

THUR 07-03
GRAND MOUND



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

For filing with Ecology or with County Conservancy Boards

A MINIMUM FEE OF \$50.00 PAYABLE TO 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: Period of use to be changed

FOR OFFICE USE ONLY	
CHANGE No. _____	WRIA _____
DATE ACCEPTED ____/____/____	BY _____
FEE \$ _____	REC'D ____/____/____
CHECK No. _____	
SEPA: <input type="checkbox"/> Exempt	<input type="checkbox"/> Not exempt

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

1. Applicant Information:

APPLICANT/BUSINESS NAME Scott Clark Thurston County	PHONE NO. (360) 357-2491	FAX NO.
ADDRESS Building 4, Room 100 929 Lakeridge Drive SW		
CITY Olympia	STATE Washington	ZIP CODE 98502

CONTACT NAME (IF DIFFERENT FROM ABOVE) Jill Van Hulle Pacific Groundwater Group	PHONE NO. (360) 413-1510	FAX NO. (360) 413-1520
ADDRESS 3130 60th Loop SE		
CITY Olympia	STATE Washington	ZIP CODE 98501

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER Cert. of Surface Water Right 8031	RECORDED NAME(S) John Van Nortwick
DO YOU OWN THE RIGHT TO BE CHANGED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS: Port of Centralia, 3508 Galvin Road, Centralia, WA 98531	
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.

FOR OFFICE USE ONLY			
APP. NO. _____	PERMIT NO. _____	CERT. NO. _____	CERT. OF CHANGE NO. _____

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Chehalis River	1	S ½	SE	35	15 N	3 W	023890001000	None
	2	N ½	NE	2	14 N	3 W	021951000000	

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Existing Well 1	1	SW	SE	11	15 N.	3 WWM		
Existing Well 2	2	SW	SE	11	15 N.	3 WWM		
Proposed Well 3	3	S ½		11	15 N.	3 WWM		
Proposed Well 4	4	S ½		11	15 N.	3 WWM		

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: YES NO PROPOSED: YES NO – IF NO, PROVIDE OWNER(S) NAME:

Existing POD is owned by the Port of Centralia, 3508 Galvin Road, Centralia, WA 98531

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
Irrigation of 70 acres	0.7 cfs	140	Seasonal irrigation

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Municipal water supply	315	140	Year-round, as needed

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
See legal description – place of use includes portions of Govt. lot 1, Sec. 2 T. 14 N, and Govt. lot 4 and 5, Section 35, T. 15 N, 3 W.							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
		2	14N	3 W.W.M	Lewis	023890001000	
		35	15N	3 W.W.M	Lewis	021951000000	
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO – IF NO, PROVIDE OWNER(S) NAME:							
Port of Centralia, 3508 Galvin Road, Centralia, WA 98531							

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
Area served by Thurston County's Grand Mound Water System as described in an approved Department of Health Water System Plan							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
					Thurston	N/A	N/A
DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO – IF NO, PROVIDE OWNER(S) NAME:							
Area located within municipal service area of Thurston County's Grand Mound Water System							

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.

Grand Mound System. In addition to this filing, *Applications for Change* will be filed to transfer surface water certificates 8031 and 10790 to the Grand Mound production wells.

6. Remarks and Other Relevant Information:

Original POW is located 250 feet north and 1280 feet east of the SW corner of Section 30, T 15 N., R. 3 WWM

The intent of this request is to transfer the authorized POW from the Mahoney Dairy to Wells 1 - 4 of our Grand Mound Water System -- located approx. 4 miles to the north the original site.

We wish to change the period of use from seasonal irrigation to accommodate year-round municipal use.

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, P O 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.



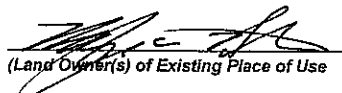
(Applicant)

21 May 07

(Date)

(Water Right Holder)

(Date)



(Land Owner(s) of Existing Place of Use)

21 May 07

(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: ____/____/____