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DEPARTMENT OF ECOLOGY  
EASTERN REGIONAL OFFICE



STATE OF WASHINGTON  
**APPLICATION FOR CHANGE/TRANSFER  
OF WATER RIGHT**

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

**A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF  
ECOLOGY MUST ACCOMPANY THIS APPLICATION**

(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: \_\_\_\_\_

<b>FOR OFFICE USE ONLY</b>	
CHANGE No.	<u>CG3-28732P</u> WRIA <u>62</u>
DATE ACCEPTED	<u>10 / 02 / 2007</u> BY <u>K.Pyf</u>
FEE \$	<u>50.00</u> REC'D <u>10 / 01 / 2007</u>
CHECK No.	<u>10328</u>
ECY Coding:	001-002-WR10285-000011
SEPA:	<input checked="" type="checkbox"/> Exempt <input type="checkbox"/> Not exempt <u>Pendoreille County</u>

**\*\*IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)\*\***

**1. Applicant Information:**

APPLICANT/BUSINESS NAME <u>LENORA SEWER AND WATER DISTRICT</u>	PHONE NO. ( )	FAX NO. ( )
ADDRESS <u>1091 LENORA DRIVE</u>		
CITY <u>USK</u>	STATE <u>WA.</u>	ZIP CODE <u>99180</u>

CONTACT NAME (IF DIFFERENT FROM ABOVE)	PHONE NO. ( )	FAX NO. ( )
ADDRESS		
CITY	STATE	ZIP CODE

**2. Water Right Information:**

WATER RIGHT OR CLAIM NUMBER <u>G3 28732</u>	RECORDED NAME(S) <u>LENORA SEWER AND WATER DIST.</u>
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.**

<b>FOR OFFICE USE ONLY</b>			
APP. NO. <u>G3-28732</u>	PERMIT NO. <u>P</u>	CERT. NO. _____	CERT. OF CHANGE NO. _____
<u>G3-28732</u>			

**3. Point(s) of Diversion/Withdrawal:**

**A. Existing**

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
A WELL #2		NE	NE	9	32	44E		

**B. Proposed**

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
2 WELLS #3		NE	NE	9	32	44E		
#1		SE	SE	4	32	44E		

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

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
Community Domestic Supply	120	20	CONTINUOUS

**B. Proposed**

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Municipal Supply SEE ATTACHED 7	120	20	CONTINUOUS

**5. Place of Use:**

**A. Existing**

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:  
 SEE ATTACHED 4, 4A, AND 4B

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
			32	44	PENDORELLE		20+-

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:  
 SEE ATTACHMENTS 5, 5A, 5B, 5C, 5D, 5E, AND 6, 7

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
			32	44	PEND OREILLE		130+-

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

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?  
 YES  NO - IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S):

S3-281530, G3-28181C, S3-29476

**6. Remarks and Other Relevant Information:**

CORRECT LOCATION OF WELL #2, SHOULD BE 1330 FT. SOUTH AND 600 FT. WEST FROM THE NORTHEAST CORNER OF SECTION 9.  
 ADD TWO WELLS #1 AND #3  
 CHANGE PLACE OF USE TO AREA SERVICED BY LENORA WATER & SEWER DISTRICT  
 CHANGE FROM COMMUNITY DOMESTIC SUPPLY TO MUNICIPAL SUPPLY

IF FOR SEASONAL OR TEMPORARY, START DATE \_\_\_/\_\_\_/\_\_\_ END DATE \_\_\_/\_\_\_/\_\_\_

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.

**7. Signatures:**

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 am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

1) Dale Auro  
 2) Brad Johnson  
 #3 John Lita  
 (Applicant) 8 118 107  
(Date)

\*1) Dale Auro  
 2) Brad Johnson  
 3) John Lita  
 (Water Right Holder) 8 118 107  
(Date)

\_\_\_\_\_  
 (Land Owner(s) of Existing Place of Use) \_ / \_ / \_  
(Date)

**IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.**

**WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):**

APPLICATION FEE NOT ENCLOSED  MAP NOT INCLUDED or INCOMPLETE  
 ADDITIONAL SIGNATURES REQUIRED  SECTION \_\_\_\_\_ IS INCOMPLETE  
 OTHER/EXPLANATION: \_\_\_\_\_

STAFF: \_\_\_\_\_ DATE: \_\_\_/\_\_\_/\_\_\_

