DEPARTMENT OF ECOLOGY
State of Washington

Application for a Water Right Permit

For Ecology Use
(Date Stamp)

RECEIVED

JUN 10 2014

DEPT OF ECOLOGY
BELLINGHAM FIELD OFFICE

Follow the attached instructions. Attach additional sheets as necessary.

☐ GROUND WATER ☒ SURFACE WATER

☐ PERMANENT ☐ SHORT TERM ☐ TEMPORARY

☐ DROUGHT

Coordinated Cost-Reimbursement

***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: FRED AND GLENDA POLINDER	Phone No: 360-354-3704	Other No:
Address: 1112 FRONT STREET		
City: LYNDEN,	State: WA	Zip: 98264
Email Address (if available):		

Contact Name (if different from above): COURTNEY POLINDER	Phone No: 360-410-8144	Other No:
Relationship to Applicant: GRANDSON, RENT THEIR FARM		
Address: 1093 POLINDER ROAD		
City: LYNDEN	State: WA	Zip: 98264
Email Address (if available): CPPOLINDER@HOTMAIL.COM		

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: S1-28782 SEPA: Exempt/Not Exempt
	Fee Paid: _____ Check No: _____ ECY Coding: 001-001-WR1-0285-000011
	Date Returned _____ By _____ Priority Date 6/10/14 By DM WRIA: 1
	Pre-application interviewer:

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: TO DRAW WATER FROM THE NOOKSACK RIVER TO IRRIGATE CROPS SUCH AS GRASS AND CORN.

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) ☐ Cubic Feet per Second (CFS) ☒ Gallons per Minute (GPM)	Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
IRRIGATION	0.668 cfs	1.5	SEASONAL
TOTAL:			

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
☐ Spring ☐ Creek ☒ River ☐ Lake ☐ Other:_____ Source Name: NOOKSACK RIVER Tributary to: PACIFIC OCEAN Number of proposed diversion points: 2 Do you have an existing diversion? ☒ YES ☐ NO	☐ Well(s) ☐ Other:_____ _____ Well diameter & depth:_____ Number of proposed points of withdrawal:_____ Do you have an existing well? ☐ YES ☐ 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
400321151108	SW		21	40N	03E	WHATCOM

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

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.

Parcel 400321151108 68 acres - Fred & Glenda Polinder
400328186457 22 acres - Courtney Polinder
400328242458 13 acres - River Valley Farms Inc

(Map Attached)

¼	¼	Section	Twp.	Range	County	Parcel No.
		21&28	40	03E	WHATCOM	

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: APPLICATION # S1-27179 FROM 1993 ON FILE FOR WATER PERMIT.

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): TRACTOR PUMP WITH A 6" SUCK PIPE. HOPE TO FEED A 3" IRRIGATION REEL.

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: _____	Present population to be served water: _____
Type of connections: _____ *(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 ☐ 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? ☐ YES ☐ 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 = 80-85 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: STRICTLY IRRIGATION FOR GRASS AND ROW CROPS.

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: TURN EAST ON POLINDER ROAD FROM HANNEGAN ROAD (POLINDER IS JUST SOUTH OF NOOKSACK RIVER BRIDGE), SERVICE SITE WILL BE AT THE PROPERTY AT ADDRESS 1040 POLINDER ROAD. (ABOUT 1/3 MILE EAST OF HANNEGAN).

Site Address: RIVER ACCESS AT 1040 POLINDER ROAD.

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.

