



Application for a Water Right Permit DOLOMITE WATER SYSTEM

For Ecology Use
(Date Stamp)

RECEIVED

JUL 09 2012

Water Resources Program
Department of Ecology

12 JUL -9 A9:02

DEPT. OF ECOLOGY
FISCAL & BUDGET

Follow the attached instructions. Attach additional sheets as necessary.

- GROUND WATER SURFACE WATER
 PERMANENT SHORT TERM TEMPORARY
 DROUGHT

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

Section 1. APPLICANT

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

Applicant/Business Name: Public Utility District No. 1 of Stevens County (Aka: Stevens P.U.D.)	Phone No: 509-233-2534	Other No: Fax: 509-233-2809
Address: P O Box 592		
City: Loon Lake	State: WA	Zip: 99148
Email Address (if available): dprice@stevenspubd.org		

Contact Name (if different from above): Richard C.R. Price, P.E.	Phone No: 509-233-8700	Other No: Fax: 509-233-2809
Relationship to Applicant: General Manager/Engineer		
Address: same as above		
City:	State:	Zip:
Email Address (if available): same as above		

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): same as above		

For Ecology Use	APPLICATION NO: G3-30667	SEPA: Exempt /Not Exempt
	Fee Paid: 50.00 Check No: _____	ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____	Priority Date 7-9-2012 By KT WRIA: 59
Pre-application interviewer: _____		

RECEIVED

JUL 12 2012

DEPARTMENT OF ECOLOGY
EASTERN REGIONAL OFFICE

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: Obtain additional Qi for our existing Dolomite Water System

Anticipated length of time to complete your project: 1 year

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 Supply	30		0	Continuously
TOTAL:	30		0	

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: S01: 6" x 501'; S02: 6"x84' Number of proposed points of withdrawal: 2 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. _____

C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	¼	¼	Section	Township	Range	County
0874209	SW	SW	13	35N	39E	Stevens
Lot(s)	Block(s)		Subdivision			
8	---		Dolomite			

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

850 Feet (North/ South) and 30 feet (East/ West)
 from the (NW SW NE SE ___) corner of Section 13.

Parcel No.	¼	¼	Section	Township	Range	County
2662386	NW	SW	18	35N	40E	Stevens
Lot(s)	Block(s)		Subdivision			
4			Short Plat 17-2000			

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

2,600 feet (North/ South) and 930 feet (East/ West)
 from the (NW SW NE SE ___) corner of Section 18

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 Public Utility District No. 1 of Stevens County. See approved Service Area Map – Exhibit A.

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: 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: G3-27698C

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. (See Exhibits B, C, and D).

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): The Dolomite Public Water System includes the 2 previously described wells that produce 6 and 52 gpm, and one concrete gravity storage tank that has 20,200 gallons of usable capacity. This system currently serves 19 homes.

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: _____	Present population to be served water: 57 _____
Type of connections: _____ <i>(e.g., home, recreational cabin)</i>	Estimate future population to be served: 76 _____ (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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, date plan was approved <u>2/27/2012</u> Water System Number: <u>29808T</u>	
Name of water system: <u>Dolomite Water System</u>	
Are you within the service area of an existing water system? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, explain why you are unable to connect to the system: <u>This is a major water system for this area.</u>	

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: From Spokane go 72 miles north on Highway 395 to Colville, turn right (east) on Hwy 20 (3rd Avenue) and drive 4.8 miles to Mumau Road, turn left, go 50 feet, and enter to the right to the pumphouse.

Site Address: 561 Dolomite Road, Colville WA 99114

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.

Richard C.R. Price, P.E.

 Print Name
 (Applicant or authorized representative)

[Handwritten Signature]

 Signature

7/3/2012

 Date

Richard C.R. Price, P.E.

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

 Signature

7/3/2012

 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:</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 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 need this document in an alternate format, please call the Water Resources Program at 360-407-6872.
 Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

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

