For Ecology Use
(Date Stamp)

DEPT. OF ECOLOGY
MAY 19 2011

DEPARTMENT OF ECOLOGY
State of Washington

Water Resources Program
Application for a Water Right Permit

x☐ SURFACE WATER ☐ GROUND WATER ☐ PERMANENT

☐ TEMPORARY ☐ SHORT TERM ☐ DROUGHT

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: Washington Federal	206-624-2334	Other No:
425 Pine St		
Seattle	Wa	98101
Ricka.Gerstmann@washingtonfederal.com		

Contact Name (if different from above): Jackie Chriest`	3604225200	Other No:
Agent –		
33688 Bamboo Lane		
Mount Vernon	Wa	98274
jaxchriest@startouch.net		

Legal Land Owner or Part Owner Name of the Proposed Place of Use: same as applicant	Phone No:	Other No:
Address:		
City:	State:	Zip:
Email Address (optional):		

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: to provide a permanent water souce to cabin. This water source has already been completed and been in used for unknown period of time.

Anticipated length of time to complete your project: n/a

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) ☐Cubic Feet per Second (CFS) x☐Gallons per Minute (GPM)	Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
Domestic/Single Family	5 0.011 cfs		continuous

For Ecology Use	APPLICATION NO: S1-28705 SEPA: Exempt/Not Exempt Fee Paid: 50- Check No: 5391 ECY Coding: 001-001-WR1-0285-000011
Date Returned ____ By ____	Priority Date 5/19/11 By DD WRIA: 3

TOTAL:			

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES x☐ NO

Is this request for a temporary permit? ☐YES x☐ 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)

A.) If Surface Water Source	B.) If Ground Water Source
☐ Spring ☐ Creek ☐ River x☐ Lake ☐ Other:_____	☐ Well(s) ☐ Other:_____
Source Name:_____Lake Cavanaugh_____	Well diameter & depth:_____
Tributary to:Stillaguamish_____	Number of proposed points of withdrawal:_____
	Do you have an existing well? ☐ YES ☐ NO
Number of proposed diversion points:1_____	If available, attach Water Well Report and pump test.
Do you have an existing diversion? x☐ YES ☐ NO	Well Tag ID No._____

C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	¼	¼	Section	Township	Range	County
66785		02 NW	27	33	60	Skagit

Lot(s)	Block(s)	Subdivision
10	1	3

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? x☐ 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:same as applicant

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.

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Date Returned _____ By _____ Priority Date _____ By _____ WRIA:_____	

Lake Cavanaugh Sub Div 3 Lot 10 Block 1						
¼	¼	Section	Twp.	Range	County	Parcel No.
	02	27	33	06	Skagit	66785

Do you own all the lands on which the proposed place of use is located? x☐ 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 x☐ 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): Existing 1 ¼' polybutylene intake line extends out lake approximately 150 feet. Foot valve on end of water line approximately 15 feet above lake bottom. Equipment: ½ hp jet pump, 5 micron particulate filter, ultraviolet light bacteria disinfection, expansion tank.

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

(Complete A or B, and C below)

A.) Domestic Water Systems only	**B.) Municipal Water Systems only** *(defined under RCW 90.03.015)*
Projected number of connections to be served: 1	Present population to be served water: _____
Type of connections: home *(e.g., home, recreational cabin)*	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 x☐ 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 x☐ 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 = _____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

Provide detailed driving directions to the project site: Lake Cavanaugh Road to South Shore

Site Address: 33155 South Shore Drive, Mount Vernon WA 98274

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.

Print Name (Applicant or authorized representative)	Signature	Date
Washington Federal	Ricka Gerstmann	5/12/11
Ricka Gerstmann, Special Assets Officer Washington Federal, successor in interest to Horizon Bank.		

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	☐ Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	☐ Eastern Regional Office 4601 N. Monroe Spokane, WA 99205-1295 (509) 329-3400
	x☐ 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