660F: Application For a Proposed Use of Flathead System Compact Water

October 09, 2024

APPLICATION FOR A PROPOSED DEVELOPMENT OF FLATHEAD SYSTEM COMPACT WATER

Mail form and payment to:

Flathead Reservation Office of the Water Engineer PO Box 37

PU BOX 3/	
Ronan, MT 59864	
For questions contact: contact@frwmb.go	<u>v</u> 01 (406) 201-2532
This form is to be used by the Tribal Water Rights Office Personnel only to apply on behalf of an individual for the use of the Flathead System Compact Water (FSCW).	OFFICE of the ENGINEER USE ONLY
 Written consent of the Tribal Council or its delegate to use a portion of the Flathead System Compact Water must be attached with this form 	
 Proof of a lease agreement with the Tribal Lands Department must already be in place and attached to this form. 	Date Rec'd AM / PM
Type: Development of new uses from Flathead System Compact Water UAMO § 2-2-118)	Rec'd By
	Payor
Source: Surface Water	Amount Rec'd
Filing Fee: \$500.00 *Make checks payable to FRWMB.	Check #
	Receipt #
I. APPLICANT INFORMATION Name(s)	
Mailing Address	
City State	Zip
Cell/Home Phone Email Address	
2. DESCRIPTION OF THE PROPOSED USE OF FLATHEA	D SYSTEM COMPACT WATER
3. PROPOSED MEANS OF DIVERSION. Attach a separate appropriation works and means of conveyance.	e sheet with a description of the
☐ Headgate ☐ Pipeline ☐ Dam ☐	☐ Pit
Pump Rated Capacity (GPM or CFS) Ho	rsepowerLift in Feet
Other	

4.	* The FSCW Water Use Authorization will renotifies the Office of the Water Engineer that the t	emain acti			al Coun	cil or its delegate
5.	PERIOD(S) & PURPOSE(S) OF USE: * Complete all questions for each proposed purpose of the use. Provide supplemental material that explains your proposed flow and volume calculations by month.					
	Purpose (1):	Annual	volume o	of the us	se (AF):	
	Irrigated Acres (if applicable):	_				
	Monthly diverted flow rate (CFS or GPM) circle of					
	Jan Feb Mar Apr May Jun Jul	Aug	_Sep_	_Oct	_ Nov	_ Dec
	Monthly diverted volume (AF):					
	Jan Feb Mar Apr May Jun Jul	Aug	_Sep	_ Oct	_ Nov	_ Dec
	Monthly consumed volume (AF):					
	Jan Feb Mar Apr May Jun Jul	Aug	_ Sep	_Oct	_ Nov	_ Dec
	Purpose (2):	Annual	volume c	of the us	se (AF):	
	Irrigated Acres (if applicable):					
	Monthly diverted flow rate (CFS or GPM) circle of	ne:				
	Jan Feb Mar Apr May Jun Jul	Aug	_Sep_	_Oct	_ Nov	_ Dec
	Monthly diverted volume (AF):					
	Jan Feb Mar Apr May Jun Jul	Aug	_ Sep	_ Oct	_ Nov	_ Dec
	Monthly consumed volume (AF):					_
	Jan Feb Mar Apr May Jun Jul					
	Purpose (3):	Annual	volume d	of the us	se (AF):	
	Irrigated Acres (if applicable):	-				
	Monthly diverted flow rate (CFS or GPM) circle of	ne:				
	Jan Feb Mar Apr May Jun Jul	Aug	_ Sep	_ Oct	_ Nov	_ Dec
	Monthly diverted volume (AF):					
	Jan Feb Mar Apr May Jun Jul	Aug	_ Sep	_ Oct	_ Nov	_ Dec
	Monthly consumed volume (AF):	Δ.	0	0.1		Б
	Jan Feb Mar Apr May Jun Jul	_	-			
	PROPOSED POINT(S) OF DIVERSION */eave file there are multiple points of diversion	ields blani	k if not a	applicab	ole. *Atta	nch an additional page
11	there are multiple points of diversion. Latitude:	Longitude	7.			
		p [] _N 🗆	S Ra	ange	□ E □ W
	CountyLot* Block*_					
	Tract No.* COS/TSR No.*					
	Street Address, including City/State/Zip Code:					

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7. PROPOSED	PLACE OF USE			
a. Geocode	of the place of use (1)	7 digits):		
If there are	e multiple places of us	e list the geoco	de for each n	arcel on an attached

1	7. PROPOSED PLACE OF USE a. Geocode of the place of use (17 digits):
	If there are multiple places of use, list the geocode for each parcel on an attached sheet. If there is more than one place of use, please attach a separate sheet with additional land descriptions. * leave field blank if not applicable 1/4 1/4 Section Township N S Range E W
	CountyLot* Block* Subdivision Name*
	Tract No.* COS/TSR No.* Government Lot*
	Street Address, including City/State/Zip Code:
3 	ATTACHED THE FOLLOWING ADDITIONAL INFORMATION TO THIS FORM A project plan, including a proposed completion period and, if applicable, a list of water rights to be used in conjunction with or to be replaced by the proposed use of Flathead System Compact Water
Ш	Written authorization from the Tribal Council or its delegate that it has approved this application for the use of the Flathead System Compact Water
	A plan to adhere to minimum flow requirements, ramping rates, and other ecological flow requirements set forth in the abstract of the Flathead System Compact Water Right;
	 The plan must include monitoring to track minimum flow and ramping rates; and The plan must include consideration for cessation of use when applicable.
	MAP
	 A map must be submitted with the application and include the following marked and labeled: Property boundaries and ownership information;
	 Topicity boundaries and ownership information, Township, Range, and Section of the point of diversion and place of use;
	 Proposed source of water, point of diversion, means of conveyance, place of use, and place(s)

- s) of storage, if applicable;
- All buildings on the property;
- Boundaries of the proposed irrigated area;
- Sewage facilities including septic tanks and drain fields within the property boundaries;
- All wells and existing water developments within a 500-foot radius of the proposed water use
- Measurement and instrument locations associated with the proposed development; and
- The Place(s) of Use of all associated and supplemental water rights.

9. DECLARATION OF OWNERSHIP

I declare that the statements appearing here are, to the best of my knowledge, true and correct and affirm that I have possessory interest, or the written consent of the person with the possessory interest, in the point of diversion, place of use, and conveyance.

Applicant 1 Printed Name:	
Authorized Signature:	Date:
Applicant 2 Printed Name:	
Authorized Signature:	Date:
Applicant 3 Printed Name:	
Authorized Signature:	Date:

^{***}Please note, you must submit ORIGINAL owner signatures. Copies will not be accepted.***