



STATE OF WASHINGTON APPLICATION TO ENTER A WATER RIGHT INTO THE TRUST WATER RIGHT PROGRAM

RECEIVED
MAY 02 2013
DEPT OF ECOLOGY
NWRO - WR

NOTE: THIS FORM IS ONLY TO BE USED FOR THE
ACQUISITION OF WATER INTO THE TRUST WATER RIGHT PROGRAM

(Check all that apply.)

- Lease
- Purchase
- Donation (Temporary)
- Other

Explain: _____

- Portion of the identified existing water right

IF FOR SEASONAL OR TEMPORARY, START DATE 05/01/2013
END DATE 06/01/26

FOR OFFICE USE ONLY	
FILE No. <u>CS1-*03754C@1</u>	WRIA <u>15</u>
DATE ACCEPTED <u>5/2/13</u>	BY <u>DR</u>
FEE \$ _____	REC'D _____ / _____ / _____
CHECK No. _____	
SEPA: <input checked="" type="checkbox"/> Exempt	<input type="checkbox"/> Not exempt

IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)

1. Applicant Information:

APPLICANT/BUSINESS NAME <u>Richard Wilson - Development Services of America</u>		PHONE NO. <u>(480)927-4890</u>	FAX NO. <u>(480)927-4889</u>
ADDRESS <u>16100 N. 71st Street Suite 520</u>			
CITY <u>Scottsdale</u>	STATE <u>AZ</u>	ZIP CODE <u>85254</u>	

CONTACT NAME (IF DIFFERENT FROM ABOVE)		PHONE NO. ()	FAX NO. ()
ADDRESS			
CITY	STATE	ZIP CODE	

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER <u>CS1 - *03754C</u>	RECORDED NAME(S) <u>Wax Orchards Inc./Misty Isle Farms</u>
DO YOU OWN THE RIGHT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF NO, PROVIDE OWNER(S) NAME and ADDRESS:	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
ARE WATER DIVERSIONS/WITHDRAWALS OF THIS WATER RIGHT METERED OR MEASURED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IMPORTANT! PROVIDE INFORMATION SHOWING THE EXTENT OF WATER USE FOR EACH OF THE LAST FIVE YEARS (See cover letter and attachments. Portion of water right subject to this trust donation has been exercised during past five years but has not been fully beneficially used and is still within development schedule)	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

FOR OFFICE USE ONLY	
WATER RIGHT NO. <u>CS1-*03754C@1</u>	FILE (contract) NO. _____

3. How is Water to be Made Available for Trust?

<input type="checkbox"/> Alteration in method of diversion	<input type="checkbox"/> Alteration in water use/ irrigated acreage
<input type="checkbox"/> Alteration in method of delivery/conveyance	<input type="checkbox"/> Nonuse of one or more points of diversion
<input type="checkbox"/> Alteration in method of water application	<input checked="" type="checkbox"/> Nonuse of all or a portion of the named water right
<input type="checkbox"/> Alteration in type of crop	<input type="checkbox"/> Other, Explain below:
Name of funding source(s):	

WATER RIGHT DESCRIPTION *

4. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Wax Orchards well	1	SW	NW	13	22 N.	2E.	King County Tax Lots 9006, 9055, 9062	

Please include copies of all water well reports involved with this proposal. Also, 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.

5. Purpose of Use:

A. Existing Use of the Water Right

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Wax Orchards - Commercial	35 gpm	25	Continuous
Wax Orchards - Domestic	35 gpm	3	Continuous
Misty Isle Farms - Domestic	10 gpm	1	Continuous
Misty Isle Farms - Irrigation (4 ac.)	10 gpm	6	May - October

B. Proposed Purpose of the Trust Water Right:

DESCRIBE THE PURPOSE(S) OF USE DURING THE PERIOD OF TRUST:	
PURPOSE OF USE	ACRE-FEET/YR
Wax Orchards (Commercial Portion) Groundwater preservation/instream flow	25 AF/YR
Other portions of water right not subject to temporary trust donation; no change in purpose of use	

6. Place of Use:

A. Existing:

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
W ½ NW ¼ Sec. 13, T. 22 N., R. 2E.							
King County tax lots 9006, 9055, 9062							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
							+/- 10
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO - IF NO, PROVIDE OWNER(S) NAME:							

* If additional space is needed, please continue on the form: Attachment for Application to Enter a Water Right into the Trust Water Right Program.

