



State of Washington
Application for a Water Right

For Ecology Use

Fee Paid \$ 10.⁰⁰

Date 6/19/98

CK# 2146

Please follow the attached instructions to avoid unnecessary delays

Maintain original priority date 2/1/99

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name (John/Anne Heinrichs) Home Tel: (509) 448-2478
 Mailing Address 5009 S. MORRILL LANE Work Tel: () -
 City (SPOKANE) State WA Zip +4 99223 + FAX: () -

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

Same as above

Name _____ Home Tel: () -
 Mailing Address _____ Work Tel: () -
 City _____ State _____ Zip +4 _____ + FAX: () -
 Relationship to applicant _____

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 92 (30.5 gpm) (gallons per minute or cubic feet per second) from a surface water source or ground water source (check only one) for the purpose(s) of domestic multiple stock water. ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient. 120 ACRES SOUTH OF EXISTING ROAD IN THE EAST 1/2 OF SECTION 28-27-42
 Estimate a maximum annual quantity to be used in acre-feet per year: _____

(Continuous multiple domestic supply and stock water)
 Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:
 From ___/___/___ to ___/___/___

Section 4. WATER SOURCE

If SURFACE WATER	If GROUNDWATER
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:	A permit is desired for <u>(1)</u> well(s).
Number of diversions: _____	Size & depth of well(s): <u>6" 305'</u>
Source flows into (name of body of water): _____	

LOCATION

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: APPROX 1580' S X 2670' W OF NE 1/4 SECTION 28
(Error) per surveyed plat map
Approx. 2750' N & 3,700' E from the SW qtr. corner of Sec. 28

1/4 of	1/4 of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
<u>S 1/2 NE 1/4 and N 1/2 SE 1/4</u>		<u>28</u>	<u>27</u>	<u>42</u>	<u>Spokane</u>			
<u>S 1/2 NE 1/4 and for N 1/2 SE 1/4</u>		<u>↑</u>						

For Ecology Use Date Received: June 19, 1998 Priority Date: 6-19-1998
 SEPA: Exempt Not Exempt FERC License # _____ Dept. Of Health # _____
 Date Accepted As Complete 7-13-2000 By RT Date Returned _____ By _____ WRIA: 55

Applicants returned app. on 7/11/99 to formally process.

Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: LOOKOUT MOUNTAIN LANE WATER CO
- B. Briefly describe your proposed water system. (See instructions.)
4" PVC DISTRIBUTION TO SIX PARCELS -
6' deep shaded
- C. Do you already have any water rights or claims associated with this property or system? YES NO
 PROVIDE DOCUMENTATION.

Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION

(Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: 6 Type of connection HOUSES
 (Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? YES NO
 If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? YES NO
 If yes, when was it approved? _____ Please attach the current approved version of your plan. N/A
- D. Do you have an approved conservation plan? YES NO
 If yes, when was it approved? _____ Please attach the current approved version of your plan.

Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION

(Complete for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: N/A
- B. List total number of acres for other specified agricultural uses:
 Use _____ Acres _____
 Use _____ Acres _____
 Use _____ Acres _____
- C. Total number of acres to be covered by this application: _____
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)
 Add up 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;
 ‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 2000 acres? YES NO
 2. Do you have a controlling interest in a Family Farm Development Permit? YES NO
 If yes, enter permit no: _____
- E. Farm uses:
 Stockwater - Total # of animals 20 Animal type MISC (If dairy cattle, see below)
 Dairy - # Milking _____ # Non-milking _____

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

YES NO

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 apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

395 NORTH - LEFT ON HATCH - LEFT ON DARTFORD
RIGHT ON AUSTIN AT AUSTIN/HAZARD Y, TAKE HAZARD
LEFT ON LOOKOUT MOUNTAIN LANE SEE ATTACHED

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used? YES NO

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

B. Does the applicant own the land on which the water source is located? YES NO

If no, submit a copy of agreement:

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 grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Ann Richards

Applicant (or authorized representative)

6/19/98

Date

SAME

Landowner for place of use (if same as applicant, write "same")

Date

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation: <i>of WRIA 55- Little Spokane River Watershed Management specs.</i>	
Please provide the additional information requested above and return your application by _____ (date).	

If you wish to resubmit this application for formal processing, please return this entire packet by January 25, 1999.

Ecology staff

Sandra M. Kiefer

Date *12/24/98*

App Rec'd back 1/11/99 for resubmit - JK

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).