REQUEST TO WITHDRAW A WATER RIGHT

Mail form to:

Flathead Reservation Office of the Water Engineer
PO Box 37
Ronan, MT 59864

For questions contact: contact@frwmb.gov or (406) 201-2532

OFFICE USE ONLY

Date Rec'd _____
Time _____ AM / PM
Rec'd By _____

IMPORTANT

- **This form is only valid for water rights located within the exterior boundaries of the Flathead Indian Reservation**.
- Use this form to withdraw an entire water right.
- This form must be notarized.

☐ Yes ☐ No This Water Right is located within the exterior boundaries of the Flathead Indian Reservation. ***If no, this is the incorrect form.***

1. Affected Water Right(s) _____
2. I/we, _____, as legal owners of this water right,
   ☐ hereby request the withdrawal of the **entire** water right
3. The reason for this request is:
   ☐ This water right was never completed or put to use.
   ☐ This water right has not been used for _____ years.
   ☐ Other _____
4. **Declaration**
   I declare under penalty of perjury 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** _____

State of _____
County of _____
Signed or acknowledged before me on _____ by _____
Notary's Signature _____
Notary Name (Printed) _____
Notary public for the State of _____
Residing at _____
My commission expires _____

Affix Notarial Seal/Stamp Above