



Application for a Water Right Permit

For Ecology Use
(Date Stamp)

RECEIVED

AUG 13 2015

WA State Department
of Ecology (SWRO)

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION FOR THE FOLLOWING:

- GROUND WATER SURFACE WATER PERMANENT
 SHORT TERM TEMPORARY

NO FEE REQUIRED FOR THE FOLLOWING:

- DROUGHT COST REIMBURSEMENT

Follow the attached instructions. Attach additional sheets as necessary.

Section 1. APPLICANT

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

Applicant/Business Name: State of Washington Department of Fish & Wildlife (WDFW)	Phone No: 360-902-8393	Other No:
Address: 600 Capitol Way North; Attn: Katherine Ryf, Real Estate Services		
City: Olympia	State: Washington	Zip: 98501
Email Address (if available): Katherine.Ryf@dfw.wa.gov		

Contact Name (if different from above): Shawn M. Stanley	Phone No: 360-902-8304	Other No:
Relationship to Applicant: WDFW Eagle Island Project Manager		
Address: 1111 Washington Street SE		
City: Olympia	State: Washington	Zip: 98501
Email Address (if available): Shawn.Stanley@dfw.wa.gov		

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 (if available):		

For Ecology Use	APPLICATION NO: <u>52-30670</u>	SEPA: Exempt/Not Exempt
	Fee Paid: <u>—</u> Check No: _____	ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By <u>SC</u>	Priority Date <u>8-13-15</u> By <u>SC</u> WRIA: <u>27/Clark</u>
Pre-application interviewer:		

Section 2. STATEMENT OF INTENT

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

Briefly describe the purpose of your proposed project: To provide 1,400 linear feet of prime off channel chum salmon spawning for the main stem of the Lewis River as part of the Lower Columbia Fish Recovery effort.

Anticipated length of time to complete your project: 1 year from start of construction

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)		
Fish Propagation	9		6,515	Continuously
			*non-consumptive	
TOTAL:	9		*6,515	

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)

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

Carroll, Sheri (ECY)

From: Ryf, Katherine A (DFW)
Sent: Tuesday, August 18, 2015 1:01 PM
To: Hall, Tammy (ECY); Carroll, Sheri (ECY)
Subject: Eagle Island - Cost Reimbursement Application
Attachments: WDFW_Eagle Island_ECY Application for Water Right Permit_8-12-2015.pdf

Please modify the proposed point of diversion for the cost reimbursement application submitted last week to be from within the NENE vs the NWNE of Sec. 9.

Thank you,

Katherine Ryf
Water Right Specialist
WDFW Real Estate Services
360-902-8393

C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	¼	¼	Section	Township	Range	County
252022000	NW	NE	09	05 N	01 EWM	Clark
Lot(s)	Block(s)		Subdivision			

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

600 Feet (North/ South) and 1,200 feet (East/ West)
 from the (NW SW NE SE ____) corner of Section 09.

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.

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.

A portion of the NW1/4NE1/4 and the W1/2NE1/4NE1/4 of Section 9, T. 05 N., R. 01 E.W.M. lying south of the North Lewis River.						
¼	¼	Section	Twp.	Range	County	Parcel No.
-	NE	9	05	01	Clark	252022000

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): 1,400 linear feet of excavated trench in relic channel. Excavation from existing ground surface varies from 4-12 feet in depth and varies from 10-14 feet in bottom width. 160 linear feet of well screen pipe will be buried adjacent to the river to function as an infiltration gallery to collect an estimated 9 cfs. All water will be conveyed down the excavated trench/channel and will free flow back into the Lewis River.

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: _____ Type of connections: _____ <i>(e.g., home, recreational cabin)</i>	Present population to be served water: _____ 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? <input type="checkbox"/> YES <input type="checkbox"/> 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? <input type="checkbox"/> YES <input type="checkbox"/> 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 I-5 - Exit 21 (WA 503 E/Woodland/Cougar); turn east on
503/Lewis River Road; turn east on E CC Street; continue on NW Hayes Road 3.3 miles; turn north on NW 15th Avenue; proceed to
the end of the driveway; you have arrived at your destination.

Site Address: The property does not have an assigned address. It is located behind, by way of easement, 42816 NW 15th Avenue,
Wooldland, Washington 98674

WDFW Details - Region 5

Property/Unit & Name: Eagle Island

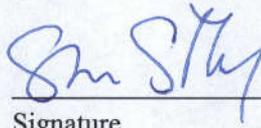
Wildlife Area: Mt. Saint Helens-Shillapoo

DEEDS AC#: 130312; Key #: 5189

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.

Shawn M. Stanley, WDFW



12 Aug 2015

Print Name
(Applicant or authorized representative)

Signature

Date

Same as above

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

Signature

Date

Same as above

Print Name
(Legal Owner or Part Owner 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 1250 W. Alder Street Union Gap, WA 98903-0009 (509) 575-2490	<input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1265 (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

If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.

