|  | **Water Resources Program**  **Complete Construction Notice** | | For Ecology Use  (Date Stamp) |
| --- | --- | --- | --- |
| **WATER RIGHT FILE NO.** | |  | |

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| **PART 1 – CONSTRUCTION NOTICE** | |
| Check one | |
|  | **Construction is complete.** A water system capable of delivering the quantities specified on the change authorization is complete **and** an approved measuring device has been installed. If an alternative measuring method is proposed, it must be approved by Ecology prior to filing this notice.  Date construction was completed: |
|  | **Construction of the water system is NOT complete.** You must request an extension if you intend to pursue this project. For information about requesting an extension, [Click here for a copy of the publication: FAQ *Extensions for Water Right Permits and Change Authorizations* at: <https://fortress.wa.gov/ecy/publications/documents/0611004.pdf>](https://fortress.wa.gov/ecy/publications/documents/0611004.pdf) |
|  | **I am no longer interested in pursuing this project. Please cancel this permit.** |

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| **PART 2 – CONSTRUCTION DETAILS** |
| Describe in detail construction completed to date. Include the status of development of diversion/withdrawal facilities, pump installation, conveyance system, and measuring device installation. If applicable, describe progress made on securing permits needed to complete construction. Attach copies of well reports, project maps(s) showing exact source locations, diagrams or other construction-related documents not previously submitted. |
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| **PART 3 – SIGNATURES** |
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| Name of Water Right Holder or Authorized Representative | | | | |
|  | | | | |
| Authorized Representative Name | | | | |
|  | | | | |
| Mailing Address | | | | |
|  | | | | |
| City | | | State | Zip |
|  | | |  |  |
| Home Phone | Cell Phone | Office Phone | Email Address | |
|  |  |  |  | |

| *I certify that I am the holder of the above water right or the approved representative. The information contained in this form is true and accurate to the best of my knowledge.* | | |
| --- | --- | --- |
|  |  |  |
| Signature | | Date |
| Water Right Holder  Authorized Representative | | |

| **PART 4 – SEND YOUR COMPLETED FORM TO ECOLOGY** |
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| Submit this form to:  **Northwest Regional Office**  PO Box 330316  Shoreline, WA 98133-9716  (206) 594-0000  **Central Regional Office**  1250 W Alder Street  Union Gap, WA 98903  (509) 575-2490  **Eastern Regional Office**  4601 North Monroe Street  Spokane, WA 99205-1295  (509) 329-3400  **Southwest Regional Office**  PO Box 47775  Olympia, WA 98504-7775  (360) 407-6300 |