San Antonio Basin Water District Data Change Request Form

Date:			
APN Number:		_	
C	URRENT PROPER	RTY OWNER INFO	RMATION
* Owner Name:			
Mailing Address:			
Email Address:			
CHANGE REQUEST	ED:		
- New Owner	- New M	ailing Address	- Update Information
* Owner Name:			
* Situs Address:			
Mailing Address:			
- Change in Irriga	ated versus Non-	Irrigated Land	
* Current: Irrigated	b	Non-Irriga	ted
* Requested Change: Irrigated Non-Irrigated			
- Other - Describ	e		
Name of Person Re	equesting the Cha	ange:	
Email Address:			
* required information	ition		
Ρ	Ň	r request by <u>April</u> Vallace Group	<u>1, 2024 </u> to:
	-	o Kari Wagner	22401
		rt, San Luis Obispo, CA 9 05) 544- 4011	13401
	-	[®] Wallacegroup.us	
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		Official Use Only	
- Approved	- Denied	Updated:	Ву: