STATE OF NEBRASKA DEPARTMENT OF NATURAL RESOURCES

FULL RELINQUISHMENT OF A SURFACE WATER APPROPRIATION

1. Appropriator and/or Landowner of Record Name: Address 1: Address 2: City & State:				FOR DEPARTMENT USE ONLY Filed in the office of the Dept. of Natural Resources at						
						Zip Code: Phone N		Phone Number: ()	Rigl	htID:
								Cell Phone: ()		er Division:
						E-Mail Add	lress:			
							Water Appropriation on (permit number) to b		Priority Date	o:
Source of Water:			Use:							
Is this relind If yes, pleas	•	ased on other circumstances?	Yes No (Approval of r	new permit or transfer, end of a contract, etc.)						
I/We certify above, I/We	e do hereby relinquish a	ppropriator(s) and/or owner(s) of	d use surface water asso	the surface water appropriation listed sciated with the appropriation listed						
Date	Signature	Print Na	me	Title						
Date	Signature	Print Na	me	Title						
Date	Signature	Print Na	me	Title						
Date	Signature	Print Na	me	Title						

Submit this form to:

Nebraska Department of Natural Resources 245 Fallbrook Blvd., Suite 201 Lincoln, Nebraska 68521-6729

Phone: (402) 471-2363