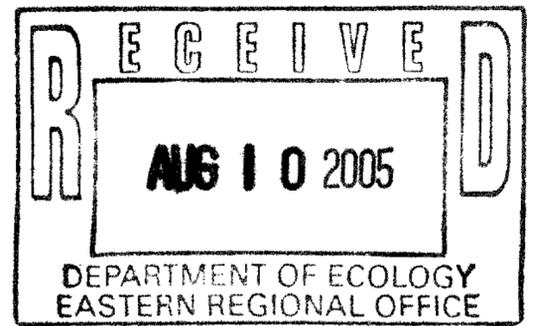




STATE OF WASHINGTON
APPLICATION FOR CHANGE/TRANSFER
DROUGHT PERMIT



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

(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: _____

FOR OFFICE USE ONLY	
CHANGE No. <u>1-3-174</u>	WRIA <u>59</u>
DATE ACCEPTED <u>8, 10, 05</u>	BY <u>HS.</u>
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>ROBERT HARRISON</u>	PHONE NO. <u>(509) 936-0006</u>	FAX NO. <u>()</u>
ADDRESS <u>BOX 564</u>		
CITY <u>Chewelah</u>	STATE <u>Wa</u>	ZIP CODE <u>99109</u>
CONTACT NAME (IF DIFFERENT FROM ABOVE)	PHONE NO. <u>()</u>	FAX NO. <u>()</u>
ADDRESS		
CITY	STATE	ZIP CODE

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER <u>CC 1-3-174</u>	<u>71</u>	RECORDED NAME(S)
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:		
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.

FOR OFFICE USE ONLY			
APP. NO. _____	PERMIT NO. _____	CERT. NO. _____	CERT. OF CHANGE NO. <u>1-3-174</u>

Chewelah CR. Adjudicated Cert # 71 w/cc 1-3-174

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Chowelah Creek		NW	NE	2	32	40		
		SW¼						

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Chulle River		NE SW -		31	33	40		

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?
 EXISTING: YES NO PROPOSED: YES NO - IF NO, PROVIDE OWNER(S) NAME: *Owen Polken*

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
IRRIGATION of 9 Acres	0.15 CFS	28.9	APRIL 15 - SEPT 15

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
IRRIGATION 9 Acres	0.15 CFS	10.4	^{Aug 12} APRIL 15 - SEPT 15 <u>R/R</u>

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:
NW¼ SW¼ Part of SW¼ NW¼ SOUTH OF COUNTY RD SEC 2 - TWS 32 - 40E

See Attached -

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

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

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:
LOTS 3 & 4 EXCEPT 660 SQ FT NW ¼ CORNER LOT 3 - THE WEST 100 FT SE¼ SW¼ SEC 31 - T 33 - R 40

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? YES NO - IF NO, PROVIDE OWNER(S) NAME: *Owen Polken*

