



WASHINGTON STATE DEPARTMENT OF
Natural Resources
Peter Goldmark - Commissioner of Public Lands

Application for Use of State-owned Aquatic Lands

Applicant Name: Beacon Hill Water and Sewer District
County: Cowlitz County
Water Body: Cowlitz
Type of Authorization - Use: Easement – Water main
Authorization Number: 51-087338
Term: 12 years

Description: This agreement would allow the continued use of State-owned aquatic lands for the sole purpose of a water main. It is located on the Cowlitz River, in Cowlitz County, Washington.



Vicinity Map

Every attempt was made to use the most accurate and current geographic data available. However, due to multiple sources, scales, and the currency of the data used to develop this map Washington Department of Natural Resources cannot accept responsibility for errors and omissions in the data. Furthermore, this data is not survey grade information and cannot be substituted for an official survey. Therefore, there are no warranties that accompany this material

Legal Description

Latitude: 46.19181N, Longitude: 122.89729W
Section 11, Township 8 North, Range 2 West W.M.

Prepared By: CAZ Date: 11/30/2011



WASHINGTON STATE DEPARTMENT OF
Natural Resources
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RECEIVED
MAR 28 2011
DNR Pacific Cascade Region

APPLICATION FOR AUTHORIZATION TO USE STATE-OWNED AQUATIC LANDS

The Applicant may not begin work on the project area until the State Department of Natural Resources (DNR) grants a Use Authorization.

I. SUBMISSION OF APPLICATION

DNR will review your application and post it on the DNR Leasing and Land Transactions website as public information. **Instructions:**

- Fill out the application by computer or by hand in blue or black ink.
- Send the completed form to the appropriate district office in the table below.
- **Enclose a \$25.00 non-refundable application processing fee with the application.** This fee is not required for local, state, and other government agencies.
- DNR will notify applicants in writing if the application is accepted for further review, and may reject the application at any time prior to the signed execution of a use authorization.
- **Your project may require regulatory permits. Please do not apply for regulatory permits until you have discussed your proposal with your designated land manager.**

For additional information, contact the office that serves your county:

Aquatic Lands Offices	Counties Served
Rivers District 601 Bond Road PO Box 280 Castle Rock, WA 98611-0280 (360) 577-2025	All of Eastern Washington, Grays Harbor, and Pacific counties Thurston (fresh water only), Lewis, Wahkiakum, Cowlitz, Clark, and Skamania counties
Orca Straits District 919 N Township Street Sedro Woolley, WA 98284-9384 (360) 856-3500	Island, Skagit, Snohomish, San Juan, and Whatcom counties
Orca Straits District 5310 Eaglemount Rd Chimacum, WA 98325-9720 (360) 732-0934	Jefferson and Clallam counties
Shoreline District 950 Farman Avenue N Enumclaw, WA 98022-9282 (360) 825-1631	King, Pierce, Kitsap, Thurston (marine waters), and Mason counties

FOR OFFICIAL USE ONLY Support staff: Application Fee Received N/A - Gov. Date: 3.28.11

Land Manager: New Application Renewal Application Land Manager Initials KB/CZ

Land Manager: Type: (20, 21, 22, 23, 31, 51) NaturE Use Code 2208

Land Records: New Application Number _____; Trust _____; County _____; AQR Plate No. _____

II. APPLICANT INFORMATION - person or entity responsible for the project

Date of Application: 03/22/2011

Name of the person or entity that the Use Authorization should be issued to: Beacon Hill Water and Sewer District

Kim Adamson, General Manager

Applicant's Address: 1121 West Side Highway	City: Kelso	State: WA	Zip Code: 98626-1720
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Telephone: 360-636-3860	Fax: 360-575-9375	E-mail: <u>kadamson@bhwsd.org</u>
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Department of Revenue Tax Registration Number (Unified Business Identifier) **Required:**
083004219

Which of the following applies to Applicant? Check one and attach the written authority - bylaws, power of attorney, etc.

