STATE OF NEBRASKA
DEPARTMENT OF WATER, ENERGY, AND ENVIRONMENT

NOTIFICATION OF REASSIGNMENT OF SURFACE WATER APPROPRIATION(S)

WHEN APPROPRIATION(S) ARE HELD BY AN IRRIGATION DISTRICT, RECLAMATION DISTRICT, PUBLIC POWER AND IRRIGATION DISTRICT, MUTUAL IRRIGATION COMPANY, CANAL COMPANY OR THE U.S. BUREAU OF RECLAMATION AND HAVE BEEN PROVISIONALLY RELINQUISHED

1. Name of Organization holding the surface water appropriation(s) to be reassigned:

_____

2. List the surface water appropriation(s) to be reassigned:_____

_____

If more than one appropriation is listed then **all** appropriations must cover the same lands for the same number of acres otherwise separate forms must be used.

3. Identify the point of diversion: Headgate of _____ Canal

Legal description:_____¼_____¼ of Section_____Township_____Range_____ ☐E ☐W

County:_____

Name of Source:_____

FOR DEPARTMENT USE ONLY

Filed in the office of the
Department of Water, Energy, and Environment

at_____ a.m. / p.m.

on:_____ , 20_____

Reassignment Number: REA- _____

Appropriation(s):_____

RightID(s):_____

Water Division:_____

4. Identify the legal description of the land and the number of acres where water will be used after the reassignment.
(If additional space is needed please use DWEE Form 962-19B)

				NW¼				NE¼				SW¼				SE¼				Total Acres
Section	Township	Range	Direction	NW¼	NE¼	SW¼	SE¼	NW¼	NE¼	SW¼	SE¼	NW¼	NE¼	SW¼	SE¼	NW¼	NE¼	SW¼	SE¼	
			☐ East ☐ West																	
			☐ East ☐ West																	
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			☐ East ☐ West																	
																			Total Acres	

5. Date of Reassignment: _____

6. Select all that apply:

☒ Clearly marked aerial photographs showing lands to which surface water appropriation(s) will be reassigned are attached.
☐ All lands to which surface water appropriation(s) will be reassigned are listed on this form.
☐ Additional pages of land listings to which surface water appropriations will be reassigned are attached. (DWEE Form 962-19B)
☐ Other attachment(s) are included. Please describe _____

7. Organization Acknowledgement of Reassignment

I certify that the information included on this form and any addendums and/or attachments, to the best of my knowledge and belief, is true and accurate.

I have initialed and dated all addendums and/or attachments to this relinquishment.

Signature: _____ Date: _____

Printed Name: _____ Title: _____

Submit this form and any attachments to:

Nebraska Department of Water, Energy, and Environment
Surface Water Permitting
245 Fallbrook Blvd., Suite 100
Lincoln, Nebraska 68521-6729

Phone: (402) 471-2186