#### REQUEST TO REDUCE OR CORRECT A WATER RIGHT RECORD

Mail form to:

### Flathead Reservation Office of the Engineer

PO Box 37 Ronan, MT 59864

For questions contact: <a href="mailto:contact@frwmb.gov">contact@frwmb.gov</a> or (406) 201-2532

## Use the form to reduce or correct active or suspended water right records.

- Reductions and corrections can be done to reduce volume, flow rate, period of use, purposes of use, and/or place of use.
- Once processed, a new water right record will be issued to reflect the requested reduction or correction.
- The elements listed on the original water right may not be reinstated once the reduction is complete. Any use of water under the original right will be permanently relinquished or abandoned in an amount equal to the reduction requested.
- This form must be notarized.

Do not use this form if a transfer of property occurred. Use a DNRC Water Right Ownership Update Form No. 608.

#### **IMPORTANT**

This form is only valid for water rights located within the exterior boundaries of the Flathead Reservation.

# OFFICE of the ENGINEER USE ONLY

Date Rec'd	Time
Rec'd By	
Payor	
Amount Rec'd	Check #
Refund	Date

1.	WATER RIGHT OWNER INFORMATION Name(s)				
	Mailing Address	City	State Zip		
	Cell/Home Phone	Email Address			
2.	ACTION TO BE COMPLETED				
	Reduction				
	☐ Correction				
3.	WATER RIGHT TO BE CORRECTED/REDUCED				
	Number				
4.	REASON FOR CORRECTION/REDUCTION  Example: incorrect legal land description, no longer using a portion of a water right, right was filed for more than actual volume				

5.	CORRECTION/REDUCTION DETAILS  Explain the requested correction/reduction.  If a reduction, specify which purposes do not reflect current uses. Be very specific (i.e., past, and current number of irrigated acres, stock, dwellings, etc.)  If reducing a flow rate, provide the appropriate flow rate to reflect current uses.				
	POINT OF DIVERSION				
	Latitude	Longitude			
			DEDW County		
	Geocode				
	Street Address, including City/State/Zip Code:				
7.	DECLARATION OF OWNERSHIP *Original owner signatures are required, copies will not be accepted.				
	I declare under penalty of perjury that the and correct and affirm that I have posses possessory interest, in the point of divers	ssory interest, or the written con	sent of the person with the		
	Applicant 1 Printed Name				
	Authorized Signature		_ Date		
	Applicant 2 Printed Name				
	Authorized Signature		Date		
	Applicant 3 Printed Name				
	Authorized Signature		Date		
	e of				
Siar	nty of led or acknowledged before me on	bv			
Nota	ary's Signature	<u></u>			
Nota	ry Name (Printed)	<u> </u>			
	ry public for the State of ding at				
My	commission expires	<u>–</u>			