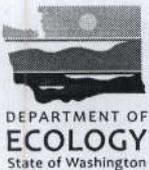


JUN 24 2015

For Ecology Use  
(Date Stamp)



**WATER RESOURCES**  
**Application for Change/Transfer of a Water Right**

15 JUN 24 A7:54

DEPT. OF ECOLOGY  
FISCAL & BUDGET

**You must include a \$50.00 minimum filing fee with this application for:**

(Check all that apply.)

- Change purpose(s) of use
- Add purpose(s) of use
- Change/transfer place of use
- Change point(s) of diversion/withdrawal
- Add point(s) of diversion/withdrawal
- Other (i.e. consolidation, intertie, trust water)

Explain:

**FOR OFFICIAL USE ONLY**

DATE APPLICATION RECEIVED	6/24/15		
CHECK NO.		FEE \$	50.00
DATE ACCEPTED	6/24/15	BY	DJ
CHANGE NO.	CSI-#10477C @ 1		
COUNTY	Whatcom	WRIA	1
SPECIAL AREA			
SEPA:	<input type="checkbox"/> EXEMPT <input type="checkbox"/> NOT EXEMPT		
ECY CODING:	001-002-WR10285-000011		
APP NO.		PERMIT NO.	
CERT NO.		CERT OF CHG NO.	

**No filing fee is required for applications for:**

- Drought
- Cost Reimbursement
- Water Conservancy Board

I have completed a pre-application consultation with Ecology.

**1. Applicant Information**

APPLICANT/BUSINESS NAME	PHONE NO.	FAX NO.
Baldev Sangha	(360) 927-9443	N/A
ADDRESS	6185 Chasteen Road	
CITY	STATE	ZIP CODE
Lynden	WA	98264
EMAIL ADDRESS (IF AVAILABLE)	N/A	

CONTACT (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
Lesa Starkenburg-Kroontje	(360) 354-7822	(360) 354-6929
ADDRESS	P.O. Box 231	
CITY	STATE	ZIP CODE
Lynden	WA	98264
EMAIL ADDRESS (IF AVAILABLE)	starkenburgkroontje@msn.com	

LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE	PHONE NO.	FAX NO.
Parmjit & Baldev Sangha	(360) 927-9443	N/A
ADDRESS	6185 Chasteen Road	
CITY	STATE	ZIP CODE
Lynden	WA	98264
EMAIL ADDRESS (IF AVAILABLE)	N/A	

JUN 24 2015

Water Resources Program

## 2. Water Right Information

WATER RIGHT OR CLAIM NUMBER S1-*10477CWRIS	RECORDED NAME(S) Henry B. Glass
DO YOU OWN THE RIGHT TO BE CHANGED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS: _____	
HAS THE WATER BEEN USED AS AUTHORIZED IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

- Attach copies of any documentation that shows the historical use of water that has occurred since the right was established.
- If you have a water system plan or conservation plan, please include a copy with your application.

## 3. Point(s) of Diversion/Withdrawal:

### A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Ten Mile Creek		NE	SE	18	39N	3E	390318 454209 0000	

### B. Proposed (if different from 3.A.)

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Well #1		NE	SE	18	39N	3E	390318 454209 0000	BHX 242
Well #2		NE	SE	18	39N	3E	390318 454209 0000	BIS 328

### C. DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING:  YES  NO PROPOSED:  YES  NO – IF NO, PROVIDE OWNER NAME(S): \_\_\_\_\_

- Include copies of all associated water well reports.
- 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	0.19 CFS		irrigation season
	85.28gpm		

### B. Proposed (if different from 4.A.)

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE

**5. Place of Use:**

**A. Existing**

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:  
 The NE of SE of Section 18, Township 39 North, Range 3 East of W.M.

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
NE	SE	18	39N	3E	Whatcom	390318 454209 0000	total parcel 36.07 acres

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE?  YES  NO  
 IF NO, PROVIDE OWNER NAME(S): Yes, where water is presently used.

**B. Proposed (if different than 5.A.)**

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE?  YES  NO  
 IF NO, PROVIDE OWNER NAME(S):

- 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.

**D. 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): S1-\*15924CWRIS

**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

Department of Ecology

JUN 24 2015

Water Resources Program

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Water Resources Program

**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 hereby grant 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.

Baldev Sangha  
Applicant Printed Name - Title

Baldev Sangha  
Applicant Signature

6/19/15  
(Date: MM/DD/YYYY)

Baldev Sangha  
Water Right Holder Printed Name

Baldev Sangha  
Water Right Holder Signature

6/19/15  
(Date: MM/DD/YYYY)

Baldev Sangha  
Land Owner of Existing Place of Use Printed Name

Baldev Sangha  
Land Owner of Existing Place of Use Signature

6/19/15  
(Date: MM/DD/YYYY)

Baldev Sangha  
Land Owner of Proposed Place of Use Printed Name

Same - Baldev Sangha  
Land Owner of Proposed Place of Use Signature

6/19/15  
(Date: MM/DD/YYYY)

<p><b>*Submit your application to:</b></p> <p>DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611</p>	<input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902-3463 (509) 575-2490	<input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1265 (509) 329-3400
	<input checked="" type="checkbox"/> Northwest Regional Office 3190 - 160 <sup>th</sup> Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300