

Please print, sign and mail this form to the following address:

DEPARTMENT OF ECOLOGY

ATTN: Water Quality Program – Irrigation Permit
Washington State Department of Ecology
PO Box 47696
Olympia, WA 98504-7696

DEC 12 2023

WATER QUALITY PROGRAM

Application Id: 44423

Certification Received:
(Ecology use)

Facility/Site Name: Kittitas Reclamation District

Permit Number: WAG991004
(Ecology use)

Facility Address: 315 N WATER ST
Ellensburg, WA 98926

Facility County: Kittitas

Permittee Name: Roger Satnik

Permittee Title:

Permittee Email: roger@krdistrict.org

Permittee Phone: 5099256158

Permittee Address: 315 N Water St
Ellensburg, WA 98926-3053

Company Name: Kittitas Reclamation District

Certification Statement

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Permittee Signature

Roger Satnik, Kittitas Reclamation Dist. GIS Analyst

Printed Name / Company

Title



12/5/23

Signature of Permittee *

Date

* Federal regulations require this application is signed by one of the following:

- A. For a corporation: By a responsible corporate officer, of at least the level of vice president.
- B. For a partnership or sole proprietorship: By a general partner or the proprietor, respectively.
- C. For a municipality, state, federal, or other public facility: By either a principal executive officer or ranking elected official.