WASHINGTON STATE DEPARTMENT OF ECOLOGY

State of Washington
Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

RECEIVED
'97 SEP 25 A10 :04
DEPT OF ECOLOGY
S.W REGIONAL OFFICE

For Ecology Use
Fee Paid _____
Date _____

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

Name Tulip Lane Water System Home Tel:(314)843-4532
Mailing Address 10230 Dovercrest Dr Work Tel:(____)____-____
City ST LOUIS State MO Zip+4 63128+1616 FAX:(314)843-4532

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☐ Same as above

Name Parke Thompson TTEE Home Tel:(314)843-4532
Mailing Address 10230 Dovercrest Dr Work Tel:(314)843-4532
City ST LOUIS State MO Zip+4 63128+1616 FAX:(314)843-4532
Relationship to applicant Trustee

Section 3. STATEMENT OF INTENT

Multiple Domestic, IRRigation

The applicant requests a permit to use not more than 100 (☒ 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 Domestic/Public Supply/Irrigation. **ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE.** (**See instructions.**) *NOTE: A tax parcel number or a plat number is not sufficient.* N 1/2 of Sec 35, Twp 31N, R4W, WM. Clallam County
Estimate a maximum annual quantity to be used in acre-feet per year: 200 acre-feet per year

☐ 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.: Number of diversions: _____	A permit is desired for one(1) well(s).
Source flows into (name of body of water):	Size & depth of well(s): 6"-530'

LOCATION

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: 980 feet south and 1580 feet west of the Northeast corner of Section 35 - The intersection of Sections 35, 36, 25 & 26.

¼ of	¼ of	Section	Township	Range(E/W)	County	If location of source is platted, complete below: Lot	Block	Subdivision
NW	NE	35	31N	4W	Clallam	4		Thompson Family Trust Short Plat

For Ecology Use Date Received: 9/25/97 Priority Date: 9/25/97
SEPA: Exempt/Not Exempt FERC License # _____ Dept. Of Health # _____
Date Accepted As Complete 10/6/97 By SC Date Returned _____ By _____ WRIA: 18

ECY 040-1-14
Rev. 9/95 F

APPLICATION

Appl. No.: G2-29525

Section 5. GENERAL WATER SYSTEM INFORMATION

A. Name of system, if named: Tulip Lane Water System

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

A community supply system with well/pressure tanks and distribution lines. System will be able to serve neighboring lots which have poor quality water from a shallow aquifer.

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: 100 Type of connection Homes
(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
(Complete for all irrigation and agriculture uses.)

A. Total number of acres to be irrigated: 320

B. List total number of acres for other specified agricultural uses:

Use Livestock Acres 80
Use Residential / Rural Acres 240
Use _____ Acres _____

C. Total number of acres to be covered by this application: 320

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: Unknown at this time
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. US highway 101 to Sequim WA, to North on Sequim-Dungeness Way, to West on Anderson Road, to South on Clark Road, To West on Tulip Lane for about 200 feet Site is about 300 feet North.

Section 10. REQUIRED MAP

A. Attach a map of the project. **(See instructions.)**
Thompson Family Trust Short Plat (Preliminary) included

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): Primary use to serve a 7 lot subdivision, owned by applicant, with the ability to serve neighboring lands in this rural area. Many wells in the area have high concentrations of iron and manganese. Use of this source for a community water system is anticipated.

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.

Parke Thompson TTEE — 22 Sept. 1997
Applicant (or authorized representative) — Date
Thompson Family Trust

Same — Date
Landowner for place of use (if same as applicant, write "same")

Legal:
W 1/2 NE 1/4 Sec 35 T 31N R4W WM

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_____

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).