



BENTON COUNTY RURAL WATER SUPPLY
MITIGATION CERTIFICATE APPLICATION CHECKLIST FOR BUILDING PERMITS

For all Mitigation Certificate Applications submitted as part of the Benton County building permit process, all components below must be met. Please follow the checklist below to ensure that you meet all application timelines and requirements. Incomplete applications will be returned to the applicant. **All fees are non-refundable.**

FOR THE INITIAL MITIGATION CERTIFICATE APPLICATION SUBMITTAL:

- | | |
|--------------------------|--|
| <input type="checkbox"/> | Complete all parts of the Mitigation Certificate application, including the Statement of Understanding and the notary page. |
| <input type="checkbox"/> | Attach a full legal description of the parcel. Legal descriptions can be found on the property's title report. Alternatively, the legal description may be obtained through the Benton County Assessor's office. |
| <input type="checkbox"/> | Attach a completed Irrigation Affidavit. |
| <input type="checkbox"/> | Attach a copy of the well log. |
| <input type="checkbox"/> | Submit the completed application and all attachments to the Benton County Planning Division (no fees are due at the time of submittal). |

UPON ISSUANCE OF THE MITIGATION CERTIFICATE:

- | | |
|--------------------------|--|
| <input type="checkbox"/> | Applicant shall pay the applicable Mitigation Certificate Package fee to the Benton County Planning Division. Payments may be made in cash, check, or credit card; however, a 2.5% surcharge will be incurred if paying by credit card.
PACKAGE A: \$663.00; or PACKAGE B: \$1,410.00; or PACKAGE C: \$2,157.00. |
| <input type="checkbox"/> | Sign the Mitigation Certificate issued by the Planning Division. |
| <input type="checkbox"/> | Applicant shall then legally record the Mitigation Certificate with the Benton County Auditor's Office on the title of record associated with the subject property. The applicant is responsible for all applicable recording fees. |
| <input type="checkbox"/> | After the Mitigation Certificate has been recorded with the Benton County Auditor's office, applicant shall provide to the Benton County Planning Division the Auditor's file number for the recorded document. |

AFTER THE DOCUMENT HAS BEEN RECORDED, THE APPLICANT MAY:

- | | |
|--------------------------|--|
| <input type="checkbox"/> | Complete an Adequate Water Supply Determination form and submit it to the Benton County Building Division. |
| <input type="checkbox"/> | Once a building permit has been issued by the Benton County Building Division, the applicant shall purchase a Recordall® Disc Series Water Meter and Orion LTE Cellular Transmitter from the Benton County Planning Division and pay the first year's Annual Program Fee. |
| <input type="checkbox"/> | A licensed plumber or pump installer shall then install the meter and transmitter according to the manufacturer's specifications. Once the meter has been installed, the plumber/pump installer shall then complete a Certificate of Compliance report and submit it to the Planning Division. |
| <input type="checkbox"/> | After the meter installation process is completed and approved by the Benton County Planning Division, a Certificate of Occupancy may be issued by the Benton County Building Division. |



BENTON COUNTY RURAL WATER SUPPLY PROGRAM WATER MITIGATION CERTIFICATE APPLICATION

Certificate No. RWSP

Incomplete applications, including applications without all required attachments, will not be accepted.

A COMPLETE APPLICATION SHALL INCLUDE THE FOLLOWING:

- Signed Statement of Understanding
- Executed Notary Page
- Full Legal Description of Parcel
- Completed Irrigation Water Availability Affidavit
- Well Log

APPLICANT INFORMATION

Property Owner(s): _____

Mailing Address: _____ City: _____

State: _____ ZIP: _____ Phone: _____

Email Address: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

**If there are additional owners please copy this section, sign, and attach to the application*

WELL INFORMATION

1. **Subject property address:** _____

2. **Parcel number:** ____ - ____ - ____ - ____ - ____ 3. **Well Tag ID:** _____

4. **Please describe the proposed project:** _____

5. **Please choose one of the following:** Existing Well No well has been drilled

