

**MONTANA WATER COURT, LOWER MISSOURI DIVISION  
MILK RIVER ABOVE FRESNO RESERVOIR - BASIN 40F**

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**NOTICE OF INTENT TO APPEAR**

1. Claim # \_\_\_\_\_  
(One Claim Number Per Form - Claim Number must appear on Basin 40F-OBJECTION LIST)
  
2. Source \_\_\_\_\_
  
3. County \_\_\_\_\_
  
4. Name, Address, and Phone Number of Party Appearing:

\_\_\_\_\_  
Last Name                                      First Name                                      Middle Initial

\_\_\_\_\_  
Street Address or Post Office Box

\_\_\_\_\_  
City                                      State                                      Zip Code                                      Phone/E-mail

5. Name, Address, and Phone Number of Party's Attorney, if any

\_\_\_\_\_  
Last Name                                      First Name                                      Middle Initial

\_\_\_\_\_  
Street Address or Post Office Box

\_\_\_\_\_  
City                                      State                                      Zip Code                                      Phone/E-mail

**(TURN FORM OVER AND COMPLETE BACKSIDE)**

6. State the changes that you think should be made to this claim and why.

\_\_\_\_\_  
SIGNATURE OF APPEARING PARTY (YOUR NAME)

YOU MUST MAIL A COPY OF THIS NOTICE OF INTENT TO APPEAR TO ALL OF THE OWNER(S) OF THIS WATER RIGHT. COMPLETION OF THE CERTIFICATE OF MAILING, FOUND BELOW, INDICATES TO THE COURT THAT YOU HAVE MAILED A COPY OF THIS NOTICE OF INTENT TO APPEAR TO ALL OF THE OWNER(S) LISTED.

**CERTIFICATE OF MAILING**

I, \_\_\_\_\_, do solemnly swear that on the \_\_\_\_\_ day of \_\_\_\_\_, 2015, I placed a copy of this Notice of Intent to Appear in the U. S. Mail, postage prepaid. The copy of this Notice of Intent to Appear was mailed to the owner(s) of the water right:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City & State: \_\_\_\_\_

City & State: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE FOR CERTIFICATE OF MAILING

Please send this completed form to: **Montana Water Court**  
**PO Box 1389**  
**Bozeman MT 59771-1389**  
**Phone: (406) 586-4364 Fax: (406) 522-4131**  
**E-mail: [watercourt@mt.gov](mailto:watercourt@mt.gov)**

***THIS FORM MUST BE RECEIVED AND FILED AT  
THE MONTANA WATER COURT BY 5:00 PM ON APRIL 28, 2015.***