



State of Washington
Application for a Water Right

RECEIVED

JUN 30 1998

For Ecology Use
Fee Paid 10.00
Date 6/30/98
OKM

Please follow the attached instructions to avoid unnecessary delays. DEPT OF ECOLOGY

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

Name HAROLD C. WORTHINGTON Home Tel: (425) 485 - 6350
Mailing Address 22516 170 AVE SE Work Tel: (425) 483 - 1212 #390
City MONROE State WA Zip+4 98272 + 9447 FAX: (425) 486 - 2400

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

Same as above

Name HAL WORTHINGTON Home Tel: (425) 485 - 6350
Mailing Address 17922 NE 196 ST Work Tel: (425) 483 - 1212 #390
City Woodinville State WA Zip+4 98072 + FAX: (425) 486 - 2400
Relationship to applicant SAME PERSON BUSINESS ADDRESS

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than SIRR 102 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 IRRIGATION. ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient.

Estimate a maximum annual quantity to be used in acre-foot per year: 20 AF PY Irrigation

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 _____ well(s).
Number of diversions: <u>1 UNNAMED SPRING</u>	
Source flows into (name of body of water): <u>SNOQUALMIE RIVER</u>	Size & depth of well(s):

LOCATION

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: 1125' N. 2000' E of SW CORNER of SEC 26

1/4 of	1/4 of	Section	Township	Range (E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
<u>SE</u>	<u>SW</u>	<u>26</u>	<u>27</u>	<u>6E</u>	<u>Snohomish</u>	<u>8</u>		<u>TRIANGLE HTS</u>

For Ecology Use Date Received: 6/30/98 Priority Date: 6/30/98
SEPA: Exempt/Not Exempt FERC License # _____ Dept. Of Health # _____
Date Accepted As Complete 7/6/98 By [Signature] Date Returned _____ By _____ WRIA: 7

Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: NO NAME
- B. Briefly describe your proposed water system. (See instructions.)
 FROM OISTERA GRAVITY FEED THROUGH SEEP TYPE
 PIPING TO LANDSCAPED AREAS OF TREE'S (EVERGREENS TO BE PLANTED)
 MAPLES CHERRY & PLUMS & APPLES & ORNAMENTALS.
 SIMPLE GATE VALVE TO OPEN & CLOSE DIVERSION. PRIMARY
 USE DURING DRY SUMMER MONTHS TO IRRIGATE WITHOUT
 CONSUMPTION OF ENERGY.
- 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: _____ Type of connection _____
 (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
(Completed for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: 2
- 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: 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 0 (If dairy cattle, see below)
 Dairy - # Milking 0 # Non-milking 0

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.

NORTH ON I405 TO EAST SR522 TO EAST 195TH ST EXIT FOLLOW EAST, NAME CHANGES TO WOODBURN RD. ROAD LEFT TURN NORTH AT WEST SNOQUALIMY VALLEY RD 3 1/4 MILES CROSSING INTO SNOHOMISH COUNTY. LEFT THROUGH RED GATE AT HIGH BRIDGE RD. THIS IS TRIANGLE HEIGHTS. TOP OF HILL RT TURN TO END OF CULDESAC STREAM CROSSES UNDER GRAVEL DRIVE IMMEDIATELY 10 TO 20 FEET FURTHER PAST CULDESAC. SOURCE IS ACCESSABLE APPROX 50 FT WEST OF GRAVEL DRIVE ON NORTH SIDE OF NEPA

~~WEST SNOQUALIMY RD~~ NAME CHANGES TO HIGH BRIDGE AT COUNTY LINE

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 M. [Signature]
Applicant (or authorized representative)

5/14/98
Date

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

5/14/98
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:	
Please provide the additional information requested above and return your application by _____ (date).	

Ecology staff _____ Date _____

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

