Chang	je l	No.	
(For	CD	use	only)

YELLOWSTONE RIVER BASIN CONSERVATION DISTRICTS

Application for Change/Transfer in Water Use Authorization

NOTE: Use one application for each authorization that is to be transferred or changed. Check all appropriate items and fill in each blank line. If the question is not applicable in your case, enter NA (not applicable). If more space is necessary, attach additional sheets. Maps or drawings of your existing system and the proposed change(s) should be attached as outlined in the original application. IMPORTANT: Assistance in completing this form is available from the Conservation District or the Water Development Bureau.

1.	TYPE OF CHANGE REQUESTED:		
	Transfer of Ownership Place Point of Diversion Place Diversion and Immediate Use to Diversion	and Storage for Later Use	
2.	OWNERSHIP:		
	Mailing Address	Authorization No.	
	Home Phone ()	Other Phone ()	
	(b) Name(s) of person(s) receiving interest		
	City or Town	StateZip	
	Home Phone ()	State Zip Other Phone () ***********************************	
מרטים	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	****************	t 2
NOT:	E: The balance of this form need not be fille	d out if the change involves only a transfer!	
3 .	PAST USE OF WATER (This concerns only the amo		
	(a) Point(s) of Diversion:	The state of the s	
	4 4 4, Sec.	, TwpN/S, RgeE/W	
	(b) Place of Use:	, Twp. N/S, Rge. E/W	
		Turo N/C Boo E/u	
	y y Sec.		
	4 4 A. Sec.	, Twp. N/S, Rge. E/W	
	(c) Period of Use:		
	From To		
	(d) Place of Storage:		
	¹ 4	, TwpN/S, RgeE/W	
		, Twp. N/S, Rge. E/W	
	(e) Period of Storage:		
	From To		
4.	PROPOSED CHANGE (Please include maps or copi	es of aerial photographs to indicate change)	
	(a) Point(s) of Diversion:		
	(b) Place of Use:	, TwpN/S, RgeE/W	
		, Twp. N/S, Rge. E/W	
		, TwpN/S, RgeE/W	
		, TwpN/S, RgeE/W	
	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

(0,	From To		T T					
(d)	(d) Place of Storage		25					
	1/4 1/4, Sec. , Twp.	N/S, Rge	E/W					
(e	(e) Period of Storage:	N/S, Rge.	E/W					
2	FromTo							
. RE	REMARKS: Use this area to expand and/or clarify inform apply for a change that is not covered under reasons for the proposed change. Attach additional actions are as a second change.	Section 4, above.	If requested, give					
			×1					
IG	GNATURES:							
(a)	Applicant (Person receiving interest, if change is a transfer)							
		Date						
		Date						
								
		Date						
(b)	o) Conservation District Approval							
	Title	Date						
	Title	Date						
(a)	c) Board of Natural Resources and Conservation Approval							
(0)	17.7							
	Title	Date						
		Date						