



State of Washington

Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

5329966

For Ecology Use

Fee Paid \$10.00

Date 6-12-96

pd. ck #57

JUN 11 2 1996

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

Name (MARIE-FRANCE CANTIN) Home Tel: (509) 732 - 4191
Mailing Address P.O. BOX 522 Work Tel: (-) - -
City (NORTHPORT) State WA Zip+4 99157 + 0522 FAX: (-) - -

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

Same as above

Name Mailing Address City State Zip+4 FAX: Relationship to applicant

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 10 (.02 cfs) gallons per minute or cubic feet per second from a surface water source or ground water source for the purpose(s) of domestic supply and irrigation. Attach a "legal" description of the place of use. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient.

CONTINUOUS SINGLE DOMESTIC SUPPLY, AND SEASONAL IRRIGATION OF 2 ACRES
Estimate a maximum annual quantity to be used in acre-feet per year: 15

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

Table with 2 columns: If SURFACE WATER and If GROUNDWATER. Includes fields for water source name, diversions, and well details.

LOCATION

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: 1520' W, 100' N SE corner of Sec 5 T39N, R40E

Table for location details: 1/4 of, Section, Township, Range(E/W), County, Lot, Block, Subdivision.

For Ecology Use Date Received: 6-12-96 Priority Date: 6-12-96
SEPA: Exempt/Not Exempt FERC License # Dept. Of Health #
Date Accepted As Complete 7/1/96 By SK Date Returned By WRIA: 61

Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: _____
- B. Briefly describe your proposed water system. (See instructions.)
one inch pipe from spring To proposed residence, garden, orchard
- 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: 1 Type of connection Home
 (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.
- 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: 2 (*garden & orchard*)
- B. List total number of acres for other specified agricultural uses:
 Use None Acres _____
 Use _____ Acres _____
 Use _____ Acres _____
- C. Total number of acres to be covered by this application: 2
- 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 0 Animal type _____ (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? *Spring developed early 1900's per "old timers"* 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.

North on state Hwy 25 To Northport, turn right at Aladdin Road (sign: deep lake Recreation area). Driveway on right 300' past intersection of Aladdin Road & Old Northport Hwy. 3637 Aladdin Road Colville, WA 99114

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.

David F. Conklin
Applicant (or authorized representative)

June 10th 1996
Date

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

Date

I have examined this application as required by NEPA and find that it is: not an "action". categorically exempt.
7/1/96 *S. Kiefer*
DATE SIGNATURE

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 98503-0210
_____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your application by _____ (date).	

Ecology staff _____ Date _____

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