



# Walker River Irrigation District

Established in 1919

## Water Right Information Release Form

Water Owner Name: \_\_\_\_\_

Water Owner Phone Number: \_\_\_\_\_

Parcel Number(s): \_\_\_\_\_

User Number(s): \_\_\_\_\_ Water Card Number(s): \_\_\_\_\_

I/We the undersigned hereby authorize Walker River Irrigation District to release the following water right related documents regarding the above referenced parcel number(s) to \_\_\_\_\_.

(Check all that apply)

Water Card

Usage Statement

Allocation Statement

Assessment Information

This consent form will expire on (date) \_\_\_\_\_ or (#) \_\_\_\_\_ days from the date of this form.

I understand this information is protected and cannot be released/requested without my written consent unless otherwise provided by law. I further understand that this consent may be revoked by me, in writing, at any time. All information that is released while this consent is active cannot be retracted.

Water Owner Signature: \_\_\_\_\_

Effective Date: \_\_\_\_\_

*Note: This form must be completed and returned to Walker River Irrigation District before any information is released. This form will become a record within the water right history folder.*