Corporation <input type="checkbox"/> State of Registration:	Limited Partnership <input type="checkbox"/> State of Registration:	General Partnership <input type="checkbox"/> State of Registration:
Sole Proprietorship <input type="checkbox"/>	Marital Community <input type="checkbox"/> Spouse:	Government Agency <input checked="" type="checkbox"/>

Other (Please Explain)

Has DNR previously authorized this site or is it currently under an agreement with DNR?
Yes Agreement Number: 51-038772 No Don't Know

III. AGENT INFORMATION - Person authorized to represent the applicant about the project, if applicable

Agent's Name and Organization: Kim Adamson

Agent's Relationship to Applicant: General Manager

Address: <u>Same</u>	City: <u>Same</u>	State: <u>Same</u>	Zip Code: <u>Same</u>
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Telephone: <u>Same</u>	Fax: <u>Same</u>	E-Mail: <u>Same</u>
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Department of Revenue Tax Registration Number (Unified Business Identifier) is **Required:**

N/A

Which of the following applies to Agent? N/A

Check one and attach written authority to sign - bylaws, power of attorney, etc.

Corporation <input type="checkbox"/> State of Registration:	Limited Partnership <input type="checkbox"/> State of Registration:	General Partnership <input type="checkbox"/> State of Registration:
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Sole Proprietorship <input type="checkbox"/>		Marital Community <input type="checkbox"/>		Government Agency <input type="checkbox"/>	
Spouse:					
Other <input type="checkbox"/> (Please Explain)					
IV. LOCATION					
On what body of water is the state property? Cowlitz River 46.19181 122.89729		County Cowlitz		Government Lot:	
		Section: 11		Township: 8 North	
		Range: 2 West		East <input type="checkbox"/> or West <input checked="" type="checkbox"/>	
Note: DNR requires a legal property survey before they approve a use authorization. You do not need to furnish a survey now. The DNR survey requirements are included on this form.					
Physical description of Project Area (For example, marsh, tideflat adjacent to the Chehalis River, etc.): Unplatted tidelands of the first class and bed of the Cowlitz River.					
Name of owner(s) of uplands, shorelands, and/or tidelands shoreward and adjacent to the Property: State of Washington Cowlitz County, West side BNSF RR - East side					
Address:		City:	State:	Zip Code:	
Phone Number:		Fax Number		E-mail:	
Note: DNR may require proof of ownership, or authorization to use the adjacent tideland, shoreland, or upland property, except for established Harbor Areas.					
Attach a copy of the deed if you own the adjacent upland property. County parcel numbers for adjacent upland, and/or tideland properties: West side: 62217 - Cowlitz County east side: 62759 - BNSF RR					
IV. USE OF PROPERTY					
Describe the proposed use of the Property in detail: Existing location of 12" ductile iron potable water main.					
Do you plan to sublease the Property? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, submit a copy of the sublease.					
Do you know the current and past uses of the site? Please describe them here. Same as above. Line has been in existence since 1976 and owned by Cowlitz PUD. The water system					

was transferred to Beacon Hill Water and Sewer District in December of 2010. No change in use is expected. Should the line fail in its current location, it will be rerouted. It is currently unlocateable as it sits under debris from the Mount St. Helens eruption in 1980.

Do you know of any toxic or hazardous substances on the site or past situations that could have caused contamination? Yes No If yes, please explain:

V. IMPROVEMENTS - additions within, on, or attached to the land, or anything considered a fixture (RCW 79.105.060(6)). Examples include: pilings, dolphins, piers, wharves, buildings, pipelines and cables, and structures for bridges

What improvements currently exist on the site? DNR may require photos.
None

If there are improvements currently on the site, describe their condition.
N.A.

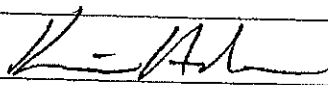
Will you remove or remodel any of the existing improvements? Yes No

Do you plan to construct any improvements? If yes, please describe:
No

Is there any fill material on the site? Yes No If yes, please describe:

Describe any habitat mitigation any permitting agency requires of you and where on this project it will occur: None

All answers and statements are true and correct to the best of my knowledge.

Applicant name (please print): Kim Adamson		Title: General Manager	
Applicant Signature: 		Date: 3/25/2011	
Authorized Agent name (please print):		Title:	
Authorized Agent signature:		Date:	

For the Applicant's convenience, the following pages 5 through 8 contain some information on potential permit and survey requirements.