



**APPLICATION FOR CONDITIONAL WATER PERMIT**  
 NORTH DAKOTA DEPARTMENT OF WATER RESOURCES  
 WATER APPROPRIATION  
 SFN 60157 (10/2024)

Application Number
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(PLEASE DO NOT SUBMIT A COPY OF THIS APPLICATION FORM.)

MAIL THE COMPLETED APPLICATION, ALONG WITH THE REQUIRED MAP AND APPLICATION FEE TO:  
 ND DEPARTMENT OF WATER RESOURCES • 1200 MEMORIAL HIGHWAY • BISMARCK, ND 58504-5262

*NOTE: Use one application for each type of source (ground water, surface water). Check all appropriate boxes and fill in each blank line. If the question is not applicable to your proposed development, enter NA (not applicable). If more space is necessary, attach additional sheets.*

The following application fee must accompany the conditional water permit application.

	Municipal Or Public	\$500		Recreation, Livestock, Or Fish & Wildlife	\$100
	Irrigation	\$500		Industrial Use (< = 1 Acre-Foot)	\$250
	Permit Amendment	\$100		Industrial Use (>1 Acre-Foot)	\$1,000

Name of Applicant								
Address				City		State	ZIP Code	
Home Telephone Number				Work Telephone Number				
Cell Phone Number				Email Address				
<b>2. Source of water supply:</b> <input type="checkbox"/> Ground Water <input type="checkbox"/> Surface Water								
<b>If Surface Water:</b>								
If the requested surface water source is a navigable water as determined by the Department of Water Resources, a Sovereign Land Permit may be required. Contact the Regulatory Division at (701) 328-4956 for more information.								
(a) Source Name								
(b) If New Impoundment		1/4	Section		Township		Range	
(c) If Existing Impoundment, give name								
(d) Existing Impoundment		1/4	Section		Township		Range	
<b>3. Point Of Diversion:</b>								
(1)	1/4	Section		Township	N.	Range	W.	County
(2)	1/4	Section		Township	N.	Range	W.	County
(3)	1/4	Section		Township	N.	Range	W.	County
(4)	1/4	Section		Township	N.	Range	W.	County

**4. Amount Of Water Requested:**

If the impoundment can store more than 25 acre-feet, a Construction Permit from the Department of Water Resources may be required. Contact the Regulatory Division at (701) 328-4956 for more information.

(A) Annual Use From Points Listed In Item 3 Above, Rate Of Diversion, And Period Of Use:

Amount (acre-feet)	Rate At (gpm)	From (month/day)	To (month/day)
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(b) If impoundment:

Storage Out (acre-feet)	Used To Offset Evaporative Losses (acre-feet)
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(C) Total annual use requested (sum of annual use from 4a and evaporation from 4b):

Total (acre-feet)
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**5. Description Of Proposed Beneficial Water Uses:**

(a) Irrigation (If applicable)

(1) Method of Irrigation:  Sprinkler  Waterspreading  Flood  Drip

(2) Project will involve new irrigated land:  Yes  No

(3) Project will involve supplemental water to existing irrigation:  Yes  No

(4) Description of land to be irrigated (show lot numbers where applicable). Requested acres must match what is requested on map:

SEC.	TWP.	RGE.	NE 1/4				NW 1/4				SW 1/4				SE 1/4				TOTAL		
			NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4			

TOTAL NUMBER OF ACRES TO BE IRRIGATED:

(b) Non-Irrigation Use (if applicable):

Municipal	Recreation
Rural Water	Fish and Wildlife
Industrial	Other (please specify)

<b>6. Ownership:</b>		
(a) Property owner at the point of diversion:		
(b) Property owner at the place of use (irrigation use only):		
(c) If either (a) or (b) are not the applicant, a landowner or access agreement is required to be submitted with the application.		
State law requires that cities and landowners within a one-mile radius of the proposed point of diversion be advised of this application. A completed "Notice of Application" will be forwarded to you upon receipt of this application.		
<i>THE APPLICANT CERTIFIES THAT THE STATEMENTS APPEARING HEREIN ARE TO THE BEST OF THEIR KNOWLEDGE TRUE AND CORRECT:</i>		
Signature	Print Name	Date
Signature	Print Name	Date
Signature	Print Name	Date
Signature of the applicant(s) must be exactly as in item 1. If more than one applicant is shown, all must sign.		