## STATE OF NEBRASKA DEPARTMENT OF NATURAL RESOURCES

## FULL RELINQUISHMENT OF A SURFACE WATER APPROPRIATION

1. Appropriator and/or Landowner of Record  Name:				FOR DEPARTMENT USE ONLY					
				Filed in the office of the Dept. of Natural Resources					
				at					
					Zip Code:		Phone Number: (	)	RightID:
							Cell Phone: (	)	
E-Mail Add	dress:								
2. Surface	Water Appropriation	n Details		-					
Appropriation (permit number) to be relinquished: Pri Source of Water: Use:			Priority Date:						
Source of W	Vater:		Use:						
Is this relind If yes, pleas	•	based on other circumstance	es? Yes No	O (Approval of new permit or transfer, end of a contract, etc.)					
I/We certify above, I/We	e do hereby relinquish	appropriator(s) and/or owne	ert and use surface	ppurtenant to the surface water appropriation listed ce water associated with the appropriation listed					
Date	Signature		Print Name	Title					
Date	Signature		Print Name	Title					
Date	Signature		Print Name	Title					
Date	Signature		Print Name	Title					