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MAR 06 2008

State of Washington DEPT. OF ECOLOGY Application for a Water Right

For Ecology Use Fee Paid \$50.00 Date 3/6/08

Please follow the attached instructions to avoid unnecessary delays.

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name Rocky & SueAnn Heutink Home Tel: (360) 966-4336 Mailing Address 3682 Sorenson Rd. Work Tel: (360) 305-2772 (Rocky) City Everson State WA Zip+4 98247+ FAX: (360) 966-3362

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

Same as above

Name Home Tel: Mailing Address Work Tel: City State Zip+4 FAX: Relationship to applicant

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 200 Gallons per minute (200 gallons per minute or cubic feet per second) from a surface water source or ground water source (check only one) for the purpose(s) of irrigation: Applying water to land to enhance crop/plant growth. ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient.

Estimate a maximum annual quantity to be used in acre-feet per year: 160 Acre feet

Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed: From May of Every year to September.

Section 4. WATER SOURCE

Table with 2 columns: If SURFACE WATER and If GROUNDWATER. Includes fields for water source name, number of diversions, source flows, permit desired, and well size/depth.

LOCATION								
Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: <u>80 feet north and 126 feet west of the Southeast corner of section 4.</u>								
¼ of	¼ of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
NW	SE	4	39N	4E of N.M. Whatcom				
For Ecology Use Date Received: _____ Priority Date: _____								
SEPA: Exempt/Not Exempt FERC License # _____ Dept. Of Health # _____								
Date Accepted As Complete _____ By _____ Date Returned _____ By _____ WRIA: _____								

Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: _____
- B. Briefly describe your proposed water system. **(See instructions.)**
We are in planning stages - possibility of having blueberries - so system would be drip irrigation
- C. Do you already have any water rights or claims associated with this property or system? YES NO
 PROVIDE DOCUMENTATION.

Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION
(Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: _____ Type of connection _____
 (Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? YES NO
 If yes, explain why you are unable to connect to the system. *Note: Regional water systems are identified by your County Health Department.*

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? YES NO
 If yes, when was it approved? _____ Please attach the current approved version of your plan.

- D. Do you have an approved conservation plan? YES NO
 If yes, when was it approved? _____ Please attach the current approved version of your plan.

Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION
 (Complete for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: 70
- B. List total number of acres for other specified agricultural uses:
 Use Non-irrigated crops Acres 9
 Use _____ Acres _____
 Use _____ Acres _____
- C. Total number of acres to be covered by this application: 70
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977, as amended by Chapter 237, Laws of 2001)
 Add up 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;
 ‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 6000 acres? YES NO
 2. Do you have a controlling interest in a Family Farm Development Permit? YES NO
 If yes, enter permit no: _____
- E. Farm uses: NA
 Stockwater - Total # of animals — Animal type — (If dairy cattle, see below)
 Dairy - # Milking — # Non-milking —

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? YES NO

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 apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

From Everson, go east through town, past middle school & over railroad tracks. Continue east on S. Pass Road to intersection of Goodwin & S. Pass. Turn right & go 1.7 miles. Turn into access road of southwest corner of property.

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used? YES NO
If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

B. Does the applicant own the land on which the water source is located? YES NO
If no, submit a copy of agreement:

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 grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

[Signature] *[Signature]* 3-5-08
Applicant (or authorized representative) Date

same
Landowner for place of use (if same as applicant, write "same") Date

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
_____ Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
_____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your application by _____ (date).	

Ecology staff _____ Date _____

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).