6. Place of Use (continued)

B. Proposed:

IDENTIFY THE WATER BODY TO BE BENEFITED OR OTHER PLACE TO BE BENEFITED
Groundwater; Fisher Creek

7. Remarks and Other Relevant Information:

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.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.

8. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I hereby grant staff from the Department of Ecology access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

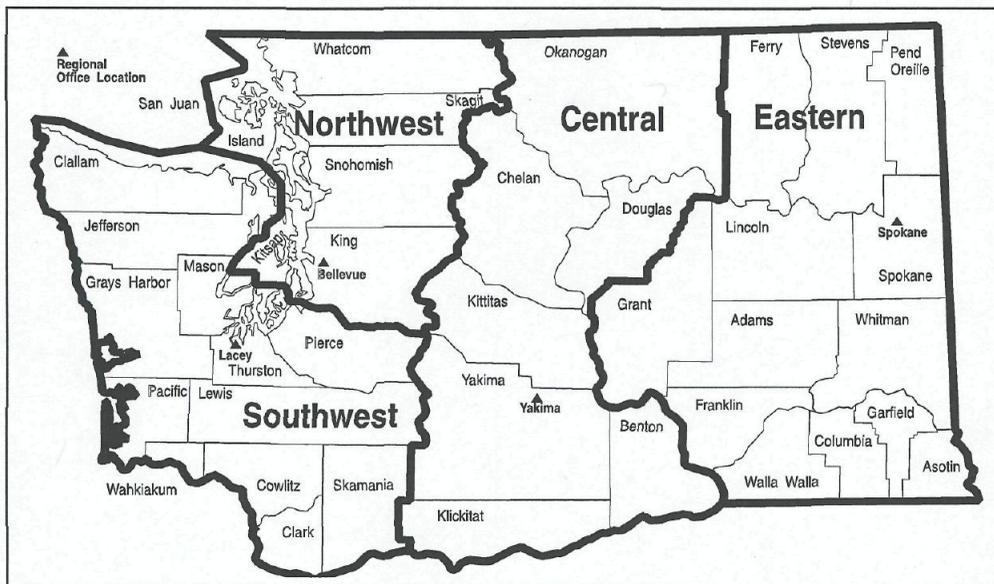
 _____ (Applicant)	4 / 30 / 2013 _____ (Date)
_____ (Water Right Holder)	/ / _____ (Date)
_____ (Land Owner(s) of Existing Place of Use)	/ / _____ (Date)

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):	
<input type="checkbox"/> ADDITIONAL SIGNATURES REQUIRED	<input type="checkbox"/> SECTION _____ IS INCOMPLETE
<input type="checkbox"/> OTHER/EXPLANATION: _____	
STAFF: _____	DATE: ____ / ____ / ____

IMPORTANT!

Submit your application to Ecology at the regional office for the area of proposed or existing water use. 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.



Department of Ecology
Central Regional Office
15 W. Yakima Avenue, Suite 200
Yakima, WA 98902
Telephone: (509) 575-2490

Department of Ecology
Eastern Regional Office
N. 4601 Monroe, Suite 202
Spokane, WA 99205-1295
Telephone: (509) 329-3400

Department of Ecology
Northwest Regional Office
3190 – 160th Avenue SE
Bellevue, WA 98008-5452
Telephone: (425) 649-7000

Department of Ecology
Southwest Regional Office
PO Box 47775
Olympia, WA 98504-7775
Telephone: (360) 407-6300

If you need assistance in the application process or those needing this application in an alternate format, please call the Water Resources Program at (360) 407-6600 or 800-833-6388 (TTY).