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STATE OF WASHINGTON DEPARTMENT OF ECOLOGY EASTERN REGIONAL OFFICE 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: Add Irrigated Acres with Existing Place of Use

FOR OFFICE USE ONLY
CHANGE No. CS3-26000(A) WRIA 33
DATE ACCEPTED / / BY
FEE \$ 435.00 REC'D / /
CHECK No.
ECY Coding: 001-002-WR10285-000011
SEPA: Exempt Not exempt
Walla Walla Co.

8.7 cfs 1810 AF

1. Applicant Information:

APPLICANT/BUSINESS NAME: David and Barbara Schultz
PHONE NO.: (509) 546-1167
FAX NO.:
ADDRESS: P.O. Box 2581
CITY: Pasco STATE: WA ZIP CODE: 99320

CONTACT NAME (IF DIFFERENT FROM ABOVE): Darryll Olsen, CSRIA
PHONE NO.: (509) 783-1623
FAX NO.:
ADDRESS: CSRIA 3030 W. Clearwater, Ste. 205-A
CITY: Kennewick STATE: WA ZIP CODE: 99336

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER: S3-26000C(A)
RECORDED NAME(S): David and Barbara Schultz
DO YOU OWN THE RIGHT TO BE CHANGED? X YES NO
IF NO, PROVIDE OWNER(S) NAME and ADDRESS:
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? X 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.

8.7 cfs = 39059 gpm

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Snake River(McNary Pool)		Gov Lot 1		28	9N	31 EWM	See Attachments	

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Same								

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
Irrigation-452.5 Acres	8.7 cfs	1,810	Jan 1—Dec 31

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation-Up to 520 Acres	8.7 cfs	1,810	Jan 1-Dec 31

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
All within: Section 33, Lying north of Washington State Highway 124, all in T.9N., R, 31 EWM.							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input type="checkbox"/> YES <input type="checkbox"/> NO – IF NO, PROVIDE OWNER(S) NAME:							

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
All within: Section 33, Lying north of Washington State Highway 124, all in T.9N., R, 31 EWM.							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? <input type="checkbox"/> YES <input type="checkbox"/> 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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S):

6. Remarks and Other Relevant Information:

The applicant is participating in the CSRIA Conservation O&M Program, initiating in 2013. The applicant seeks to include additional irrigated acres with the already authorized place of use.
SEASONAL START DATE 3/1/2013 END DATE 11/15/2013

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.

DC for David Schutz 1/10/13
(Applicant) (Date)

DC for David Schutz 1/10/13
(Water Right Holder) (Date)

DC for David Schutz 1/10/13
(Land Owner(s) of Existing Place of Use) (Date)

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):	
<input type="checkbox"/> APPLICATION FEE NOT ENCLOSED	<input type="checkbox"/> MAP NOT INCLUDED or INCOMPLETE
<input type="checkbox"/> ADDITIONAL SIGNATURES REQUIRED	<input type="checkbox"/> SECTION _____ IS INCOMPLETE
<input type="checkbox"/> OTHER/EXPLANATION: _____	
STAFF: _____	DATE: ____/____/____

