



State of Washington

Application for a Water Right

For Ecology Use
 Fee Paid 810.00
 Date 6.9.98

Please follow the attached instructions to avoid unnecessary delays.

'98 JUN -9 A7:52

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

Name Lovejoy Nursery Home Tel: () -
 Mailing Address Box 404 Work Tel: (360) 435 - 4656
 City Arlington State WA Zip+4 98223 + FAX: (360) 435 - 7005

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

Same as above

Name Bob Lovejoy 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 200 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 - continuously. 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: 30?

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: _____	
Source flows into (name of body of water):	Size & depth of well(s): <u>3' wide 20' deep</u>

LOCATION
 Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner:

1/4 of	1/4 of	Section	Township	Range (E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
<u>NE 1/4</u>	<u>SW 1/4</u>	<u>3</u>	<u>31</u>	<u>SE</u>	<u>Snohomish</u>			

For Ecology Use Date Received: 6.9.98 Priority Date: 6.9.98
 SEPA: Exempt/Not Exempt FERC License # _____ Dept. Of Health # _____
 Date Accepted As Complete 7.13.98 By AB Date Returned _____ By _____ WRIA: 5

Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: _____
- B. Briefly describe your proposed water system. (See instructions.)

- 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: 13
- 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: 13
- 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 _____ 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?

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.

From I 5 Take Exit 208. head East 2.3 miles to 59th. Turn left. go 1 mile to Nursery on right. Turn right at house & go to Barn well is 100' NE of Barn 10' East of Power Pole

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.

Robert L. Louy
Applicant (or authorized representative)

6-1-98
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:	
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).

1998 REAL ESTATE TAX

BOB DANTINI

SNOHOMISH COUNTY TREASURER - M/S #501
3000 ROCKEFELLER AVE., EVERETT WA 98201-4056

PARCEL NUMBER

5285-000-002-0003

FIRST 4 LINES OF LEGAL DESCRIPTION:

C. J. MURPHYS 10 ACRE TRACTS
BLK 000 D-00 - TRS 2 & 3 LESS ALL TH
PTN LY E OF STILLI RIV & LESS TH PTN
TR 3 DAF - BEG NW COR TR 3 TH S 415FT

MESSAGES:

LOVEJOY ROBERT & KATHY
LOVEJOY NURSERY
BOX 404
ARLINGTON, WA 98223-0404

CURRENT YEAR TAXES & FEES		CURRENT YEAR BILLING INFORMATION	
STATE TAX	421.73	VOTER APPROVED %	29
LOCAL SCHOOL 016	410.07	AMOUNT	\$409.00
COUNTY	175.19	LAND	38,600
CITY/ROAD/LIB	271.89	IMPROVEMENTS	79,100
PORT DIST		TOTAL VALUE	117,700
FIRE DIST	75.56	LEVY CODE	1151
HOSPITAL	55.91	LEVY RATE	11.98260
SEWER/WATER		GROSS TAX	1,410.35
OTHER		-EXEMPTION	
FOREST FIRE		+SPEC ASSESS	30.00
SPEC ASSESS		TOTAL TAX	1,440.35
SWM	30.00		
TOTAL TAX	1,440.35		

SUMMARY OF TOTAL AMOUNT DUE AS OF 04/98

YEAR	TAX	PENALTY/INTEREST/FEE	TOTAL
H98	720.18		720.18
TOTAL AMOUNT DUE			720.18

KEEP THIS PORTION

PARCEL NUMBER

5285-000-002-0003

BOB DANTINI

TREASURER
(425) 388-3366

1998

REAL ESTATE TAX

Make checks payable to: SNOHOMISH COUNTY TREASURER

Mail to: P.O. BOX 34171

SEATTLE, WA 98124-1171

SUMMARY OF TOTAL AMOUNT DUE AS OF 10/98			
YEAR	TAX	PENALTY/INTEREST/FEE	TOTAL
H98	720.17		720.17
TOTAL AMOUNT DUE			720.17

DETACH AND REMIT THIS COUPON WITH 2ND PAYMENT IN ENVELOPE PROVIDED - DUE OCTOBER 31ST

PLEASE MAKE NAME AND ADDRESS CHANGES ON BACK

CURRENT YEAR SECOND HALF*

720.17

*Assumes 1st half was paid timely.

