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 Rec'd 2-17-09

DEPT. OF ECOLOGY  
 FISCAL BUDGET  
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State of Washington

**Application for a Water Right Permit**

SURFACE WATER  GROUND WATER  
 Permanent  Temporary  Short Term

Follow the attached instructions. Attach additional sheets as necessary.

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION.

**Section 1. APPLICANT**

Applicant/Business Name: <i>Kevin Wayne Smith</i>	Phone No: <i>360 577 0659</i>	Other No: _____
Address: <i>3142 N. PACIFIC Physical Address</i>		
mailing <i>213 Alpenridge Rd</i>		
City: <i>Kelso</i>	State: <i>WA</i>	Zip: <i>98626</i>
Email Address (optional):		

Contact Name (if different from above): <i>Hal + Delores Smith</i>	Phone No: <i>360 577 0659</i>	Other No: _____
Relationship to Applicant: <i>Parents</i>		
Address: <i>135 Aldaglen</i>		
City: <i>Kelso</i>	State: <i>WA</i>	Zip: <i>98626</i>
Email Address (optional):		

**Section 2. STATEMENT OF INTENT**

Briefly describe the purpose of your proposed project: *Already Existing Domesticated System + spring, live stock, Irrigation, well, House Attached! + Future Homes?*

Anticipated length of time to complete your project: \_\_\_\_\_

**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)		
<i>Irrigation</i>	<i>used prior to 1972</i>			
<i>live stock</i>	<i>3 1/2 inch pump</i>			
<i>was Drinking prior to 1972</i>	<i>only kept at level</i>			
<b>TOTAL:</b>				

**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

<b>A.) If Surface Water Source</b>				<b>B.) If Ground Water Source</b>			
<input checked="" 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 checked="" type="checkbox"/> Other: <u>Domesticated</u> <u>Water System</u> Well diameter & depth: _____ Number of proposed points of withdrawal: _____ 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. _____			
<b>C.) Point of Diversion/Withdrawal - Legal Description</b>							
Parcel No.	¼	¼	Section	Township	Range	County	
W10108005			1NW	8 North	2	Cowlitz	
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 ( <input type="checkbox"/> North/ <input type="checkbox"/> South) and _____ feet ( <input type="checkbox"/> East/ <input type="checkbox"/> West) from the ( <input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> ) corner of Section _____ <u>west of the willamette meridian</u>							
Parcel No.	¼	¼	Section	Township	Range	County	
W10108005			1NW	8 North	2	Cowlitz	
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 ( <input type="checkbox"/> North/ <input type="checkbox"/> South) and _____ feet ( <input type="checkbox"/> East/ <input type="checkbox"/> West) from the ( <input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> ) corner of Section _____ <u>west of the willamette meridian</u>							

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**

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.

¼	¼	Section	Twp.	Range	County	Parcel No.
		1NW	8N	2	Cowlitz	W10108005

west of the willamette meridian

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: Hed + Dolores Smith 135 Aldaylen Rd  
Kelso, WA 98626

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: Adjoining 5 Acres, Kevin Smith  
was drinking water to house + live stock + irrigation  
prior to well in 1970s

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): All gravity flow from Springs to domesticated system & gravity through PVC pipe to houses  
New well & Irrigation & livestock

**Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION**

Complete A or B, and C below

<b>A.) Domestic Water Systems only</b>	<b>B.) Municipal Water Systems only</b> <i>(defined under RCW 90.03.015)</i>
Projected number of connections to be served: <u>4 Houses in future Irrigation</u>	Present population to be served water: _____
Type of connections: <u>Home, well, Irrigation, live</u> <i>(e.g., home, recreational cabin) STEAK</i>	Estimate future population to be served: _____ (20 year projection)
<b>C.) Water System Planning</b>	
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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, explain why you are unable to connect to the system: <u>Attached property 250' well drilled in 1970s, down hill from property.</u>	

*Check They had drilled well*

**Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES**

**Irrigation**

Total number of acres requested to be irrigated under this application = Apr 3 Acres ACRES

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

**Stockwater**

List number and kind of stock: (1) Horse, (1) Turkey & chicken (3)

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: Already Existing System  
Block + old growth Cedar, Predated 1970.

*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: \_\_\_\_\_

Site Address: Acreage Attached East + North of 3142 N. Pacific Ave  
Mailing Address 217 Alpenridge Kelso WA 98626 (previous Address 55  
2626 Old 99 Highway N. OR Rd 1 Box 167

**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.

Kevin Wayne Smith  
 Print Name  
 (Applicant or authorized representative)

[Signature]  
 Signature

Jan 31, 2009  
 Date

Hal Smith  
 Print Name  
 (Landowner of Place of Use)

[Signature]  
 Signature

Jan 31, 2009  
 Date

~~Hal Smith~~ Delores Smith  
 Print Name  
 (Landowner of Place of Use)

[Signature]  
 Signature

Jan 31, 2009  
 Date

Kevin Smith  
 Print Name  
 (Landowner of Place of Use)

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

Submit your application to: DEPARTMENT OF ECOLOGY  
 CASHIERING SECTION  
 PO BOX 47611  
 OLYMPIA, WA 98504-7611

Please check the region in which your proposed project is located.  
 Southwest  Northwest  Central  Eastern

Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.



- Southwest Regional Office: 360-407-6300
- Northwest Regional Office: 425-649-7000
- Central Regional Office: 509-575-2490
- Eastern Regional Office: 509-329-3400