

APPEAL OF WATER RESOURCE DISTRICT DECISION

NORTH DAKOTA DEPARTMENT OF WATER RESOURCES REGULATORY DIVISION SFN 61409 (2/2023)

DEPARTMENT OF WATER RESOURCES USE ONLY DATE RECEIVED

In addition to this form, please see Instructions on Page 2.						
Appeal Type						
Dam, Dike, or Other Device Complaint Appeal (North Dakota Century Code Section 61-16.1-53.1)						
Drainage Complaint Appeal (North Dakota Century Code Section 61-32-08)						
Have you submitted or will you submit copies of this appeal to the Water Resource District of jurisdiction?						
Did you file your original complaint with your Water Resource District?						
If Yes, When was the Water Resource District's decision received (date)?						
PLEASE ENCLOSE ALL MATERIALS RELATING TO COMPLAINT, INCLUDING COPY OF ORIGINAL COMPLAINT SUBMITTED, ANY SUPPORTING DOCUMENTATION, AND A COPY OF THE WATER RESOURCE DISTRICT'S DECISION. IMPORTANT NOTE: If a Water Resource District fails to investigate and make a determination or decision concerning a complaint within 120 days of receipt of a complaint, the person filing the complaint may file the complaint with the Department of Water Resources within 150 days of the submittal date of the original filing the complaint with the Water Resource District of jurisdiction (North Dakota Century Code § 61-32-08(2) or 61-16.1-53.1(2)). In this scenario, submittal of a "Complaint for Water-Related Issues" form (SFN 60840) to the Department of Water Resources is required instead of this form.						
Location Description of Issue (Please use legal description 1/4, section, township, range)						
1/4	1/4	Section		Township		Range
1/4	1/4	Section		Township		Range
Petitioner's Certification						
I am appealing a decision by a Water Resource District to the Department of Water Resources. I understand the requirements of North Dakota Century Code section 61-16.1-53.1, or 61-16.1-53, or 61-32-08, as the case may be, and that the Department of Water Resources will review the appeal as required by statutes and rules. Additionally, I acknowledge that my appeal is accurately described and depicted in this request as I intended. My signature below acknowledges that I have read and agree to these statements.						
Petitioner's Name (If organization, please list)						
Address				City	State	ZIP Code
Telephone Number			Email Address			

Additional Sheets May Be Attached If Necessary

If you need any assistance, please contact the Regulatory Division at (701) 328-4956.

This request must be submitted to North Dakota Department of Water Resources

Mail | 1200 Memorial Highway, Bismarck, ND 58504-5262

Email | dwrregpermits@nd.gov

Fax | (701) 328-3696

INSTRUCTIONS FOR FILING AN APPEAL

On separate sheets, the petitioner must describe and depict the following:

- 1. The identity of all parties to the complaint.
- 2. Petitioner's interest in Water Resource District's decision (WRD), including impact the decision has on petitioner.
- 3. Relief the petitioner seeks.
- 4. Statement identifying errors in the WRD's decision that entitle petitioner to seek relief.
- 5. Facts presented to WRD, that support petitioner's position.
- 6. A map depicting the watershed area and identifying the issue complained of.