6. **Is the well part of a public water system?** No Yes

If yes, name of public water system: _____

7. **Is the well part of a shared well?** No Yes

If yes, parcel # where well is located: _____

NOTARIZED STATEMENT

I/We, (the undersigned applicant), under penalty of perjury in the State of Washington agree to comply with all sections of this document, federal, state, and local provisions, codes, and ordinances in regard to water use. These covenants and agreements shall be binding on all parties having or acquiring any right, title, or interest in this land described herein or any part hereof and it shall pass to and be for the benefit of each owner thereof. I certify that the information provided is true and accurate and I understand that if the project description should change that it is my responsibility to inform Benton County and that the department may require different and/or additional requirements. As the applicant, I assume all risk in its entirety and agree to indemnify defend and hold Benton County, its departments, elected and appointed officials, employees, and agents, harmless from and against any and all claims, damages, losses and expenses, including reasonable attorney's fees, for any bodily injury, sickness, disease, or death, or any damage to or reduction in value of property including the loss of use resulting there from which are alleged or proven to be caused in whole or in part by a negligent act or omission of its officers, directors, and employees. As the applicant, I understand that I am legally and financially responsible for ensuring there is a legal right to the water to be used, and that all water supply systems are engineered, designed, and constructed in accordance with federal, state, and local requirements. I understand that all applicable fees may be non-refundable, and that Benton County may have additional requirements to ensure that sufficient and adequate water supply is available for use and I shall comply with all requests made by Benton County.

Signed: _____ Property Owner(s)

Print Name: _____ Property Owner(s)

State of Washington

County of _____

INDIVIDUAL ACKNOWLEDGEMENT:

I certify that I know or have satisfactory evidence that on this ____ day of _____, 20____, _____ is/are the person(s) who appeared before me; and said person(s) acknowledged that (he/she/they) signed this instrument and acknowledged it to be (his/her/their) free and voluntary act for the uses and purposes mentioned in the instrument.

NOTARY PUBLIC, State of Washington

Printed Name

My commission expires: _____

REPRESENTATIVE ACKNOWLEDGEMENT:

I certify that I know or have satisfactory evidence that on this ____ day of _____, 20____, _____ is the person(s) who appeared before me, and said person acknowledged that (he/she) signed this instrument, on oath stated that (he/she/) was authorized to execute the instrument and acknowledged it as the _____ of _____ to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

NOTARY PUBLIC, State of Washington

Printed Name

My commission expires: _____



BENTON COUNTY RURAL WATER SUPPLY PROGRAM

AFFIDAVIT OF IRRIGATION WATER AVAILABILITY

STATE OF WASHINGTON)
COUNTY of _____)

I/We, _____, the undersigned, do hereby affirm and attest to the following:

1) I am the owner of the certain real property located in Benton County, Washington, with a physical address and/or parcel number of:

Parcel Number: _____

Address: _____

2) I declare that: *(please check one of the boxes below)*

The above described property is located within the boundaries of the _____ Irrigation District and is subject to an assessment by that irrigation district. *(Package A is required)*

The above described property is not located within the boundaries of an irrigation district and there is no irrigation water right for the above described property. *(Packages B or C may be selected)*

The above described property is located within the boundaries of the _____ Irrigation District but is not subject to an assessment by that irrigation district. *(Packages B or C may be selected)*

3) I further declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

EXECUTED this _____ day of _____, 20____ at _____, Washington.

Affiant Signature

Affiant Signature

SIGNED and SWORN to (or affirmed) before me this _____ day of _____, 20____

By _____
(Affiant Name)

(Affiant Name)

NOTARY PUBLIC, State of Washington

Printed Name

My commission expires: _____



BENTON COUNTY RURAL WATER SUPPLY PROGRAM
AFFIDAVIT OF IRRIGATION WATER AVAILABILITY (ENTITY/CORPORATION)

STATE OF WASHINGTON)

COUNTY of _____)

I, _____, the undersigned, do hereby affirm and attest to the following:

1) I am the owner of the certain real property located in Benton County, Washington, with a physical address and/or parcel number of:

Parcel Number: _____

Address: _____

2) I declare that: (please check one of the boxes below)

The above described property is located within the boundaries of the _____ Irrigation District and is subject to an assessment by that irrigation district. (Package A is required)

The above described property is not located within the boundaries of an irrigation district and there is no irrigation water right for the above described property. (Packages B or C may be selected)

The above described property is located within the boundaries of the _____ Irrigation District but is not subject to an assessment by that irrigation district. (Packages B or C may be selected)

3) I further declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

EXECUTED this ____ day of _____, 20____ at _____, Washington.

Affiant Signature

I certify that I know or have satisfactory evidence that on this ____ day of _____, 20____, _____ is the person who appeared before me, and said person acknowledged that (he/she) signed this instrument, on oath stated that (he/she) was authorized to execute the instrument and acknowledged it as the _____ of _____ to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

NOTARY PUBLIC, State of Washington

Printed Name

My commission expires: _____