MESSAGES:

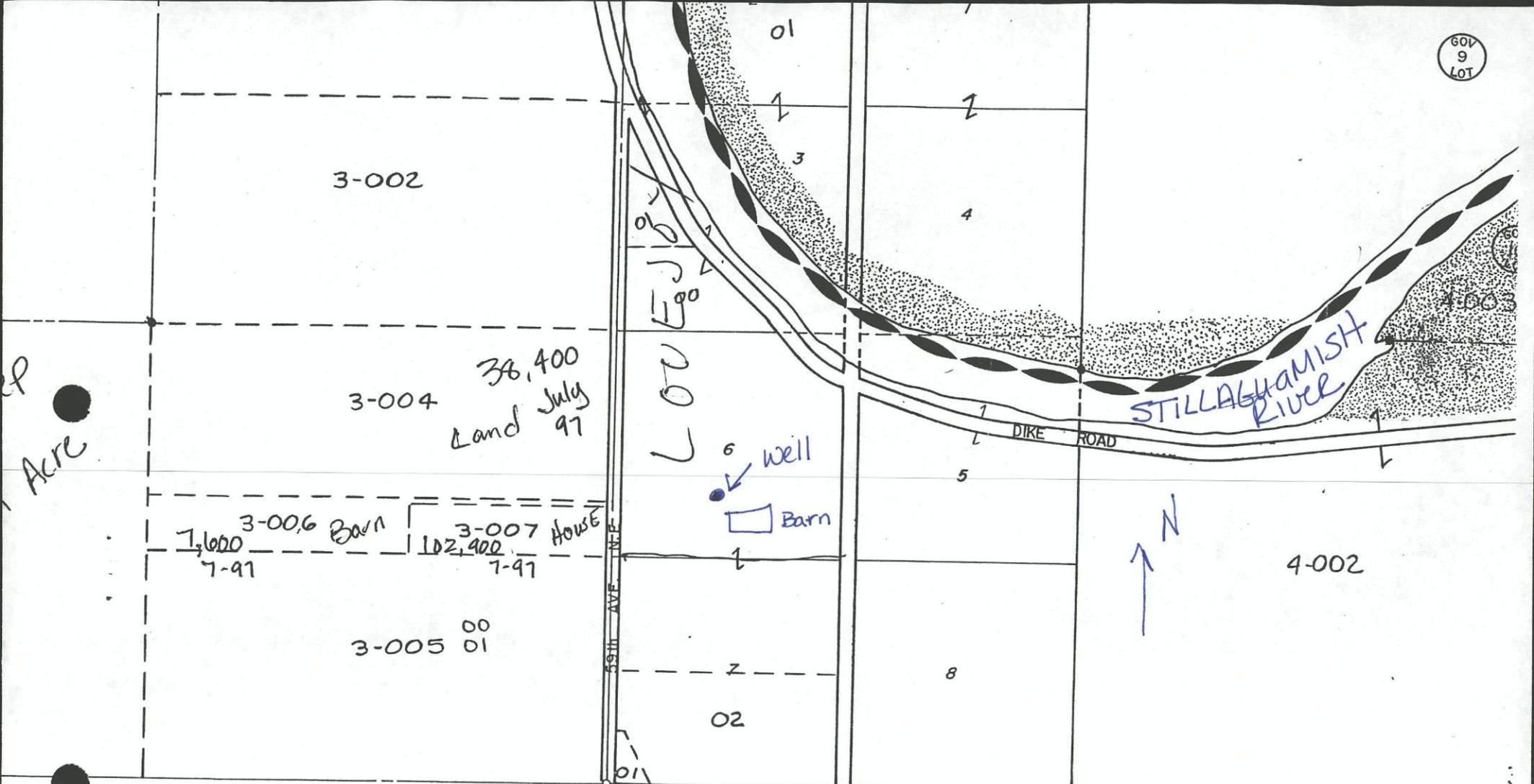
2

DO NOT WRITE BELOW THIS LINE

LOVEJOY ROBERT & KATHY
LOVEJOY NURSERY
BOX 404
ARLINGTON, WA 98223-0404

1277178
40049-90

52850000020003 00000072017 21998 3



1/2 Acre

LOU Egan



C.J. MURPHY'S TEN ACRE TRACTS (5285)

P.A.M., June, '76

I-5 ←

↓
HWY 530

→ Arlington

NOTE:
This is not a survey, it is a parcel map
used for location of property only