

PROGRESS SHEET - APPLICATION FOR CHANGE/TRANSFER

SUBJECT TO REAL ESTATE EXISE TAX? YES NO

NAME: **Fancher Land Investements, LLC**
(Central Terminals, LLC)
P.O. Box 1245
Moses Lake, Washington 98837
509-765-5661

Copies scanned & e-mailed to Department of Revenue:
Date: _____
Initial: _____
Chg. Application ROE/ROD Assignment

CONTACT: **Mr. Ed Kemp, H2O 4U Consulting**
P.O. Box 386, Ephrata, WA 98823
509-754-5373 c: 509-750-1865

ASSIGNED (SEE BACK OF PAGE)

(YAHOO)

APP. NO. 1104	PERMIT NO. 1117	CERT. NO. 399-A(A)	CERT. OF CHANGE NO(S)
-------------------------	---------------------------	------------------------------	-----------------------

GRANT COUNTY WRIA **41** WRTS No. **CG3-*01104C@3**
QUINCY BASIN SUBAREA ID No. **4398568**

PURPOSE OF APPLICATION: **A portion of**
Change the point of withdrawal & change/trasfer the place of use
Chg. purpose of use

Date Application received: **February 7, 2007** Date fee received: **February 7, 2007** Amount: **\$50.00 CK#2423**

Statement of additional exam. fee: \$ _____ Sent: _____ Rec'd: _____

Returned for completion or correction: _____ Received: _____

Application mapped by: **R Dandell** date: **2-3-07**

PUBLICATION: Newspaper: **Columbia Basin Daily Herald or other as approved**

OK'd by: **K.A.Ryf** Date Notice Sent **5-4-2007**

Date Affidavit received: **6-1-2007** Time expires: **6-17-2007**

Checked by: **K. Ryf** Date: **6-4-2007**

Protests: _____ Fee rcvd _____

FIELD EXAMINATION REQUIRED: YES () NO ()

Examination by: _____ date: _____

ROE map checked by: _____ date: _____

REJECTED

BC due: _____ BC rcvd: _____ ext: _____

CC due: _____ CC rcvd: _____ ext: _____

PA due: _____ PA rcvd: _____ ext: _____

PA FIELD EXAMINATION REQUIRED - DATE: _____ BY: _____

Date OK'd for CHANGE/TRANSFER: _____ By: _____

Chg-ROE map checked by: _____ Date: _____

*Statement of Fee Sent: _____ Fee Received: _____

*Cert. Of Change ONLY

Date CHANGE ROE ISSUED: _____ No. _____

Change/Transfer Application to be processed by County Water Conservancy Board

ROD received:	45 day review period ends:	Review Period Extended to:	Ecy Decision Mailed:
---------------	----------------------------	----------------------------	----------------------

* **Contacts:**
Eric Weber, L.Hg.
Landau Associates
950 Pacific Ave., Suite 515, Tacoma, WA 98402
253-926-2493 cell 206-940-
www.landauinc.com

Date mailed to interested parties:

WDFW _____ State DOH _____

W²FO _____ EhrataFO _____

Pete Fraley
Ogden Murphy Wallace

cc: Mr. Lynn Maser, Department of Ecology, P.O. Box 69, Ephrata, Washington 98823- One Fifth Avenue, Ste. 210C Wenatchee, WA 98807

See Chg 399-A(A) -> CG3-*01104C@2 Fancher

2006 01/07 2006-11-17 -> 0000-0110/0005 00000000

ASSIGNMENT INFO:

SUBJECT TO REAL ESTATE EXISE TAX

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Mailed assignee copy of current App/ROE date: _____

Submitted to Department of Revenue	
Date:	_____
Initial:	_____

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Mailed assignee copy of current App/ROE date: _____

Submitted to Department of Revenue	
Date:	_____
Initial:	_____

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Mailed assignee copy of current App/ROE date: _____

Submitted to Department of Revenue	
Date:	_____
Initial:	_____

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Mailed assignee copy of current App/ROE date: _____

Submitted to Department of Revenue	
Date:	_____
Initial:	_____

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Mailed assignee copy of current App/ROE date: _____

Submitted to Department of Revenue	
Date:	_____
Initial:	_____

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Mailed assignee copy of current App/ROE date: _____

Submitted to Department of Revenue	
Date:	_____
Initial:	_____

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Mailed assignee copy of current App/ROE date: _____

Submitted to Department of Revenue	
Date:	_____
Initial:	_____