS APPLICATION

RECEIVED
MAR 3 2006
DEPARTMENT OF ECOLOGY
WALLA WALLA FIELD OFFICE

(Check all that apply.)

- ☐ Change purpose(s) of use
- ☐ Add purpose(s) of use
- ☐ Change point(s) of diversion/withdrawal
- X Add point(s) of diversion/withdrawal
- X Change/transfer place of use
- ☐ Other (i.e. consolidation, intertie, trust water)

Explain: _____

FOR OFFICE USE ONLY

CHANGE No. CS3-*28007J WRIA 32

DATE ACCEPTED 05/01/2006 BY Kayjohich

FEE $ 50.00 REC'D 03/03/2006

CHECK No. 421196

SEPA: ☒ Exempt ☐ Not exempt

Walla Walla County

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

1. Applicant Information:

APPLICANT/BUSINESS NAME	PHONE NO.	FAX NO.
Walla Walla Community College	(509) 527-4213	( )
ADDRESS 500 Tausick Way		
CITY Walla Walla	STATE WA	ZIP CODE 99362

CONTACT NAME (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
Jona Roberts	(509) 527-4213	( )
ADDRESS Same		
CITY Same	STATE	ZIP CODE

Cert S3*28007J → Titus Creek Adj #7

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER Walla Walla Adjudication certificate #7	RECORDED NAME(S) May K & Eloise Thomas
DO YOU OWN THE RIGHT TO BE CHANGED? X YES ☐ NO IF NO, PROVIDE OWNER(S) NAME:	OWN PORTION (SEE TRACT 1 WARRANT DEED)
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? X YES ☐ 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.

A. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Titus Creek	7	SE	SW	14	7N	36E		
		SE	SE	14	7	36		

3-13-06 per certificate Kaufbich

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Titus Creek	7	NE	NW	23	7N	36E		

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?
EXISTING: X YES ☐ NO PROPOSED: X 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
irrigation of 110.	1.466		4-1 to 7-1
	1.100		7-1 to 10-1
	2.200		10-1 to 4-1

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
See attached water right cert. # 7							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
							110

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? ☐ YES X NO – IF NO, PROVIDE OWNER(S) NAME:
KLICKER BROS & SONS (Per phone w/ Jerry Ankorn)

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
All lands currently described under water right certificate #7 and lands							
Associated with attached warranty Deed for tract II parcel and							
All lands owned by WWCC and associated with Certificate #4							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? X 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 X NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S):

6. Remarks and Other Relevant Information:

See attached maps for current and proposed new P.O.D.
See attached maps for current place of use and added place of use
See attached warranty deeds for parcel I, II, & III, descriptions.

IF FOR SEASONAL OR TEMPORARY, START DATE ____/____/____ END DATE ____/____/____

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 am hereby granting 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.

James R. Peterson 2/16/06
(Applicant) (Date)

V.P. Admin Services WWCC (509) 527-4215

James R. Peterson 2/16/06
(Water Right Holder) (Date)

James R. Peterson 2/16/06
(Land Owner(s) of Existing Place of Use) (Date)

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

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:*** ____/____/____

IMPORTANT!

Submit your application to Ecology at the regional office for the area of proposed or existing water use or at a Conservancy Board with jurisdiction. Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application or whether a County Conservancy Board with jurisdiction exists, contact the Water Resources program at the regional office in which your project is located.