



WATER RESOURCES
Application for Change/Transfer of Water Right

For Ecology Use
(Date Stamp)

For filing with the Department of Ecology *or* with County Conservancy Boards

**A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION
 IF FILED WITH THE DEPARTMENT OF ECOLOGY**

(Check all that apply.)

- Change purpose(s) of use
- Add purpose(s) of use
- Change point(s) of diversion/withdrawal
- Add point(s) of diversion/withdrawal
- Change/transfer place of use
- Other (i.e. consolidation, intertie, trust water)

Explain: CHANGE WATER RIGHT TO GROUND WATER SOURCE.

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

FOR OFFICIAL USE ONLY	
DATE APPLICATION RECEIVED	<u>7-31-14</u>
CHECK NO. _____	FEE \$ _____
DATE ACCEPTED	<u>7-31-14</u> BY <u>SL</u>
CHANGE NO.	<u>CS2-SWC 7585</u>
COUNTY	<u>Clallam</u> WRIA <u>8</u>
SPECIAL AREA	_____
SEPA: <input type="checkbox"/> EXEMPT <input type="checkbox"/> NOT EXEMPT	
ECY CODING: 001-002-WR10285-000011	
APP NO. _____	PERMIT NO. _____
CERT NO. _____	CERT OF CHG NO. _____

I have participated in a pre-application conference with Ecology.

1. Applicant Information

APPLICANT/BUSINESS NAME		PHONE NO.	FAX NO.
MALLARD COVE MAINTENANCE & RECREATION COMMISSION		(360) 928-3032	N/A
ADDRESS			
120 MALLARD COVE ROAD			
CITY		STATE	ZIP CODE
PORT ANGELES		WASHINGTON	98363
EMAIL ADDRESS (IF AVAILABLE)			
rreid@greencrow.com			

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

LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE		PHONE NO.	FAX NO.
RANDY REID		(360) 928-3032	N/A
ADDRESS			
120 MALLARD COVE ROAD			
CITY		STATE	ZIP CODE
PORT ANGELES		WASHINGTON	98363
EMAIL ADDRESS (IF AVAILABLE)			
rreid@greencrow.com			

2. Water Right Information

WATER RIGHT OR CLAIM NUMBER 7585	RECORDED NAME(S) WALTER R. STORMAN
DO YOU OWN THE RIGHT TO BE CHANGED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS: <u>IN 1971 WALTER R. STORMAN TRANSFERED THE WATER RIGHT PERMIT TO MALLARD COVE MAINTENANCE & RECREATION COMMISSION; 120 MALLARD COVE ROAD, PORT ANGELES, WASHINGTON 98363</u>	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

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.

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
SPRING	01		SW	21	30N	8W	08-30-21-340000	N/A
SPRING	02		SW	21	30N	8W	08-30-21-340000	N/A

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
WELL	01		SW	21	30N	8W	08-30-21-520000	TBD

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: YES NO PROPOSED: YES NO – IF NO, PROVIDE OWNER(S) NAME: _____

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.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
DOMESTIC	0.23CFS	N/A	1959 TO PRESENT

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
DOMESTIC	0.23 CFS	20	PERMANENT SOURCE

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:
 E 1/2 OF GOV'T LOT 6, SEC. 21, T.30N., R.8W.,W.W.M. AND E 1/2 OF W 1/2 OF GOV'T LOT 6, SEC. 21, T.30N., R.8W.,W.W.M

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
	SW	21	30N	8W	CLALLAM	08-30-21-340000	2.7

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? YES NO
 IF NO, PROVIDE OWNER(S) NAME: SEE ATTACHED LIST

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:
 SAME AS ABOVE

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
	SW	21	30N	8W	CLALLAM	08-30-21-520000	4.25

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? YES NO
 IF NO, PROVIDE OWNER(S) NAME: SEE ATTACHED LIST

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?
 YES NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): _____

6. Remarks and Other Relevant Information:

THE MALLARD COVE WATER SYSTEM IS CURRENTLY UNDER A STANDING BOIL WATER ADVISORY. FOR HEALTH REASONS THE DOH (ADDRESSED IN THE ATTACHED LETTER DATED APRIL 11, 2014) PROPOSED TWO OPTIONS TO IMPROVE THE HEALTH OF THE SYSTEM, AND IT'S PATRONS. 1) INSTALL A FILTRATION AND DISINFECTION FACILITY(IES) OR 2) DEVELOP A GROUNDWATER SOURCE

IF FOR SEASONAL OR TEMPORARY, START DATE ___/___/___ END DATE ___/___/___

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. For further information, contact: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477. Phone (360) 570-3265.

7. Signatures:

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 hereby grant staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in preparing this above application, I understand that all responsibility for the accuracy of the information rests with me.

MALLARD COVE MAINTENANCE
 + RECREATION COMMISSION Randy Reid 7/28/14
Applicant Printed Name - Title Applicant Signature (Date)
 MALLARD COVE MAINTENANCE
 + RECREATION COMMISSION Randy Reid 7/28/14
Water Right Holder Printed Name Water Right Holder Signature (Date)
 MALLARD COVE MAINTENANCE
 + RECREATION COMMISSION Randy Reid 7/28/14
Land Owner of Existing Place of Use Printed Name Land Owner of Existing Place of Use Signature (Date)
 MALLARD COVE MAINTENANCE
 + RECREATION COMMISSION Randy Reid 7/28/14
Land Owner of Proposed Place of Use Printed Name Land Owner of Proposed Place of Use Signature (Date)

Please check the region in which the project is located:

<p>*Submit your application to:</p> <p>DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611</p>	<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 Street Spokane, WA 99205-1295 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 - 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input checked="" type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

APPLICATION FEE NOT ENCLOSED MAP NOT INCLUDED or INCOMPLETE
 ADDITIONAL SIGNATURES REQUIRED SECTION _____ IS INCOMPLETE
 OTHER/EXPLANATION: _____

STAFF: _____ **DATE:** ___/___/___

**ATTACHMENT FOR
Application for Change/Transfer of Water Right**

Point(s) of Diversion/Withdrawal - Existing Proposed:

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
SURFACE SPRING	01		SW	21	30N	08W	08-30-21-340000	N/A
SURFACE SPRING	02		SW	21	30N	08W	08-30-21-340000	N/A

DO YOU OWN THE ABOVE POINT(S) OF DIVERSION/WITHDRAWAL? YES NO

IF NO, PROVIDE OWNER(S) NAME: _____

Purpose(s) of Use - Existing Proposed:

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
DOMESTIC	0.23	N/A	ACTIVE

Place of Use - Existing Proposed:

LEGAL DESCRIPTION OF LANDS							
SEE ATTACHED LAND OWNER'S LIST							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
	SW	20	30N	08W	CLALLAM	VARIES	7.4

DO YOU OWN ALL THE LANDS IN ABOVE PLACE OF USE? YES NO

IF NO, PROVIDE OWNER(S) NAME: **SEE ATTACHED LAND OWNER'S LIST**

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Signatures:

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MAILLARD COVE MAINTENANCE

+ RECREATION COMMISSION

[Handwritten Signature]

7/28/14

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- Water Right Holder Printed Name
- Land Owner of Existing Place of Use Printed Name
- Land Owner of Proposed Place of Use Printed Name

Applicant Signature
Water Right Holder Signature
Land Owner of Existing Place of Use Signature
Land Owner of Proposed Place of Use Signature

(Date)

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Water Right Holder Signature
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/ /
(Date)