DEPARTMENT OF ECOLOGY
State of Washington

STATE OF WASHINGTON

APPLICATION FOR CHANGE/TRANSFER OF WATER RIGHT

For filing with the Department of Ecology or with County Conservancy Boards

A NON-REFUNDABLE MINIMUM FEE OF $50.00 PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION

(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:

FOR OFFICE USE ONLY

CHANGE No._____ **WRIA**_____

DATE ACCEPTED____/____/____ **BY**_____

FEE $_____ **REC'D** ____/____/____

CHECK No. GRAN-11-13

ECY Coding: 001-002-WR10285-000011

SEPA: ☐ **Exempt** ☐ **Not exempt**

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

1. Applicant Information:

APPLICANT/BUSINESS NAME	PHONE NO.	FAX NO.
Public Utility District No. 2 of Grant County, WA	(509) 754-6612	(509)754-5074
ADDRESS		
P.O. Box 878		
CITY	STATE	ZIP CODE
Ephrata	WA	98823

CONTACT NAME (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
Cliff Sears	(509) 754-6612	(509)754-5074
ADDRESS		
Same as above		
CITY	STATE	ZIP CODE
Same as above		

LEGAL LAND OWNER or PART OWNER NAME OF PROPOSED PLACE OF USE	PHONE NO.	FAX NO.
Public Utility District No. 2 of Grant County, WA	(509) 754-6612	(509)754-5074
ADDRESS		
P.O. Box 878		
CITY	STATE	ZIP CODE
Ephrata	WA	98823

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER	RECORDED NAME(S)
G3-01590C, PR MC & S Irrigation	Public Utility District No. 2 of Grant County, WA
DO YOU OWN THE RIGHT TO BE CHANGED? ☒ YES ☐ NO IF NO, PROVIDE OWNER(S) NAME and ADDRESS:	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? ☒ 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.

FOR OFFICE USE ONLY

APP. NO._____ PERMIT NO. _____ CERT. NO._____ CERT. OF CHANGE NO._____

ECY 040-1-97 (Rev. 03/11) *If you need this document in an alternate format, please call the Water Resources Program at 360-407-6600. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.*

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
MC & S Well	1	NE	SW	36	14N	23E	150143000	AFO346

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
See attached page								

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

EXISTING: ☒ YES ☐ NO PROPOSED: ☒ 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:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Municipal water supply purposes	300	120	March 1 to October 31

B. Proposed

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

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:

SW 1/4 of S. 36, T. 14N, R. 23E.W.M.; SW1/4 NW1/4, N1/2 SW1/4, W1/2 SE1/4, of S. 1, T. 13N., R. 23E.W.M.; and Government lots 1, 2 and 5 of S. 2, T. 13 N., R. 23 E.W.M. All less rights of way, Grant County, WA.

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
		2	13 N	23 E.	Grant	150143000 150029000 150031000	--

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:

The area served by the Priest Rapids Water Systems Comprehensive Plan now existing or as may be hereafter amended. A map of the current service area is attached in section I. A metes and bounds description is provided on the following page.

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

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): 2739-A, Priest Rapids MC & S Domestic. Other water rights relate to the non-consumptive use within the Priest Rapids Fish Hatchery.

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6. Remarks and Other Relevant Information:

This application is intended to consolidate and integrate existing wells and one alternate well that are hydraulically connected within the Priest Rapids Comprehensive Water Systems Plan. Formal approval of the PRWSCP by the Washington State Department of Health will be provided upon receipt.
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.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.

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.

PUD No. 2 of Grant County, WA	Cliff Sears	*8/8/11*
(Applicant)	***(Applicant Signature)***	***(Date)***
PUD No. 2 of Grant County, WA	Cliff Sears	*8/8/11*
(Water Right Holder)	***(Water Right Holder)***	***(Date)***
PUD No. 2 of Grant County, WA	Cliff Sears	*8/8/11*
(Land Owner(s) of Proposed Place of Use)	***(Land Owner(s) of Proposed 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:*** ____/____/____

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ATTACHMENT FOR

APPLICATION FOR CHANGE

Point(s) of Diversion/Withdrawal - ☐ Existing ☒ Proposed:

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
PR Powerhouse Well		--	--	2	13N	23E	150031000	AEH397
MC & S Well		NE	SW	36	14N	23E	150143000	AFO346
Wan. Indian. Village Well #1		NW	SW	2	13N	23E	23130232001	ABS029
Wan. Indian. Village Well #2		SE	SE	3	13N	23E	23130321001	
MC & S Alternate Well		--	--	35	14N	23E	150141000	N/A

DO YOU OWN THE ABOVE POINT(S) OF DIVERSION/WITHDRAWAL? ☒ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME:

Purpose(s) of Use - ☐ Existing ☐ Proposed:

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

Place of Use - ☐ Existing ☐ Proposed:

LEGAL DESCRIPTION OF LANDS

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

DO YOU OWN ALL THE LANDS IN ABOVE PLACE OF USE? ☐ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME:

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