



**PREAPPLICATION MEETING
FORM: PART A
PERMIT**

§ 85-2-302, MCA
Form No. 600P-A (Revised 10/2025)

PREAPPLICATION MEETING FEE

\$ 500

FILING FEE REDUCTION & EXPEDITED TIMELINE

An application will be eligible for a filing fee reduction and expedited timelines if the applicant completes a preapplication meeting with the Department (ARM 36.12.1302(1)), which includes submitting any follow-up information identified by the Department (ARM 36.12.1302(3)(c)) and receiving either Department-completed technical analyses or Department review of applicant-submitted technical analyses (ARM 36.12.1302(4) and (5)). An application for the proposed project also must be submitted within 180 days of delivery of Department technical analyses or scientific credibility review and no element on the submitted application can be changed from the completed preapplication meeting form (ARM 36.12.1302(6)).

For Department Use Only

Application # _____ Basin # _____

Meeting Date _____ Time _____

Variance Request Deadline _____

Completed Form Deadline _____

The Department will fill out Permit Preapplication Meeting Form Part A (Form 600P-A) and will identify items for follow-up during the preapplication meeting. The Department and Applicant will sign the Preapplication Meeting Affidavit and Certification within 10 business days. Within 180 days of the preapplication meeting, the Applicant will complete Preapplication Meeting Form Part B (Form 600P-B), including identified follow-up, any amended responses, and Follow-up and Amended Responses Affidavit & Certification. Variance requests must be submitted on Form 653 to the Department on or before the Variance Request Deadline, which is day 138 of the 180 day-deadline for a completed preapplication meeting form. Form 653 may be submitted earlier than the Variance Request Deadline. The Department has 30 business days to process the Form 653.

Applicant Information: Add more as necessary.

Applicant Name _____
Mailing Address _____ City _____ State _____ Zip _____
Phone Numbers: Home _____ Work _____ Cell _____
Email Address _____

Applicant Name _____
Mailing Address _____ City _____ State _____ Zip _____
Phone Numbers: Home _____ Work _____ Cell _____
Email Address _____

Contact/Representative Information: Add more as necessary.

Contact/Representative is: Applicant Consultant Attorney Other (describe) _____
Contact/Representative Name _____
Mailing Address _____ City _____ State _____ Zip _____
Phone Numbers: Home _____ Work _____ Cell _____
Email Address _____

NOTE: If a contact person is identified as an attorney, all communication will be sent only to the attorney unless the attorney provides written instruction to the contrary (ARM 36.12.122(2)). If a contact person is identified as a consultant, employee, or lessee, the applicant will receive all correspondences, and a copy may be sent to the contact person (ARM 36.12.122(3)).

Meeting Attendees: Add more as necessary.

Name	Role	Name	Role



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APPLICATION DETAILS

The following questions are mandatory and must be filled out before the Preapplication Meeting Form is determined to be complete. Narrative responses that are larger than the space provided can be answered in an attachment. If an attachment is used, mark the see attachment ("A") checkbox on this form and label the attachment with the question number. Constrain narrative responses to the specific question as is asked on the form; do not respond to multiple questions in one narrative. Responses in the form of a table may be entered into the table provided on this form or in an attachment. If an attachment is used, the table must have the exact headings found on this form, and the see attachment ("A") checkbox must be marked. Label units in narrative responses and tables. Questions that require Applicant to submit items to the Department have a submitted ("S") checkbox, which is marked when the required item is attached to the Preapplication Meeting Form. Label all submitted items with the question number for which they were submitted. For all questions where follow-up is necessary, mark the "F" checkbox in the "Follow-Up" column and write the question number on the "Follow-Up Page".

S = Submitted. Use when required item is included with form.

A = See attachment. Use when additional space is needed to answer a question.

F = Follow-up. Use when follow-up is necessary.

Questions, Narrative Responses, and Tables	Check-boxes	Follow-up
1. Do you elect to have DNRC conduct Technical Analyses?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
2. Provide a map created on an aerial photograph or topographic map that shows the following: section corners, township and range, scale bar, north arrow, all proposed points of diversion labeled with a unique POD ID number (include GWIC ID, if available, for wells), all proposed places of use, all proposed conveyance structures (including ditches and pipelines), all proposed places of storage, and places of use for all overlapping water rights. More than one map may be submitted, if necessary to clearly convey all required information.	<input type="checkbox"/> S	<input type="checkbox"/> F
3. Is the project located in a Controlled Groundwater Area or Basin Closure Area? If yes, immediately go to Mandatory Project-Specific questions 54 to 56 because Form 600 may be the incorrect form, or this project may not meet the requirements for the Department to accept a Form 600.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
4. Is the proposed use temporary? a. If yes, when will the appropriation cease? _____	<input type="checkbox"/> A	<input type="checkbox"/> F



