Water Resources Program
Application for Change/Transfer of Water Right

DEPARTMENT OF ECOLOGY
State of Washington

For Ecology Use
(Date Stamp)

RECEIVED
MAY 26 2015
DEPT OF ECOLOGY
NWRO - WR

For filing with the Department of Ecology or with County Water Conservancy Boards

A NON-REFUNDABLE MINIMUM FEE OF $50.00 MUST ACCOMPANY THIS APPLICATION IF FILED WITH THE DEPARTMENT OF ECOLOGY

(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: **See Associated Earth Sciences "Project Summary Report for Water Rights G1-*01815C/G1-*11929C and G1-*10608C"**

FOR OFFICIAL USE ONLY

DATE APPLICATION RECEIVED 5/26/15
CHECK NO. _____ FEE $ _____
DATE ACCEPTED 5/26/15 BY DAO
CHANGE NO. CG1-*01815C
COUNTY Whatcom WRIA 1
SPECIAL AREA _____

SEPA: ☑ EXEMPT ☐ NOT EXEMPT
ECY CODING: 001-002-WR10285-000011
APP NO. _____ PERMIT NO. _____
CERT NO. _____ CERT OF CHG NO. _____

REET 6/3/15

IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)

1. Applicant Information

APPLICANT/BUSINESS NAME	PHONE NO.	FAX NO.
John E. VanderVeen/TJ VeenAcre Farms, Inc.	360-988-5924	
ADDRESS 9501 Van Buren Road		
CITY Lynden	STATE WA	ZIP CODE 98264

CONTACT (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
Charles S. Lindsay/Associated Earth Sciences, Inc.	425-259-0522	425-252-3408
ADDRESS 2911 ½ Hewitt Ave., Suite 2		
CITY Everett	STATE WA	ZIP CODE 98201

LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE	PHONE NO.	FAX NO.
John E. and Kristi L. VanderVeen	360-988-5924	
ADDRESS 9501 Van Buren Road		
CITY Lynden	STATE WA	ZIP CODE 98264

2. Water Right Information

WATER RIGHT OR CLAIM NUMBER	RECORDED NAME(S)
G1-*01815C	Everett E. Loreen

DO YOU OWN THE RIGHT TO BE CHANGED? ☒ YES ☐ NO

IF NO, PROVIDE OWNER(S) NAME and ADDRESS: _____

HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? ☒ 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.

See Associated Earth Sciences "Project Summary Report for Water Rights G1-*01815C/G1-*11929C and G1-*10608C".

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Irrigation Well	05E01	SW	NW	5	40N	04E	400405 160279	

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Irrigation Well	06A02	NE	NE	6	40N	04E	400406 426472	BHX533
Irrigation Well	06F01	SE	NW	6	40N	04E	400406 303263	BHX532
Irrigation Well	06F02	SE	NW	6	40N	04E	400406 303263	BHX535
Infiltration Trench	06F03	SE	NW	6	40N	04E	400406 303263	

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.
See Associated Earth Sciences "Project Summary Report for Water Rights G1-*01815C/G1-*11929C and G1-*10608C".

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation 130 92	430 GPM	77.0	April 15 – October 1

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation	430 GPM	73.9	April 15 – October 1

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
Government Lot 1 EXCEPT one acre in northeast corner thereof used for church purposes; and the E½ E½ of Government Lot 2 ALL in Sec. 6, T. 40 N., R. 4 E.W.M., LESS roads.							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
NW NE	NE	6	40N	4E	Whatcom	400406 426472	45.0

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? ☐ YES ☒ NO
IF NO, PROVIDE OWNER(S) NAME: **Stonefield LLC**

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
See the attached map and Associated Earth Sciences "Project Summary Report for Water Rights G1-*01815C/G1-*11929C and G1-*10608C".							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
NW NE	NE	6	40N	4E	Whatcom	400406 426472	45.0
SE	NE	6	40N	4E	Whatcom	400406 468376	3.2
SE	NE	6	40N	4E	Whatcom	400406 406330	27.5
SE	NE	6	40N	4E	Whatcom	400406 471317	3.0
NW NE	SE	6	40N	4E	Whatcom	400406 435238	8.0
NW NE	SE	6	40N	4E	Whatcom	400406 434178	21.0
NW	SE	6	40N	4E	Whatcom	400406 335151	4.5
NW	SE	6	40N	4E	Whatcom	400406 264151	4.5
NE	SW	6	40N	4E	Whatcom	400406 225199	9.5
NE	SW	6	40N	4E	Whatcom	400406 186199	14.5
SW SE	NE NW	6	40N	4E	Whatcom	400406 303263	70.
SE	NW	6	40N	4E	Whatcom	400406 147340	20.4
NE	NW	5	40N	4E	Whatcom	400405 194466	7.4
SE	SE	31	41N	4E	Whatcom	410431 479028	9.5

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? ☐ YES ☒ NO
IF NO, PROVIDE OWNER(S) NAME: **See Associated Earth Sciences "Project Summary Report for Water Rights G1-*01815C/G1-*11929C and G1-*10608C".**

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. **See Associated Earth Sciences "Project Summary Report for Water Rights G1-*01815C/G1-*11929C and G1-*10608C".**

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?
☒ YES ☐ NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): **G1-*11929C**

6. Remarks and Other Relevant Information:

IF FOR SEASONAL OR TEMPORARY, START DATE ___/___/_____ END DATE ___/___/_____

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. For further information, contact: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477. Phone (360) 570-3265.

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 preparing this above application, I understand that all responsibility for the accuracy of the information rests with me.

John Vanderveen		4/30/15
Applicant Printed Name – Title	*Applicant Signature*	*(Date)*
John Vanderveen		4/30/15
Water Right Holder Printed Name	*Water Right Holder Signature*	*(Date)*
John Vanderveen		4/30/15
Land Owner of Existing Place of Use Printed Name	*Land Owner of Existing Place of Use Signature*	*(Date)*
John Vanderveen		4/30/15
Land Owner of Proposed Place of Use Printed Name	*Land Owner of Proposed 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 Street Spokane, WA 99205-1295 (509) 329-3400
	☒ 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

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

☐ APPLICATION FEE NOT ENCLOSED ☐ MAP NOT INCLUDED or INCOMPLETE

☐ ADDITIONAL SIGNATURES REQUIRED ☐ SECTION _____ IS INCOMPLETE

☐ OTHER/EXPLANATION: _____

STAFF: _____ ***DATE:*** ____/____/____