

Permit No. _____

PROOF OF APPLICATION OF WATER TO BENEFICIAL USE FOR COMMERCIAL, INDUSTRIAL, MUNICIPAL, QUASI-MUNICIPAL, DOMESTIC, RECREATION (NON-IRRIGATION) OR OTHER PURPOSES

DEPOSITION OF PERMITTEE

Please give special attention to the all-capitals text in red. If you are uncertain about which form to complete or how to answer, please contact the Division of Water Resources at 775-684-2800.

Question 1. What is your name and mailing address? (THIS MUST BE THE PERSON SIGNING THIS DEPOSITION.)

Question 2. The person named above is the Permittee Agent . If Agent, by what authority are you making this deposition? _____

Question 3. Owner of record for whom this proof is filed: _____
(MUST BE AN ESTABLISHED OWNER IN THE RECORDS OF THE STATE ENGINEER.)

Question 4. From what source do you obtain your water? _____
(UNDERGROUND OR NAME OF LAKE, STREAM OR SPRING)

Question 5. Is the water diverted from the same point as described in the terms of the permit? Yes No

If not, then water is diverted at the following point:

(DESCRIBE LOCATION AS BEING WITHIN A 40-ACRE SUBDIVISION OF A PUBLIC SURVEY AND BY COURSE AND DISTANCE TO A SECTION CORNER. IF LAND IS UNSURVEYED, IT SHOULD BE SO STATED.)

Question 6. The works are: Same as Proof of Completion (skip Question 7) or
 Different than Proof of Completion (complete Question 7)

Question 7a. For **groundwater**: Well casing depth: _____ and diameter: _____ well log no.: _____
Pump and motor description: _____

Question 7b. For **surface water**: Name of canal, description of spring box, and/or dimensions of ditches, pipes or other conduits: _____

Question 8a. If water is **metered** provide the following:

Serial number: _____ Manufacturer: _____

Date installed: _____ Reading on date of installation: _____

Units: _____ Multiplier/fixed zeros: _____
(E.G., GALLONS, ACRE-FEET, CUBIC-FEET) (E.G., X100, X1000)

Question 8b. If water is **not metered**, describe the measuring device, including the dimensions of any headgate, weir or flume:

Question 9a. What is the **maximum** diversion rate that this system delivers water from this source? _____
(PROVIDE AN ACTUAL MEASUREMENT IN CUBIC FEET PER SECOND OR GALLONS PER MINUTE)

Question 9b. Who made this measurement? _____

Question 9c. When did this person make this measurement? _____

Question 9d. What method was used to make this measurement?

Question 10. What is the quantity of water that you have placed to beneficial use? _____
(EXPRESS VALUE IN ACRE-FEET PER SEASON OR ACRE-FEET ANNUALLY)

If **metered** attach a record of the actual meter readings for at least a twelve consecutive month period for which this proof is being filed as required by the terms of the permit. THIS MAY BE ANY 12-MONTH PERIOD IN THE LAST 4 YEARS.

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Question 11. Between what dates during a year is the water placed to beneficial use?

(ENTER "JANUARY 1 THROUGH DECEMBER 31" IF ANNUAL USE)

Question 12. Give all information relative to the manner and place of use. If a meter is not required by the permit terms, give information sufficient to determine actual consumption of water. Include a description of the type and number of units being served. If more than one type of unit is served, give the approximate amount of water used by each distinct unit.

(E.G., HOUSES, STRUCTURES, LANDSCAPING, INDUSTRIAL PROCESSES, TYPE OF BUSINESS, ETC. AND/OR THE NUMBER OF SERVICE CONNECTIONS, PERCENTAGE OF ANY SUBDIVISION COMMITMENTS, ETC.)

Question 13. If this permit is for quasi-municipal service for 16 or fewer connections, identify the lots being served by Assessor's Parcel Number (APN) or parcel description on a subdivision map recorded with the county.

(INCLUDE HOURS PER DAY AND DAYS PER YEAR WHEN WATER IS DIVERTED.)

Question 14. Include any other data or information you deem important for full description of beneficial use.

Question 15a. If there is a secondary purpose for which this water was used, please describe:

(THIS MUST BE A USE ALLOWED BY THE PERMIT, E.G., DOMESTIC USE)

Question 15b. If you indicated a secondary use on Question 15a, give details of how water was beneficially used for this purpose.

(E.G., DESCRIPTION OF DOMESTIC PORTION)

I, the undersigned, pursuant to NRS 53.045, do hereby certify, under penalty of perjury of the laws of the State of Nevada, that the foregoing information is true and correct to the best of my knowledge.

Signed _____

Phone _____

Email _____

\$60.00 FILING FEE MUST ACCOMPANY THIS PROOF