

STATE OF NEBRASKA DEPARTMENT OF NATURAL RESOURCES

APPLICATION FOR A NON-EXPEDITED CHANGE OF APPROPRIATION

Complete items 1 through 16 by printing in ink or typing the appropriate information and by placing an X in the appropriate boxes.

FOR DEPARTMENT USE ONLY

1. Appropriator of Record Information

Name: _____
Address: _____
Address 2: _____
City & State: _____ Zip Code: _____
Phone Number: () _____ - _____ Cell Phone: () _____ - _____
E-Mail Address: _____

Filed in the office of the Dept. of Natural Resources
at _____:_____ on _____ 20____
Modification NEX- _____
SW Permit: _____
RightID: _____
Map Number: _____
Water Division: _____
Receipt Number: _____ Amount: \$ _____

2. Landowner Information (If different from Appropriator of Record)

Name: _____
Address 1: _____
Address 2: _____
City & State: _____
Zip Code: _____ Phone Number: () _____ - _____
E-Mail Address: _____ Cell Phone: () _____ - _____

3. Mortgage Holder or Deed of Trust Holder for land now under permit. (If more than one, use NeDNR Form 962-4)

Name: _____
Address 1: _____
Address 2: _____
City & State: _____
Zip Code: _____ Phone Number: () _____ - _____
E-Mail Address: _____ Cell Phone: () _____ - _____

4. If transfer is to another person or entity, provide contact information.

Name: _____
Address 1: _____
Address 2: _____
City & State: _____
Zip Code: _____ Phone Number: () _____ - _____
E-Mail Address: _____ Cell Phone: () _____ - _____

5. Use NeDNR form 962-7 to list any other person or entity that should receive legal notices or Orders concerning this permit, if this application is approved.

6. List the surface water permit that this application proposes to modify: _____

7. List the current purpose of use: _____

8. This application requests a change in: (check all that apply)

- Location of use. (If yes, complete and attach NeDNR form 962-10)
- Point of diversion or source of water. (If yes, complete items 13 and 14)
- Type of appropriation or purpose of use. (If yes, complete and attach NeDNR form 962-11&12)

9. This application requests a: (select only one)

- Permanent change
- Temporary change
 - a. If no lessee involved, state proposed duration: _____ years
 - b. If lessee involved, attach a copy of the lease agreement. Duration of lease: _____ years

10. Describe the historical water use of this appropriation for each of the last five years. If the historical use is different for different fields or tracts, please use NeDNR form 962-14 and attach to this application.

Year	Months when Diversion Occurred	Acres Irrigated (If Applicable)	Maximum Diversion Rate (cfs)	Annual Volume (af)

If no water use occurred within the last five years describe, on separate paper, the last use made of this appropriation listing each of elements described in the above table and describe any excusable reason for non-use that may apply as described in Nebraska Revised Statute §46-229.04 and attach to the application.

11. Are all facilities used at *current* location owned or operated by the applicant?

Yes No (If no, provide documentation that the owner or operator of the facilities agrees to the change.)

12. Are all facilities to be used by the *proposed change* owned or operated by the applicant?

Yes No (If no, provide documentation that the owner or operator of the facilities agrees to the change.)

13. Identify the *present* point of diversion or stream reach. (select only one)

Pump Headgate of: _____ Stream Reach (provide begin and end locations on separate page)

Stream: _____

Legal Description: ____ ¼ ____ ¼ Section: ____ Township: ____ Range: ____ E W _____ County

14. Identify the *proposed* point of diversion or stream reach. (select only one)

Pump Headgate of: _____ Stream Reach (provide begin and end locations on separate page)

Stream: _____

Legal Description: ____ ¼ ____ ¼ Section: ____ Township: ____ Range: ____ E W _____ County

15. Provide the following as attachments:

- a. Information concerning any expected economic, environmental or social impacts.
- b. Anticipated adverse impacts on other water right holders or groundwater users.
- c. Any proposed mitigation plan for such described impacts.
- d. Current aerial photograph marked to show **proposed** location of use and point of diversion.

16. I certify that I am familiar with the information contained in this application as well as any addendums and attachments that, to the best of my knowledge and belief, provide information that is true, complete and accurate.

 Signature of Appropriator of Record

 Print Name

 Date

 Signature of Landowner (If required)

 Print Name

 Date

A non-refundable filing fee of \$10 payable to the Department of Natural Resources must accompany this form. Submit this form with any addendums and/or attachments and filing fee to:
 State of Nebraska
 Department of Natural Resources
 301 Centennial Mall South / P.O. Box 94676
 Lincoln, Nebraska 68509-4676
 (402) 471-2363