5. Describe the proposed purpose information, including period of diversion (MM/DD-MM/DD), period of use (MM/DD-MM/DD), flow rate (GPM or CFS) and volume (AF).										<input type="checkbox"/> A	<input type="checkbox"/> F
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Purpose	Period of Diversion (MM/DD-MM/DD)		Period of Use (MM/DD-MM/DD)		Flow Rate			Volume (AF)	
	Flow Rate	GPM	CFS						
							<input type="checkbox"/>	<input type="checkbox"/>	
							<input type="checkbox"/>	<input type="checkbox"/>	
							<input type="checkbox"/>	<input type="checkbox"/>	
							<input type="checkbox"/>	<input type="checkbox"/>	
							<input type="checkbox"/>	<input type="checkbox"/>	
							<input type="checkbox"/>	<input type="checkbox"/>	
Total							<input type="checkbox"/>	<input type="checkbox"/>	

6. Does the proposed use include one or more of the following purposes: domestic, multiple domestic, stock, or irrigation? If yes, fill out the following table, where applicable.										<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
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Purpose	Requested Information	Response
Domestic or multiple domestic	Number of households and bedrooms served per household	
Stock	Number of animal units	
Irrigation	Method of irrigation type (sprinkler or flood) and subtype (if flood: level border, graded border, furrow, contour ditch, or other; if sprinkler: center pivot, wheel line, or other)	
Irrigation (flood only)	Design slope	

7. Describe the proposed location of the point(s) diversion to the nearest 10 acres, if source is groundwater (GW) or surface water (SW), source name, and means of diversion (e.g., pump, headgate, well). Label each POD with the POD # used for the project map (question 2).										<input type="checkbox"/> A	<input type="checkbox"/> F
--	--	--	--	--	--	--	--	--	--	----------------------------	----------------------------

POD #	1/4	1/4	1/4	Sec	Twp	Rge	County	Lot	Block	Tract	Subdivision	Gov Lot	SW or GW	Source Name	Means

8. What are the geocodes of the place of use?	<input type="checkbox"/> A	<input type="checkbox"/> F

9. Describe the legal land description for the proposed place of use and, if an irrigation or lawn and garden purpose, list the number of irrigated acres.	<input type="checkbox"/> A	<input type="checkbox"/> F
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Acres	Gov't Lot	Block	1/4	1/4	1/4	Sec	Twp	Rge	County
Total									

10. Will other water rights supplement or overlap the place of use to contribute to the purpose(s)?	<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
a. If yes, summarize how the water rights will be operated as a whole to serve the purpose(s).	<input type="checkbox"/> A		<input type="checkbox"/> F



11. For each supplemental or overlapping water right, please list the water right number, purpose, typical period of diversion and use (MM/DD-MM/DD), flow rate (GPM or CFS), and the volume of water (AF) contributed.						<input type="checkbox"/> A	<input type="checkbox"/> F
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Water Right No.	Avg. Period of Diversion MM/DD-MM/DD	Avg. Period of Use MM/DD-MM/DD	Flow Rate			Volume Contributed AF
			Flow Rate	GPM	CFS	

12. Will this application supplement contract water from a Federal Project, ditch company, or other source?						<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
a. If yes, explain.						<input type="checkbox"/> A	<input type="checkbox"/> F	
<hr/> <hr/> <hr/>								
13. Does the project involve one or more places of storage? This does not include reservoirs, pits, pit-dams, or ponds with a capacity less than 0.1 AF; water tanks; or cisterns (ARM 36.12.113(6)). If yes, answer the following questions once for each place of storage. Use an "Additional Place of Storage (600P)" sheet if more than one. Additionally, you may choose to answer non-mandatory questions 76 to 80 for place of storage.						<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
a. Is this application to enlarge an existing reservoir? If yes, list the water right numbers for the existing reservoir.						<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
<hr/>								
b. Is the place of storage located on-stream?						<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
<hr/>								
c. What is the capacity of the proposed place of storage or the existing place of storage after it is enlarged? Use bathymetry data, survey, or engineering plans for capacity. Submit the data source used with this form. In lieu of these data sources, use the following equation: <i>Surface Acres x Maximum Depth (FT) x 0.5 = Capacity (AF)</i>						<input type="checkbox"/> A	<input type="checkbox"/> F	
<hr/>								

