



Water Resources Program

Application for a Water Right Permit

11 MAR 11 10:46 AM

- SURFACE WATER GROUND WATER PERMANENT
 TEMPORARY SHORT TERM DROUGHT

DEPT. OF ECOLOGY
FISCAL & BUDGET

Follow the attached instructions. Attach additional sheets as necessary.

***A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION.**

Section 1. APPLICANT

Applicant/Business Name: Robert A. Warshawer		Phone No: (360) 734-7322	Other No:
Address: 1512 Fairview Street			
City: Bellingham	State: WA	Zip: 98226	
Email Address (optional):			

Contact Name (if different from above): Jon Sitkin, Chmelik Sitkin & Davis P.S.		Phone No: (360) 671-1796	Other No:
Relationship to Applicant: Attorney			
Address: 1500 Railroad Avenue			
City: Bellingham	State: WA	Zip: 98225	
Email Address (optional): jsitkin@chmelik.com			

Legal Land Owner or Part Owner Name of the Proposed Place of Use: Robert A. and Kimberly T. Warshawer		Phone No: (360) 734-7322	Other No:
Address: Same as above			
City:	State:	Zip:	
Email Address (optional):			

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: Domestic residential water withdrawn from Lake Whatcom for use at 1512 Fairview Street, Bellingham, Washington

Anticipated length of time to complete your project: Year round

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 checked="" type="checkbox"/> Cubic Feet per Second (CFS)	<input type="checkbox"/> Gallons per Minute (GPM)		
Single Family Domestic	.02 CFS		1.0/year (est.)	Continuously

For Ecology Use	APPLICATION NO: <u>51-28686</u>		SEPA: <u>Exempt</u> /Not Exempt
	Fee Paid: <u>50</u>	Check No: <u>16888</u>	ECY Coding: 001-001-WR1-0285-000011
Date Returned	By	Priority Date <u>3/11/11</u>	By <u>DA</u> WRIA: <u>1</u>

TOTAL:	.02 CFS		1.0/year (est.)

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: ___/___/___

Section 3. POINT OF DIVERSION OR WITHDRAWAL
(Complete A or B, and C below)

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

Parcel No.	¼	¼	Section	Township	Range	County
380326 048119			26 <u>26</u>	03 <u>08</u>	28 <u>03</u>	Whatcom
Lot(s)	Block(s)		Subdivision			
5 and 6 AND	1 AND		Watkins' Lake Front Addition to West Geneva AND			
3 and 4	4		Lake Whatcom Shorelands			

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 _____.

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.

For Ecology Use	APPLICATION NO: _____ SEPA: Exempt/Not Exempt
	Fee Paid: _____ Check No: _____ ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____ Priority Date _____ By _____ WRIA: _____

Parcel A: Lots 5 and 6, Block 1, "Watkins' Lake Front Addition to West Geneva, Whatcom Co., Washington, 1903,"						
Whatcom County, Washington, as per the map thereof, recorded in Book 5 of Plats, Page 32, in the Auditor's Office of said County and State.						
Parcel B: Lots 3 and 4, Block 4, Lake Whatcom Shorelands as shown upon the official map of said Shore Lands, on file in the office of the Commissioner of Public Lands at Olympia, Washington.						
¼	¼	Section	Twp.	Range	County	Parcel No.
		26	03	28	Whatcom	380326 048119

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: _____

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): Intake under water which is then pumped to an in-place irrigation system. Pump size is a ¾ horse pump. Service provided to one single-family residence and yard irrigation.

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION
 (Complete A or B, and C below)

A.) Domestic Water Systems only	B.) Municipal Water Systems only <i>(defined under RCW 90.03.015)</i>
Projected number of connections to be served: 1 _____	Present population to be served water: _____
Type of connections: <u>Home</u> <i>(e.g., home, recreational cabin)</i>	Estimate future population to be served: _____ (20 year projection)

C.) Water System Planning

Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? YES NO

If yes, date plan was approved ____/____/____ Water System Number: _____

Name of water system: _____

Are you within the service area of an existing water system? YES NO

If yes, explain why you are unable to connect to the system: _____

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = N/A ACRES

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: N/A

Is the proposed project for a dairy farm? YES NO

Other Proposed Farm Uses

Describe all proposed uses: N/A

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 Lakeway Drive head east through the Geneva area until reaching Lake Whatcom. Turn Left onto Lake Whatcom Boulevard. The first right is Fairview Street. Take a right onto Fairview Street.

Site Address: 1512 Fairview Street, Bellingham, WA

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.

Jon Sitkin
Print Name
(Applicant or authorized representative)

[Signature]
Signature

2/27/11
Date

Bob Warshawer
Print Name
(Legal Owner or Part Owner Place of Use)

[Signature]
Signature

3/7/11
Date

Print Name
(Legal Owner or Part Owner Place of Use)

Signature

Date

Print Name
(Legal Owner or Part Owner 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	<input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	<input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Spokane, WA 99205-1295 (509) 329-3400
	<input checked="" type="checkbox"/> Northwest Regional Office 3190 - 160 th 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