RCD Form 104 Revised 11/01/2016

Received E	By:
Received:	
	month/day/year/time

APPLICATION FOR CHANGE IN RESERVED WATER USE AUTHORIZATION

Use this form to apply for autho storage, means of diversion, poi your existing system and the pro	nt of discharge, and /or meth	hod of application of	your existing water use	e authorization. Maps of
******	******	******	******	******
1. Applicant Name:				
Address:		City:		State:
Zip Code:	Phone Number:			
2. Type of Change(s) requested: Method of Application;	Transfer of Authorizatio		rsion; Place of Use;	Place of Storage;
(A) Authorization to	be changed:			
3. Anticipated completion date	(where applicable):			
4. Name of Person(s) Transferri	ng Ownership of Authorizatio	on:		
Authorization Number:		Address:		
City:	State: _		_ Zip Code:	
Signature of Transferring Pa	rty:		Dat	re:
Signature of Receiving Party	r:		Dat	e:
**********	Please attach a copy of th	ne Authorization in	dicated above****	******
5. How much do you own of the flow rate and volume.	above use of authorization?	? All A Portion	on. If a portion is indicate	d, identify what portion by
		up to		
Gallon/Minute or Cu	bic Feet/Second		Acre-F	eet
6. How much of your water use portion by flow rate and volume.	authorization do you propos	se to use? All	_ A Portion. If a portion	is indicated, identify what

up to			
Gallon/Minute or Cubic Feet/Second	Acre-Feet		
TYPE OF CHANGE PROPOSED: Complete ONLY the type of change you are proposing. Mul authorization may be requested on the same form.	Itiple changes of the same wate	r us	
A. Change in POINT OF DIVERSION			
1 .Location of proposed point of diversion: ¼ ¼ , Section	, Township N/S,		
Range E/W, County. Government Lo	ot, or Lot,		
Block, Subdivision Name		·	
Is the new point of diversion in addition to the old point of diversion replacing the old point of diversion.			
3. Source of water if changed			
B. Change in PLACE OF USE			
 Describe the location where you propose to use the water right. For irriga each description. Use additional sheet if necessary. 	ation show the number of acres	for	
County: Subdivision Name:			
Acres, Lot Block,1/41/4 Section,	TN/S, RE/W		
Acres, Lot Block,1/41/4 Section,	TN/S, RE/W		
Acres, Lot Block,1/41/4 Section,	TN/S, RE/W		
Total Acres			
If some acres will be taken out of irrigation, identify those acres by locatio by this water right.	on which will no longer be irriga	ted	
Acres, Lot Block,1/41/4 Section,	, TN/S, RE/W		
Acres, Lot Block,1/41/41/4 Section,	, TN/S, RE/W		
Total Acres			
C. Change in PLACE OF STORAGE			
1. Location of proposed place of storage:1/41/4 Section:	, TN/S, RE/W,		
County:			
Period of storage:toto Month/Day Mo	 onth/Day		
Capacity of proposed storage facility:	·		

D. Change in	MET	THOD OF APPLICATION		
	1.	Present method of application:		
	2.	Proposed method of application:		·
	3.	Crop, if changed:		
	4.	Flow rate:	and/or Volume	, if changed.
E. Change in	n ME	ANS OF DIVERSION		
	1.	Present means of diversion:		<u>.</u> .
	2.	Proposed means of diversion:		<u>.</u>
F. Change in	POIN	NT OF DISCHARGE		
	1	. Proposed point of discharge1/4	1/41/4 Sect:, TN/S, RE/W.	
******	***	*********	*********	******
COMMENTS:				
				·
*****	***	********	**********	******
Signature of App	olicar	nt:	Date:	
District Chairma	n Sig	nature:	Date:	
Board Member	Witn	ess Signature:	Date:	
******	***	*********	**********	******
Natural Resourc	es Co	onservation Services Signature:	Date:	
Natural Resourc	es Co	onservation Services Witness Signature:_	Date:	