

STATE OF NEBRASKA DEPARTMENT OF NATURAL RESOURCES

APPLICATION FOR A PERMIT TO CONDUCT SURFACE WATER IN STREAM CHANNELS

INSTRUCTIONS: Complete Items 1 through 10

FOR DEPARTMENT USE ONLY

1. Applicant 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____
 CSW- _____
 RefID: _____
 Map Number: _____
 Water Division: _____

2. Identify the original source of the surface water (river, creek, reservoir, etc.): _____

3. Identify the surface water permit(s) diverting from source listed in number 2: _____

4. Identify the diversion location for surface water permit(s) listed in number 3.
 Legal Description: _____ Section: _____ Township: _____ Range: _____ E W _____ County
 State: _____ Headgate of: _____

5. Identify the stream channel to be used for conducting surface water: _____

5a. Identify the location where surface water will enter the stream channel.
 Legal Description: _____ Section: _____ Township: _____ Range: _____ E W _____ County
 State: _____

5b. Proposed amount of surface water to be released into the stream channel at this location. _____ CFS GPM

6a. Identify the location where surface water will be removed from the stream channel.
 Legal Description: _____ Section: _____ Township: _____ Range: _____ E W _____ County
 State: _____

6b. Proposed amount of surface water to be removed from the stream channel at this location. _____ CFS GPM

7. Identify the intended use of the surface water that would be conducted: _____
NOTE: If the intended use is irrigation, the water must be used on lands permitted to receive surface water from the surface water permits listed in number 3.

8. Identify intended times of the year and frequency that surface water would be conducted: _____

9. If for irrigation, identify the lands that would receive conducted surface water.

Section	Township	Range	Direction	NW¼				NE¼				SW¼				SE¼				Total Acres
				NW¼	NE¼	SW¼	SE¼	NW¼	NE¼	SW¼	SE¼	NW¼	NE¼	SW¼	SE¼	NW¼	NE¼	SW¼	SE¼	
			<input type="checkbox"/> East <input type="checkbox"/> West																	
			<input type="checkbox"/> East <input type="checkbox"/> West																	
			<input type="checkbox"/> East <input type="checkbox"/> West																	
			<input type="checkbox"/> East <input type="checkbox"/> West																	
			<input type="checkbox"/> East <input type="checkbox"/> West																	
			<input type="checkbox"/> East <input type="checkbox"/> West																	
			<input type="checkbox"/> East <input type="checkbox"/> West																	

Total Acres:

10. Applicant Signature

I certify that I am familiar with the information contained in the application, and to the best of my knowledge and belief such information is true, complete and accurate.

Signature of Applicant

Print Name

Date

Notes:

- The Department of Natural Resources staff reserve the right to assess conveyance losses.
- A project map is required for this application.
- The applicant may request that the Department of Natural Resources assist in producing a project map.
- **This form must be completed in full. An incomplete or defective application will be returned with 90 days being allowed for resubmission. Failure to resubmit a corrected application within this time period shall cause dismissal of the application and consequent loss of priority.**

Submit this form to:

Nebraska Department of Natural Resources
245 Fallbrook Blvd., Suite 201
Lincoln, Nebraska 68521-67629

Phone: (402) 471-2363