FOR DEPARTMENT USE ONLY

Filed in the office of the Department of Natural Resources

at \_\_\_\_:\_\_ on \_\_\_\_

Map Number: \_\_\_\_

Surface Water Permit: \_\_\_\_\_

Water Divisions: \_\_\_\_\_\_ to \_\_\_\_\_

## STATE OF NEBRASKA DEPARTMENT OF NATURAL RESOURCES

## INTERBASIN TRANSFER OF WATER ADDENDUM TO APPLICATION FOR A PERMIT TO APPROPRIATE WATER

Pursuant to *Nebraska Revised Statutes* § 46-288, interbasin transfer shall mean the diversion of water in one river basin and the transportation of such water to another river basin for storage or utilization for a beneficial use.

## **Instructions:**

This form is an addendum to be filed along with an application for a permit to appropriate water that proposes water being transferred from one river basin to another river basin.

## Complete items 1 through 10:

Items 1 through 9 by printing in ink or typing the appropriate information. (If additional space is needed please attach separate sheet and reference in form.) Item 10 attached to this addendum.

The answers to the following questions A-G must be provided on  $8\frac{1}{2}$  x 11 inch paper (or folded to such size). An answer is required for each item A-G. Each answer must be separately identified in the attachment(s).

- **A.** The economic, environmental and other benefits of the proposed interbasin transfer and use.
- **B.** Any adverse impact of the proposed interbasin transfer and use.
- C. Any current beneficial uses being made of the unappropriated water in the river basin of origin.
- **D.** Any reasonably foreseeable future benefits of leaving the water in the river basin of origin.
- E. The economic, environmental and other benefits of leaving the water in the basin of origin for current or future beneficial uses.
- **F.** Alternative sources of water supply available to the applicant.
- **G.** Alternative sources of water available to the basin of origin for future beneficial uses.

| 1. Owner(s) of land for location of diversion and for locations of beneficial use under ap | plication:        |          |  |  |  |  |  |  |
|--------------------------------------------------------------------------------------------|-------------------|----------|--|--|--|--|--|--|
| Name:                                                                                      |                   |          |  |  |  |  |  |  |
| Address 1:                                                                                 |                   |          |  |  |  |  |  |  |
| Address 2:                                                                                 |                   |          |  |  |  |  |  |  |
| City & State:                                                                              |                   |          |  |  |  |  |  |  |
| Zip Code:                                                                                  | Phone Number: (   | )        |  |  |  |  |  |  |
| E-Mail Address:                                                                            | _ Cell Phone: (   | )        |  |  |  |  |  |  |
| 2. Person to contact concerning the application:                                           |                   |          |  |  |  |  |  |  |
| Name:                                                                                      |                   | ·        |  |  |  |  |  |  |
| Address 1:                                                                                 |                   |          |  |  |  |  |  |  |
| Address 2:                                                                                 |                   |          |  |  |  |  |  |  |
| City & State:                                                                              |                   | <u>-</u> |  |  |  |  |  |  |
| Zip Code:                                                                                  | _ Phone Number: ( | )        |  |  |  |  |  |  |
| E-Mail Address:                                                                            | Cell Phone: (     | )        |  |  |  |  |  |  |
| 3. River basin FROM which the transfer is proposed: (refer to map on back)                 |                   |          |  |  |  |  |  |  |
| 4. River basin TO which the transfer is proposed: (refer to map on back)                   |                   |          |  |  |  |  |  |  |
| 5. State the proposed beneficial use of the water to be transferred:                       |                   |          |  |  |  |  |  |  |
| 6. Describe the location and method of diversion:                                          |                   |          |  |  |  |  |  |  |
|                                                                                            |                   |          |  |  |  |  |  |  |

| 7. Describe t                 | he location of benefi                                                              | cial use:          |                          |                                                                                                                |                    |                                                                                                                                                        |                 |
|-------------------------------|------------------------------------------------------------------------------------|--------------------|--------------------------|----------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| a. Rate of                    | ne quantity of water of diversion from sour                                        | ce in cubic feet p | er second (cfs)          |                                                                                                                |                    |                                                                                                                                                        | cfsgpm          |
| 9. Identify the               | ne duration/timing of                                                              | f the transfer:    |                          |                                                                                                                |                    |                                                                                                                                                        |                 |
|                               | current aerial photog<br>of use (if applicable)                                    |                    |                          |                                                                                                                | ersion, water tr   | ansport facilities,                                                                                                                                    |                 |
|                               | am familiar with the formation is true.  Signature of Lan                          |                    | ined in this add         |                                                                                                                | ttachments, and to | that to the best of m                                                                                                                                  | y knowledge and |
|                               | <u> </u>                                                                           |                    |                          |                                                                                                                |                    |                                                                                                                                                        |                 |
| Scotte Scotte Barrier Klimbal | C River and Hat Greek Basin  Shario an  Shario an  Box Butte  North Blatte River B | Porture Hauss      | Thomas Blaire Logan Lapk | Rock Hot  Rock Hot  Rock Hot  Valley  Garfield Water  Sherman  Sherman  Findps  Findps  Findps  Findps  Findps | Missari Tribi      | Cardar Dunn 0 10 Darota Wane Aver-Basin Stanton Cunna Burt Stanton Cunna Burt Scanders Scunders Several Lancester Case Solline Nemaha Riv Johnson Gaoc | Namaha          |

If you have any questions regarding this form, please contact the Surface Water Permitting Section at the Department of Natural Resources (402) 471-2363