



Water Resources Program

Application for a Water Right Permit

For Ecology Use
(Date Stamp)

- SURFACE WATER GROUND WATER PERMANENT
 TEMPORARY SHORT TERM DROUGHT

Follow the attached instructions. Attach additional sheets as necessary.

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

Section 1. APPLICANT

Applicant/Business Name: <u>JASON GALBRAITH</u>	Phone No: <u>509 879 3455</u>	Other No: <u>OFF 509 928 8297</u>
Address: <u>2139 BLACK LAKE Rd.</u>		
City: <u>COVILLE</u>	State: <u>WA</u>	Zip: <u>99214</u>
Email Address (optional): <u>SG ROCKMAN @ Hotmail.com</u>		

Contact Name (if different from above): <u>JASON GALBRAITH</u>	Phone No: <u>509 879 3455</u>	Other No: <u>509 928 8297</u>
Relationship to Applicant: <u>SAME</u>		
Address: <u>13717 E SANSON RD.</u>		
City: <u>SPOKANE</u>	State: <u>WA</u>	Zip: <u>99114</u>
Email Address (optional):		

Legal Land Owner or Part Owner Name of the Proposed Place of Use: <u>JASON GALBRAITH</u>	Phone No: <u>509 879 3455</u>	Other No:
Address: <u>13717 E SANSON Rd.</u>		
City: <u>Spokane</u>	State: <u>WA</u>	Zip: <u>99114</u>
Email Address (optional): <u>SG ROCKMAN @ Hotmail.com</u>		

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: WE WOULD LIKE TO BE ABLE TO DRAW AN UNNORMAL AMT OF WATER OFF BLACK LAKE TO RUN OUR BATHROOM ON EXISTING AND FUTURE ANTICIPATED length of time to complete your project: 2 YRS. STRUCTURES. FIRE PROTECTION ALSO

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 type="checkbox"/> Gallons per Minute (GPM)		
<u>Bathroom</u>	<input checked="" type="checkbox"/>	<u>01</u>		
<u>FIRE PROTECTION</u>	<input checked="" type="checkbox"/>	<u>01</u>		
<u>In house USE ONLY</u>	<input type="checkbox"/>			
TOTAL:				

For Ecology Use	APPLICATION NO: <u>53-30653</u>	SEPA: <input checked="" type="checkbox"/> Exempt/Not Exempt
	Fee Paid: <u>50.00</u> Check No: <u>2001</u>	ECY Coding: 001-001-WR1-0285-000011
Date Returned	By: <u>KY</u> Priority Date: <u>10-13-2011</u>	By: <u>KY</u> WRIA: <u>59</u>

4998167

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 checked="" type="checkbox"/> Lake <input type="checkbox"/> Other: _____ Source Name: <u>Black Lake, Colville Stevens Co.</u> Tributary to: _____ Number of proposed diversion points: <u>1</u> Do you have an existing diversion? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____ Well diameter & depth: _____ Number of proposed points of withdrawal: _____ Do you have an existing well? <input 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.	1/4	Section	Township	Range	County
<u>5614403</u>	<u>3</u>	<u>3</u>	<u>35</u>	<u>41 East</u>	
Lot(s)	Block(s)	Subdivision			
<u>12A</u>					

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:

3276 Feet (North/ South) and 1090 feet (East/ West) from the (NW SW NE SE) corner of Section 3.

Parcel No.	1/4	1/4	Section	Township	Range	County
<u>5614403</u>			<u>3</u>	<u>35</u>	<u>41 East</u>	
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 (North/ South) and ____ feet (East/ West) from the (NW SW NE SE) corner of Section ____

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

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

Provide the owner name(s), address, and phone number: _____

Section 4. PLACE OF USE

the following described real estate situated in the County of STEVENS, State of Washington:

Assessor's Tax Parcel No.: 5614403

That part of the North 247.50 feet of the South 825.00 feet of Government Lot 12, in Section 3, Township 35 North, Range 41 East W.M., in Stevens County, Washington, lying East of the centerline of Black Lake Road and Southerly of the following described line:

Beginning at the intersection of the centerline of Black Lake Road and the South line of the North 147.50 feet for the South 825.00 of said Government Lot 12; thence North 89°41'46" East, along said South line 107.25 feet, more or less, to a point hereinafter referred to as "Point A" which is 156.17 feet West of a survey monument located on the said South line and the shore of Black Lake; thence leaving said South line, North 22°24'46" East 44.42 feet; thence South 56°09'32" East 73.00 feet to a point on said South line of the North 147.50 feet of the South 825.00 feet of said Government Lot 12, which is located North 89°41'46" East 77.57 feet from the above described "Point A"; thence continuing South 56°09'32" East 58.00 feet, more or less, to a point of the shoreline of Deep Lake [Black Lake] and the end of this line

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: _____

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): I wish to draw a minimal amt of water through a 1 1/2" pvc line located under my dock. This hose extends 27' into the lake at a depth of 24". The pump to system is a Grundfos Model MQ 3 which pumps 13 GPM. We have a Dura III water purification sys with ultra-violet light.

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

(Complete A or B, and C below)

A.) Domestic Water Systems only	B.) Municipal Water Systems only (defined under RCW 90.03.015)
Projected number of connections to be served: <u>1</u>	Present population to be served water: _____
Type of connections: <u>Recreational</u> <small>(e.g., home, recreational cabin)</small> <u>Cab W.</u>	Estimate future population to be served: _____ (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 = _____ ACRES

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

Stockwater

List number and kind of stock: NONE

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: _____

N/A

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: _____

N/A

Other Use

N/A

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: TAKE HWY 20 EAST FROM COLVILLE FOR 18 MILES, TURN LEFT ON BLACK LAKE RD, CONTINUE LEFT TO BLACK LAKE, CONTINUE TO NORTHEAST
around lake 2139 Black Lake Rd

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth is 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: TAKE HWY 20 EAST OUT OF COLVILLE TO BLACK LAKE FURN OFF (NORTH) STAY LEFT TO BLACK LAKE. GO TO NORTH END AND COME DOWN WEST SIDE OF SHOPELIVE TO
 Site Address: 2139 BLACK LAKE RD.

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.

JASON GALBREATH Jason Galbreath 10/8/11
 Print Name Signature Date
 (Applicant or authorized representative)
JASON GALBREATH Jason Galbreath 10/8/11
 Print Name Signature Date
 (Legal Owner or Part Owner Place of Use)

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

 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: 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 type="checkbox"/> Eastern Regional Office 4601 N. Monroe 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

If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.

