## WALKER RIVER IRRIGATION DISTRICT 2019 STORED WATER PROGRAM APPLICATION

## Completed Application required in the District office no later than 4:00 p.m. PDT May 15, 2019

Applicant Contact Information							
Applicant:							
(If applicant is	not the owner, must provide	e authorization to r	epresent owner.)				
Mailing Address:							
Street/P.O. Box	: Town/City	State	Zip Code				
Phone: Home_		Cell					
Owner (if other than Ap	Legal Owner of Property / pplicant):	Contact Information	t <b>ion</b>				
Mailing Address:							
Street/P.O. Box	Town/City	State	Zip Code				
Phone: Home_		Cell					
EN	ROLLMENT IN STORE	D WATER PROC	FRAM				
Applicant's Wal	lker River Irrigation Distric	t User Number is:					
User Number in the Sto	lsacre to ored Water Program. Applotice to the District no later	licant understands	that the enrollment may be				

## SUPPLEMENTAL GROUNDWATER INFORMATION

stored water is appur		groundwater r	ignis appurtenant	to the property to	wnich the
(Circle one):	YES	or	NO		
If there are su Engineer Permit Nun	pplemental groader for the rig	oundwater right ht(s) is/are	s appurtenant to t	he property, the Ne	vada State —•
By completin warrant to the Distric and that this prelimin May 30, 2019, and up	et that the informary enrollment	rmation include will become fi	ed on the Applicated and if not withdra	wn or modified in	nd correct, writing by
A					
Applicant signature:				4	
Date:		_, 2019			