FORM 3041

AFFIDAVIT OF IDENTITY

TO CLARIFY IDENTITY AT OFFICE OF NEVADA DIVISION OF WATER RESOURCES

Form Revised 10/2020

This Box for Office Use Only

Nevada Division of W	ater Resources 901 S. Stewart Street, S	Suite 2002, Carson City, Nevada 89701
This will certify that		, is one and the same
person as		, who is also known as
	and	·
Pursuant to NRS 53.045, I hereby certify, under penalty of perjury of the laws of the State of Nevada, that the foregoing is true and correct. (Sign this form below in <u>BLUE</u> ink.)		
Signature		
Print Name		
Mailing Address		