For Ecology Use
(Date Stamp)

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WA State Department
of Ecology (SWRO)

DEPARTMENT OF
ECOLOGY
State of Washington

Water Resources Program
Application for a Water Right Permit

☐ SURFACE WATER X GROUND WATER ☐ PERMANENT

☐ TEMPORARY ☐ SHORT TERM ☐ DROUGHT

Follow the attached instructions. Attach additional sheets as necessary.

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

Section 1. APPLICANT

Applicant/Business Name: **Jack Johnson** Peninsula Topsoils LLC	Phone No: **360-731-7101**	Other No:
Address: **P.O. Box 1119**		
City: **Belfair**	State: **WA**	Zip:**98528**
Email Address (optional): **jjc@hctc.com**		

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

Legal Land Owner or Part Owner Name of the Proposed Place of Use: **Peninsula Topsoil LLC.**	Phone No: **360-275-1000**	Other No:
Address: P.O. Box 640		
City: **Belfair**	State: **WA**	Zip:**98528**
Email Address (optional): **Peninsulatopsoil@yahoo.com**		

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: **To establish water rights for a 9-connection Group B Water System in Belfair, WA. This water system will be for large residential lots.**

Anticipated length of time to complete your project: **3 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) ☐Cubic Feet per Second (CFS) X Gallons per Minute (GPM)	Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
Domestic-multiple	**31**	**4.5**	**Continuously**
Irrigation (36 acres)	**29**	**72**	**Seasonal**
TOTAL:	**60**	**76.5**	

For Ecology Use	
	APPLICATION NO: G2-30593 SEPA: Exempt/Not Exempt
	Fee Paid:____ Check No:____ ECY Coding: 001-001-WR1-0285-000011
Date Returned ____ By____	Priority Date 1/26/12 By SL WRIA: 15/Mason

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES X NO

Is this request for a temporary permit? ☐YES X 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
☐ Spring ☐ Creek ☐ River ☐ Lake ☐ Other:_____	X Well(s) ☐ Other:_____
Source Name:_____	Well diameter & depth: **6" diameter, 195' deep**
Tributary to:_____	Number of proposed points of withdrawal: **1**
	Do you have an existing well? X YES ☐ NO
Number of proposed diversion points:_____	If available, attach Water Well Report and pump test.
Do you have an existing diversion? ☐ YES ☐ NO	Well Tag ID No. **BCH 506**

C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	¼	¼	Section	Township	Range	County
12320-32-02000	SE	SW	20	23N	1W	Mason

Lot(s)	Block(s)	Subdivision

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

1,150 Feet (X North/☐ South) and **1,900** feet (X East/☐ West)

from the (☐NW X SW ☐NE ☐SE ☐ ____) corner of Section **20**.

Parcel No.	¼	¼	Section	Township	Range	County

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.

Do you own the land on which the proposed point of diversion/withdrawal is located? X 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.

Portions of the NE1/4, NW1/4 and SE1/4, of the SW ¼ of Section 20, Township 23North, and Range1W, W.M. In the County of Mason, in the state of Washington. More specifically tax parcel number 12320-32-02000

Mason County Assessor's legal description: S ½ NW SW & PTN N 2/3 of NE NW Ex PCL 2 of BLA # 03-30

¼	¼	Section	Twp.	Range	County	Parcel No.
SE	**SW**	**20**	**23n**	**1W**	**Mason**	**12320-32-02000**

For Ecology Use	APPLICATION NO:_____ SEPA: Exempt/Not Exempt Fee Paid:_____ Check No:_____ ECY Coding: 001-001-WR1-0285-000011

Date Returned _____By_____ Priority Date _____By_____ WRIA:_____

Do you own all the lands on which the proposed place of use is located? X 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 X 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): **The proposed water system will be comprised of a single drilled well equipped with a 5 hp submersible pump. The pump will be controlled by a 110-130 psi pressure switch, a 2" cycle stop control valve, and a 120 gallon pressure tank. The distribution system will be comprised of approximately 2,000 feet of 2" PVC and 800 feet of 1.25" PVC pipe. Two 60 psi pressure reducing valves shall be installed to limit water pressure delivered to the connection at lower elevations.**

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

(Complete A or B, and C below)

A.) Domestic Water Systems only	**B.) Municipal Water Systems only** *(defined under RCW 90.03.015)*
Projected number of connections to be served: **9**	Present population to be served water: _____
Type of connections: **Residential Homes** *(e.g., home, recreational cabin)*	Estimate future population to be served: _____ (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? ☐ YES X NO

If yes, date plan was approved _____/_____/_____ Water System Number: **Pending**

Name of water system: **Union River Water System**

Are you within the service area of an existing water system? ☐ YES X NO

If yes, explain why you are unable to connect to the system:_____

_____

_____

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = _36_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 **X** 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 Olympia; north on Hwy 101 toward Shelton. Exit Hwy 101 onto St. Rt. 3 North toward Belfair. In Belfair; turn right onto Old Belfair Hwy. Travel approximately 1 mile and turn left on Timberline Dr. Project Site is at end of Timberline Dr.**

Site Address: **201 NE Timberline Drive, Belfair, WA 98528**

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.

Print Name (Applicant or authorized representative)	Signature	Date
Jack Johnson	Jack Johnson Peninsula Topsoils Member	1-25-12

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

Please check the region in which the project is located:

***Submit your application to:**		
DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611	☐ Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	☐ Eastern Regional Office 4601 N. Monroe Spokane, WA 99205-1295 (509) 329-3400
	☐ Northwest Regional Office 3190 – 160th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	X Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

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