



Application for a Water Right Permit

For Ecology Use
(Date Stamp)

RECEIVED

FEB 19 2013

DEPARTMENT OF ECOLOGY
EASTERN REGIONAL OFFICE

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: Marcella Yeates	Phone No: 775-846-1431	Other No: 775-674-6422
Address: 2800 Scottsdale Road		
City: Reno	State: Nevada	Zip: 89512
Email Address (if available): Myeates54@hotmail.com or myeates@unr.edu		

Contact Name (if different from above):	Phone No:	Other No:
Relationship to Applicant:		
Address:		
City:	State:	Zip:
Email Address (if available):		

Legal Land Owner or Part Owner Name of the Proposed Place of Use:	Phone No:	Other No:
Address:		
City:	State:	Zip:
Email Address (if available):		

For Ecology Use	APPLICATION NO: ⁹ 83-30683	SEPA: Exempt/Not Exempt
	Fee Paid: 50.00 Check No: 5759	ECY Coding: 001-001-WR1-0285-000011
Date Returned	By	Priority Date 2-19-2013 By KR
Pre-application interviewer: WRIA: 61		

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: Municipal water supplies. (Small non-community water system per WAC 246-290-100(2)) - We are requesting a permit to dig a test well and see if /where water is available on our site. We will be building a non-profit children's education/recreation camp housed in a sustainable building complex designed using medieval castle design elements.

Anticipated length of time to complete your project: 4-6 years

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) <input type="checkbox"/> Cubic Feet per Second (CFS) <input checked="" type="checkbox"/> Gallons per Minute (GPM)	Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
Potable water to support the castle occupants	Instantaneous		Seasonal
Irrigation water to support proposed agriculture uses	Instantaneous		Seasonal
Potable water to support the maintenance staff requirements of the castle	Instantaneous		Continuously
Stock water	Instantaneous		Continuously
TOTAL:	62.5 GPM	35Acre Feet	
	(8 Hr day/30 K) Instantaneous		

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: ___ / ___ / ___ **We do not know at this time when the well water will be needed. We are still in the property design phase.**

Section 3. POINT OF DIVERSION OR WITHDRAWAL

(Complete A or B, and C below)

A.) If Surface Water Source	B.) If Ground Water Source
<p><input type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____</p> <p>Source Name: _____</p> <p>Tributary to: _____</p> <p>Number of proposed diversion points: _____</p> <p>Do you have an existing diversion? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p><input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____</p> <p>_____</p> <p>Well diameter & depth: _____</p> <p>Number of proposed points of withdrawal: _____</p> <p>Do you have an existing well? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If available, attach Water Well Report and pump test.</p> <p>Well Tag ID No. _____</p>

C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	¼	¼	Section	Township	Range	County
1743000	SE 1/4	NE 1/4	35	38 North	37 East	Stevens
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 _____.

Parcel No.	¼	¼	Section	Township	Range	County
174291	SW	NE	35	38North	37East	Stevens
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.

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.

29.05 acre parcel, SE ¼ NE ¼, Section 35, Township 38 North, Range 37 E. Stevens County- Washington.						
Address: 2300 Northport-Flat Creek Rd., Kettle Falls, Washington						
Two (2) -20 acre parcels, #174291, SW ¼ NE ¼ Section 35, Township 38 North, Range 37 E., Stevens County, Washington						
Address: 2558 E and 2558F Gilmore Rd., Kettle Falls, Washington						
¼	¼	Section	Twp.	Range	County	Parcel No.
SE	NE	35	38 North	37 East	Stevens	1743000

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): Develop municipal supply system (Per WAC 246-290-100). Well with pump and meter – Possible concrete reservoirs

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

(Complete A or B, and C below)

<p>A.) Domestic Water Systems only</p>	<p>B.) Municipal Water Systems only <i>(defined under RCW 90.03.015)</i></p>
<p>Projected number of connections to be served: <u>One</u></p>	<p>Present population to be served water: <u>None</u></p>
<p>Type of connections: <u>One compound-housing/recreational/educational/agricultural</u> <i>(e.g., home, recreational cabin)</i></p>	<p>Estimate future population to be served: _____ (20 year projection)</p>
<p>C.) Water System Planning</p>	
<p>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 (We have just begun working with the Dept. of Health and Drinking Water)</p>	
<p>If yes, date plan was approved ____/____/____ Water System Number: _____</p>	
<p>Name of water system: _____</p>	
<p>Are you within the service area of an existing water system? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	
<p>If yes, explain why you are unable to connect to the system: _____</p>	
<p>_____</p>	
<p>_____</p>	
<p>_____</p>	

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = 5-7 acres ACRES

NOTE: Outline the area to be irrigated on your attached map. (this area has not yet been identified on the site)

Stockwater

List number and kind of stock: 10-20 chickens, 6 goats

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 NA and proposed capacity in kilowatts: _____

Describe works: NA

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

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: NA

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: North out of Kettle Falls, right on Northport-Flat Creek Road past Snag Cove Campground about 1 mile. Property is on the left. To access the upper part of the property continue on Northport-Flat Creek Rd until Gilmore Rd. Take a right on Gilmore road. The property is accessed from this road.....lots E and F.

Site Address:2300 Northport-Flat Creek Rd, Kettle Falls Washington and 2558 E and F, Gilmore Rd. Kettle Falls, Washinton.

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.

Marcella Yeates
 Print Name
 (Applicant or authorized representative)

Marcella Yeates
 Signature

02/14/2013
 Date

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

Marcella Yeates
 Signature

02/14/2013
 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.

