



State of Washington
Application for a Water Right Permit

SURFACE WATER GROUND WATER
 Permanent Temporary Short Term

DEPT. OF ECOLOGY
FISCAL & BUDGET

For Ecology Use
(Date Stamp)
09 AUG -6 A 8:50

Follow the attached instructions. Attach additional sheets as necessary.

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION.

Section 1. APPLICANT

Applicant/Business Name: HARRINGTON RIDGE WATER SYSTEM		Phone No: (360) 678-2095	Other No:
Address: P. O. Box 665			
City: Coupeville	State: WA	Zip: 98239	
Email Address (optional):			

Contact Name (if different from above):		Phone No:	Other No:
Relationship to Applicant:			
Address:			
City:	State:	Zip:	
Email Address (optional):			

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: Expand 6-party system to supply up to 16 connections.

Anticipated length of time to complete your project: 10 years

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)		Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
	<input type="checkbox"/> Cubic Feet per Second (CFS)	<input checked="" type="checkbox"/> Gallons per Minute (GPM)		
Domestic, single family	30		4.8	Continuous
TOTAL:	30		4.8	

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: ___/___/___

For Ecology Use	APPLICATION NO: 61-28633	SEPA: <u>Exempt</u> /Not Exempt
	Fee Paid: _____ Check No: _____	ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____	Priority Date 8/6/09 By DD WRIA: 6

Section 3. POINT OF DIVERSION OR WITHDRAWAL

Complete A or B, and C below

A.) If Surface Water Source <input type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____ Source Name: _____ Tributary to: _____ Number of proposed diversion points: _____ Do you have an existing diversion? <input type="checkbox"/> YES <input type="checkbox"/> NO	B.) If Ground Water Source <input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____ _____ Well diameter & depth: <u>6-inch, 211 feet</u> Number of proposed points of withdrawal: <u>1</u> Do you have an existing well? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If available, attach Water Well Report and pump test. Well Tag ID No. <u>ALT272</u>
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C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	¼	¼	Section	Township	Range	County
042-1110	SW	SW	6	31 N	2 E	ISLAND
Lot(s)	Block(s)		Subdivision			

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:

560 Feet (North/ South) and 750 feet (East/ West)
 from the (NW SW NE SE _____) corner of Section 6.

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.

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

Provide the owner name(s), address, and phone number: _____

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.

Parcels R23106-240-0370, 230-1110, 175-0370, 173-1110, 109-0360, 107-1100, 044-0360 and 042-1110						
¼	¼	Section	Twp.	Range	County	Parcel No.
	SW	6	31 N	2 E	ISLAND	SEE ABOVE

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: NA, PUBLIC WATER SYSTEM SERVICE AREA

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: _____

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): 6-inch well, with proposed twin 1,520 polyethylene storage tanks, water treatment system for removal of iron, manganese and arsenic, twin booster pumps and hydropneumatic tanks, 2-inch distribution system to supply initial 11 acre parcels with provision for subdivision of each parcels into 5.1 acre parcels.

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

Complete A or B, and C below

<p>A.) Domestic Water Systems only</p>	<p>B.) Municipal Water Systems only <i>(defined under RCW 90.03.015)</i></p>
<p>Projected number of connections to be served: <u>16</u></p> <p>Type of connections: <u>single-family homes</u> <i>(e.g., home, recreational cabin)</i></p>	<p>Present population to be served water: _____</p> <p>Estimate future population to be served: _____ (20 year projection)</p>
<p>C.) Water System Planning</p>	
<p>Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If yes, date plan was approved ____/____/____ Water System Number: _____</p> <p>Name of water system: <u>Harrington Ridge</u></p> <p>Are you within the service area of an existing water system? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If yes, explain why you are unable to connect to the system: _____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = _____ 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: _____

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: From Town of Coupeville drive east on SR 20 approximately 2 miles to Morris Road, turn left on Morris Road and drive approximately 1.25 miles to entrance to Harrington Ridge Estates, turn right and travel to end of road.

Site Address: _____

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.

Pamela Hill-Keeva
Print Name
(Applicant or authorized representative)

[Signature]
Signature

7/28/09
Date

Print Name
(Landowner of Place of Use)

Signature

Date

Print Name
(Landowner of Place of Use)

Signature

Date

Print Name
(Landowner of Place of Use)

Signature

Date

Submit your application to: DEPARTMENT OF ECOLOGY
CASHIERING SECTION
PO BOX 5128
LACEY WA 98509-5128

Please check the region in which your proposed project is located.
 Southwest Northwest Central Eastern

Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.



- Southwest Regional Office: 360-407-6300
- Northwest Regional Office: 425-649-7000
- Central Regional Office: 509-575-2490
- Eastern Regional Office: 509-329-3400