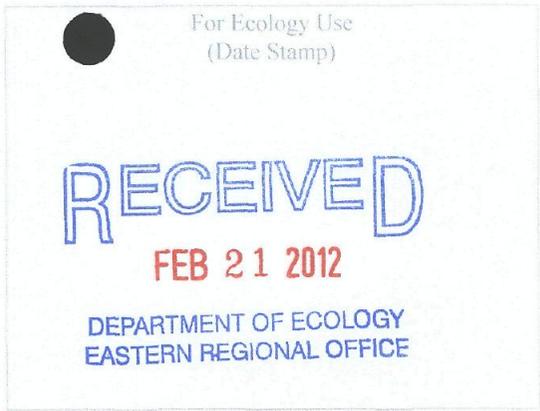




Water Resources Program
Application for Change/Transfer
of Water Right



**For filing with the Department of Ecology or with
County Water 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: Temporary

FOR OFFICIAL USE ONLY	
DATE APPLICATION RECEIVED	_____
CHECK NO.	_____ FEE \$ _____
DATE ACCEPTED	_____ BY _____
CHANGE NO.	_____
COUNTY	_____ WRIA _____
SPECIAL AREA	_____
SEPA: <input type="checkbox"/> EXEMPT <input type="checkbox"/> NOT EXEMPT	
ECY CODING:	001-002-WR10285-000011
APP NO.	_____ PERMIT NO. _____
CERT NO.	_____ CERT OF CHG NO. _____

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

1. Applicant Information

APPLICANT/BUSINESS NAME Atlas Sand and Rock, Inc.	PHONE NO. 509-533-1615	FAX NO. 509-533-1644
ADDRESS 4418 E. 8 th Ave		
CITY Spokane Valley	STATE WA	ZIP CODE 99212
CONTACT (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
ADDRESS		
CITY	STATE	ZIP CODE
LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE Gary Van Dyke	PHONE NO. 509-569-2581	FAX NO.
ADDRESS P.O. Box 322		
CITY Malden	STATE WA	ZIP CODE 99149

2. Water Right Information

WATER RIGHT OR CLAIM NUMBER 8555	RECORDED NAME(S) Paul Van Dyke
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: <u>Gary Van Dyke, P. O. Box 322, Malden, WA 99149</u>	
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.

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Pine Creek	1	SW	NE	13	20	42	200004220131901	

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Pine Creek	1	SW	NE	13	20	42	200004220131901	

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

EXISTING: YES NO PROPOSED: YES NO - IF NO, PROVIDE OWNER(S) NAME: Gary Van Dyke

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	0.40 cfs	120	July - Sept

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Aggregate Washing	0.40 cfs	1	April - June 2012

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:

Between the private road north of Pine Creek and the abandon railroad south of Pine Creek.

S 1/2 of SE 1/4 of NW 1/4 and S 1/2 of SW 1/4 of NE 1/4 and NE 1/4 of SE 1/4, Sec 13, T 20 N, R 42 E WM

1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
		13	20	42	Whitman	200004220131901	30

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? YES NO

IF NO, PROVIDE OWNER(S) NAME: Gary Van Dyke

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:

1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
S W	SW	18	20	43	Whitman	200004320183901	

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? YES NO

IF NO, PROVIDE OWNER(S) NAME: Gary Van Dyke

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?

ES NO - IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): _____

6. Remarks and Other Relevant Information:

Proposed temporary use of water is to wash aggregate for concrete to be used on the windmill project SE of Rosalia, WA. The place of use will be in a gravel pit in the SW 1/4 of SW 1/4 of Sec 13, T 20 N, R42 EWM.

A one acre portion of the SE 1/4 of SE 1/4 of NW 1/4 of Sec 13, T 20 N, R42 EWM will be temporarily removed from the place of use during this operation.

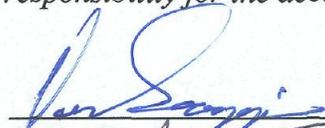
IF FOR SEASONAL OR TEMPORARY, START DATE 4/1/2012 END DATE 6/1/2012

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 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 preparing this above application, I understand that all responsibility for the accuracy of the information rests with me.

Vern Scoggin, Compliance Engineer
Applicant Printed Name – Title



Applicant Signature

2/21/12

 (Date)

Gary Van Dyke
Water Right Holder Printed Name



Water Right Holder Signature

2/21/12

 (Date)

Gary Van Dyke
Land Owner of Existing Place of Use Printed Name

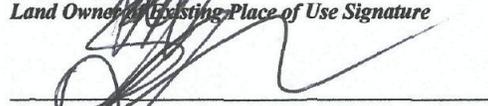


Land Owner of Existing Place of Use Signature

2/21/12

 (Date)

Gary Van Dyke
Land Owner of Proposed Place of Use Printed Name



Land Owner of Proposed Place of Use Signature

2/21/12

 (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:** ____/____/____

