

**STATE OF NORTH DAKOTA
APPLICATION FOR CHANGE IN POINT OF DIVERSION**

(Please type or print in ink)

1. Name of Applicant _____
Mailing Address _____
City _____ State _____ Zip _____
Home Phone _____ Other Phone _____

2. New Point(s) of Diversion:
____ 1/4 ____ 1/4 of Section ____ Township ____ N, Range ____ W, _____ County
____ 1/4 ____ 1/4 of Section ____ Township ____ N, Range ____ W, _____ County
____ 1/4 ____ 1/4 of Section ____ Township ____ N, Range ____ W, _____ County

3. Ownership:
(a) Property owner at the new point of diversion: _____
(b) If (a) above is other than the applicant, describe the arrangement enabling the applicant to make this filing: _____

4. Indicate the number of landowners and cities within a one mile radius of the proposed point of diversion which you must notify: _____

5. THE APPLICANT CERTIFIES THAT THE STATEMENTS APPEARING HEREIN ARE TO THE BEST OF HIS/HER KNOWLEDGE TRUE AND CORRECT.

(Signature) (Date)

(Signature) (Date)

(Signature) (Date)

Signature of applicant(s) must be exactly as in Item 1. If more than one applicant is shown, all must sign.

RETURN TO: State Engineer
State Office Building
900 East Boulevard
Bismarck, North Dakota 58505-0850