STATE OF NEBRASKA DEPARTMENT OF NATURAL RESOURCES

NOTICE OF CHANGE OF OWNERSHIP/WATER RESOURCES UPDATE NOTICE

1.	Name, address and telephone number of person to be shown as owner in Department records. Name(s) must be exactly as described on deed or other document transferring ownership of property.	FOR DEPARTMENT USE ONLY
	ivalie(s) must be exactly as described on deed of other document transferring ownership of property.	Ourset ID
		Owner ID
		Surface Water Appropriation(s) Changed:
		ourlace water Appropriation(s) orlanged.
	Zip Code: Telephone No.: ()	
	E-mail Address:	
	Alternate Contact Requests: If this box is checked, complete items 6-15 on the second page	
2.	Provide legal description of property. The description may be provided by attaching a copy of the deed or other documentation.	
		Ground Water Well Registration(s)
		Changed:
	I have attached a copy of the deed or document transferring ownership	
	Land is under contract purchase agreement; copy of agreement is enclosed.	
3.	Name, address and telephone number of past owner or seller, if applicable. Name(s) must be exactly as described on deed or other document transferring ownership of property.	
	This section must be filled out and signed if this form is being used to notify the Department regarding	
	a transfer of property within 60 days of the transfer in accordance with §76-2,124.	
	Zip Code: Telephone No.: ()	
	E-mail Address:	
	Date Signature of Past Owner	
4.	List surface water appropriation numbers, ground water well numbers and dam plan numbers if known. The Department	nt's records of ownership of surface water appropriations,
	ground water wells, and dams may be changed based on the legal description provided in item 2.	
	a. List surface water appropriation numbers:	
	b. List ground water well registration numbers:	
	List ground water wen registration numbers.	
	c. List plan numbers for dams:	
5.	The above information is true and accurate to the best of my knowledge.	
		· ·
	Date Signature of Current Owner (Or Representative With Proper Documentation)	

ALTERNATE CONTACT REQUEST (Optional)

Complete information below only if Alternate Contact Request box is checked in item 1

6.	1			
	Surface Water Appropriation Nos.:			
	Ground Water Well Registration Nos.:			
	Dam Nos.:			
7.	Name, Address and Telephone Number of Alternate Contact:	8.	Alternate Contact is Tenant, Farm Manager, Attorney, etc. Please explain.	
	Zip Code: Telephone No. () E-mail Address:			
9.	E-mail Address: Name, Address and Telephone Number of Alternate Contact:	10.	Alternate Contact is Tenant, Farm Manager, Attorney, etc. Please explain.	
	The Code That we No ()			
	Zip Code: Telephone No. () E-Mail Address:			
11.	Name, Address and Telephone Number of Alternate Contact:	12.	Alternate Contact is Tenant, Farm Manager, Attorney, etc. Please explain.	
	Zip Code: Telephone No. ()			
	E-Mail Address:			
13.	Name, Address and Telephone Number of Alternate Contact: Zip Code: Telephone No. () E-mail Address:	14.	Alternate Contact is Tenant, Farm Manager, Attorney, etc. Please explain.	
	E-man Address:			
15.	I/We, give the Department of Natural Resources permission to provide copies of above-mentioned party(ies) for matters concerning this appropriation, regis			
	Reminder: Please sign and date on page 1.			

Submit to:
Nebraska Department of Natural Resources
245 Fallbrook Blvd., Suite 201
Lincoln, Nebraska 68521-6729
Phone: (402) 471-2363