State of Washington
Application for a Water Right

RECEIVED
'00 MAY 23 A9:55
DEPARTMENT OF ECOLOGY
S W REGIONAL OFFICE

For Ecology Use
Fee Paid ✓
Date 5/23/00

Please follow the attached instructions to avoid unnecessary delays.

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

Name Jan M. Luse Home Tel: (203) 563 - 9368
Mailing Address 42 Raymond La. Work Tel: (203) 563 - 0595
City Wilton State Ct Zip+4 06897 + _____ FAX: (_____)_____ - _____

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION
☐ Same as above

Name Same 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 1000 CFS (☐ 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 Hydro power. **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: 385,000

☐ 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.: Hoh River Number of diversions: 1	A permit is desired for _____ well(s).
Source flows into (name of body of water):	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: 900' N and 900' west of south west corner of Sect. 28

1/4 of	1/4 of	Section	Township	Range (E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
		28	27	12W	Jefferson	7		

For Ecology Use Date Received: 5/23/00 Priority Date: 5/23/00
SEPA: Exempt/Not Exempt FERC License # _____ Dept. Of Health # _____
Date Accepted As Complete _____ By _____ Date Returned _____ By _____ WRIA: 20

ECY 040-1-14
Rev. 7/97 * * f

APPLICATION

Appl. No.: S2-29917

Section 5. GENERAL WATER SYSTEM INFORMATION

A. Name of system, if named: Hoh River

B. Briefly describe your proposed water system. (**See instructions.**)

When the flow is appropriate*, divert water from Hoh river through the bank 200 ft with a head of 50 ft and return water to Hoh river.

* when flow is greater than 1500 but less than 2000 cu ft/sec run 500 cu ft/sec
when flow is greater than 2000 cu ft/sec run 1000 cu ft/sec

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: _____

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: _____

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.

Take Rt. 101 12 miles south of Forks. Take the first left after crossing the Hoh River. Go up the hill to the left along the river. The proposed location is just short of the bottom of the hill with the river running in opposite directions on either side.

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.

[signature] 5/16/2000

Applicant (or authorized representative) Date

_____ _____

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).