For Ecology Use
(Date Stamp)

DEPARTMENT OF ECOLOGY
State of Washington

WATER RESOURCES
Application for Change/Transfer of a Water Right

DROUGHT Received e-mail 7/16/15

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: _____

No filing fee is required for applications for:
- ☒ Drought
- ☐ Cost Reimbursement
- ☐ Water Conservancy Board

FOR OFFICIAL USE ONLY

DATE APPLICATION RECEIVED 7/16/15
CHECK NO. _____ FEE $ NA
DATE ACCEPTED 7/16/15 BY DD
CHANGE NO. CS1-*14333AWC
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. _____

☐ **I have completed a pre-application consultation with Ecology.**

1. Applicant Information

APPLICANT/BUSINESS NAME	PHONE NO.	FAX NO.
Eaglemill Farms	360-815-0973	
ADDRESS 1364 Abbott Rd		
CITY Lynden	STATE WA	ZIP CODE 98264
EMAIL ADDRESS (IF AVAILABLE)		

CONTACT (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
Jeff DeJong	360-815-0973	
ADDRESS		
CITY	STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE) eaglemillwookie@yahoo.com		

LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE	PHONE NO.	FAX NO.
Rodney DeJong		
ADDRESS 1364 Abbot Road		
CITY Lynden	STATE WA	ZIP CODE 98264
EMAIL ADDRESS (IF AVAILABLE)		

2. Water Right Information

WATER RIGHT OR CLAIM NUMBER	RECORDED NAME(S)
SWC 11456A (AKA S1-*14333AWCWRIS)	William Scholten Jr.

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

IF NO, PROVIDE OWNER(S) NAME and ADDRESS: Fred & Shirley Fekkes, Gerald & Gertie Juergens
7198 Mission Road, Everson, WA 98247

HAS THE WATER BEEN USED AS AUTHORIZED IN THE LAST FIVE (5) YEARS? ☒ YES ☐ 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 #
Nooksack River in the N3/4 of the NW 1/4 and the NW 1/4 of NE 1/4	1			6	39N	4E		
Unnamed Slough in the N3/4 of the NW 1/4 and the NW 1/4 of the NE 1/4	2			6	39N	4E		

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

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Nooksack River		SE	NW	27	40N	3E	40032713561	

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): Fred and Shirley Fekkes, Gerald and Gertie Jenkins

- 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	1.24 CFS	220	June 1 through August 31

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:							
In Section 6, T. 39N., R. 4 E.W.M.: that part of the N 1/4 lying westerly of the Nooksack River, LESS the north 660 feet of the west 660 feet thereof; AND that part of the North 845 feet of the S1/2NW1/4 lying westerly of an unnamed slough of the Nooksack River; ALL LESS rights of way.							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
		6	39N	4E	Whatcom	3904061284350000	

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? ☐ YES ☒ NO

IF NO, PROVIDE OWNER NAME(S): Fred and Shirley Fekkes, Gerald and Gertie Jenkins

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

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
Section 27, T 40N, R 3E: Whatcom County Parcels: 4003272053000000, 4003271353610000, 4003273381390000, 4003273800880000',4003272811050000							
Section 28, T 40N, R 3E: Whatcom County Parcels 4003281603500000 & 4003280682850000							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
							125

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): S1-28783, G1-27119, G1-084045CL, S1-*02723ALCWRIS

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 Phone (360) 570-3265
Real Estate Excise Tax

PO Box 47477
Olympia, WA 98504-7477

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.

Applicant Printed Name – Title	**Applicant Signature**	**(Date: MM/DD/YYYY)**
Water Right Holder Printed Name	**Water Right Holder Signature**	**(Date: MM/DD/YYYY)**
Land Owner of Existing Place of Use Printed Name	**Land Owner of Existing Place of Use Signature**	**(Date: MM/DD/YYYY)**
Land Owner of Proposed Place of Use Printed Name	**Land Owner of Proposed Place of Use Signature**	**(Date: MM/DD/YYYY)**

***Submit your application to:** DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611	☐ Central Regional Office 1250 W. Alder Street Union Gap, WA 98903-0009 (509) 575-2490	☐ Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1265 (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

ATTACHMENT FOR
Application for Change/Transfer of Water Right

Point(s) of Diversion/Withdrawal - ☐ Existing ☐ Proposed:

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Unnamed stream in the N3/4 of the NW 1/4	3	NW	NE	6	39N	3E		

DO YOU OWN THE ABOVE POINT(S) OF DIVERSION/WITHDRAWAL? ☐ YES ☐ NO

IF NO, PROVIDE OWNER NAME(S):

Purpose(s) of Use - ☐ Existing ☐ Proposed:

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

Place of Use - ☐ Existing ☐ Proposed:

LEGAL DESCRIPTION OF LANDS

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

DO YOU OWN ALL THE LANDS IN ABOVE PLACE OF USE? ☐ YES ☐ NO

IF NO, PROVIDE OWNER NAME(S):

ATTACHMENT FOR
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Signatures:

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Jeff DeJong Applicant Printed Name – Title	Applicant Signature	7-16-15 (Date: MM/DD/YYYY)
GERALD JUERGENS Water Right Holder Printed Name	Water Right Holder Signature	7-16-15 (Date: MM/DD/YYYY)
GERALD JUERGENS Land Owner of Existing Place of Use Printed Name	Land Owner of Existing Place of Use Signature	7-16-15 (Date: MM/DD/YYYY)
Jeff DeJong Land Owner of Proposed Place of Use Printed Name	Land Owner of Proposed Place of Use Signature	7-16-15 (Date: MM/DD/YYYY)

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