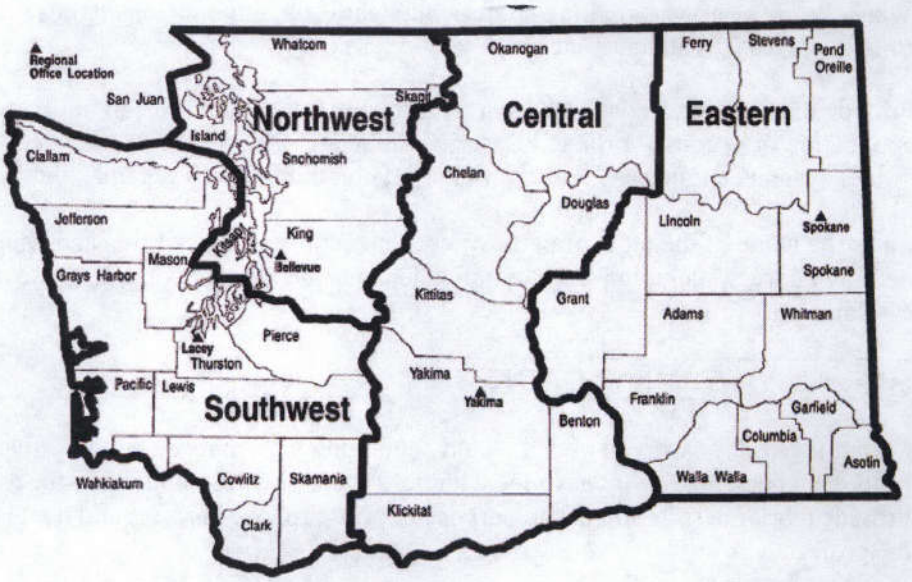
Print Name (Applicant or authorized representative)	Signature	Date
COURTNEY POLINDER		6-5-14
FRED POLINDER		6-6-14
Print Name (Legal Owner or Part Owner Place of Use)	Signature	Date
GLENDA POLINDER		6-6-14
Print Name (Legal Owner or Part Owner Place of Use)	Signature	Date

Please check the region in which the project is located:

***Submit your application to:**	☐ 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
DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611	☐ Northwest Regional Office 3190 – 160th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	☐ 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.



We encourage you to contact the Ecology Regional Office in your area to request a **pre-application conference** PRIOR to filing your application. Contacts are listed on the previous page. We will review your project needs and assist you in determining options for obtaining the water you need.

INSTRUCTIONS for the Application for a Water Right Permit

Please read these instructions carefully. Be accurate and complete in filling out your application, as the information you provide is very important in processing your application. Be sure to attach your fees, maps, and any additional information related to the water uses you are proposing.

If you need assistance, please contact the regional office in which your project will be located. A map of the Ecology regions is on the back page of the application. If your answers to any questions are longer than the space provided, you may attach additional sheets as necessary.

Check Boxes

Check the appropriate box for Surface or Ground Water.
Check the appropriate box for Permanent, Temporary, Drought, or Short Term use (duration of 4 months or less).

***Application Fee**

- A minimum fee of $50.00 is required for each new application for a water right permit.
- No fees are required for applications to be processed under a Cost Reimbursement contract.
- No fees are required for Emergency Drought Applications (only when a drought is declared).

If additional fees are required, Ecology will send you a letter requesting those fees. If you are unsure of the appropriate fee amount, contact your regional office for more information, or visit our website: <http://www.ecy.wa.gov/programs/wr/rights/wr_fees.html>.

Please make checks or money orders payable to the "Department of Ecology." Cash cannot be accepted. ALL FEES ARE NONREFUNDABLE.

Section 1. APPLICANT

Enter the name of the person, organization, or water system for which the water right permit is requested. For instance, if the permit is required for a community water system, enter the name of the system (e.g. Green Acres Water Works). Enter a mailing address, including zip, daytime telephone, an alternate or cell phone number, and an Email address (if you have one).

Provide the name of a contact person (if different from above) to call in case we have questions about the application or proposed project. Describe the relationship of the contact person to the applicant, e.g. "consultant," "water systems engineer," "realtor," "chair of community well organization," etc.

Enter the name of the legal or part owner (person or business) of the land where the water is to be used. Enter a mailing address, including zip, daytime telephone, an alternate or cell phone number, and an Email address (if available).

Section 2. STATEMENT OF INTENT

Mark the check box if you own the land containing the proposed point of diversion/withdrawal.
Mark the check box if you have legal authority to make this application for use of another's land.
Provide a brief description of the purpose of your proposed project and the anticipated length of time to complete the project.