<p>d. What is the surface area of the place of storage?</p> <hr/> <hr/>	<input type="checkbox"/> A	<input type="checkbox"/> F
<p>14. Will your system be designed to discharge water from the project?</p>	<input type="checkbox"/> Y	<input type="checkbox"/> N
<p>a. If yes, explain the wastewater disposal method. A discharge permit may be required to comply with §§ 75-5-410 and 85-2-364, MCA.</p> <hr/> <hr/> <hr/>	<input type="checkbox"/> A	<input type="checkbox"/> F
<p>15. Does the project involve an appropriation that is greater than 5.5 CFS and 4,000 AF? If yes, you must submit a Criteria Addendum Application for Beneficial Water Use Permit for Appropriations Greater than 5.5 CFS and 4,000 AF (Form 600-B) with application submittal. The criteria are found in §85-2-311(3), MCA.</p>	<input type="checkbox"/> Y	<input type="checkbox"/> N
<p>16. Will you be transporting water for use outside of Montana? If yes, you must submit an Out-of-State Use Addendum (Form 600/606-OSA) with the application. The out-of-state use criteria are outlined in §85-2-402(6), MCA.</p>	<input type="checkbox"/> Y	<input type="checkbox"/> N
<p>17. Does the project include the water marketing purpose? If yes, you may choose to answer non-mandatory questions 81 to 85 for water marketing. A Water Marketing Purpose Addendum (Form 600/606-WMA) will be required with application submittal.</p>	<input type="checkbox"/> Y	<input type="checkbox"/> N
<p>18. Are you proposing a point of diversion and/or place of use on State of Montana Trust Land? If yes, documentation of consent from the DNRC Trust Lands Management Division will be required at application submittal.</p>	<input type="checkbox"/> Y	<input type="checkbox"/> N
<p>19. Is the project located in designated sage grouse habitat? If yes, a review letter from the Montana Sage Grouse Habitat Conservation Program will be required at application submittal.</p>	<input type="checkbox"/> Y	<input type="checkbox"/> N



SURFACE WATER

Applicable, move on to question 20. **Not Applicable**, skip to question 30.

The following questions are mandatory for surface water permit applications and must be filled out before the Preapplication Meeting Form is determined to be complete.

Surface Water Analysis

Questions, Narrative Responses, and Tables							Check-boxes	Follow-up
20. What is the flow rate (GPM or CFS), volume (AF), period of diversion start date and end date (MM/DD-MM/DD), and source type (e.g., perennial, ephemeral) at each point of diversion? Use the same POD # as the project map (question 2) to label each point of diversion.							<input type="checkbox"/> A	<input type="checkbox"/> F

POD #	Flow Rate			Volume		Period Start	Period End
	Flow Rate	GPM	CFS	AF		MM/DD	MM/DD
	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>					

21. Is the source type of the diversion perennial or intermittent, ephemeral, lake, or other?	<input type="checkbox"/> A	<input type="checkbox"/> F
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Perennial or intermittent	Answer questions 22 to 25	Ephemeral	Answer question 26	Lake	Answer question 27	Other	Answer questions 28 to 29
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Surface Water Analysis: Perennial or Intermittent

Applicable **Not Applicable**

22. Are stream gage data available?	<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
a. If yes, answer question 23.			
b. If no, answer question 24.			



23. Stream gage data are available.			
a. Is one stream gage located above the most upstream POD and one stream gage located below the most upstream POD?		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
i. If no, is only one stream gage located near the most upstream POD?		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
1. If yes, is the stream gage located upstream or downstream? _____			<input type="checkbox"/> F
b. List the gage name(s). Write "N/A" for Gage 2 if one gage is available. Gage 1: _____ Gage 2: _____			<input type="checkbox"/> F
c. What is the distance between the gage(s) and the most upstream POD? Write "N/A" for Gage 2 if one gage is available. Gage 1: _____ Gage 2: _____			<input type="checkbox"/> F
d. Is there a limiting or controlling factor on the source between the stream gage(s) and the most upstream POD? This includes dams that control the flow and streams with large gaining and/or losing reaches. If you have questions about this, the Regional Office may provide assistance.		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
i. If yes, explain. _____ _____		<input type="checkbox"/> A	<input type="checkbox"/> F
e. How long is the period of record? Write "N/A" for Gage 2 if one gage is available. Gage 1: _____ Gage 2: _____			<input type="checkbox"/> F
f. Who operates and maintains the gage(s)? Write "N/A" for Gage 2 if one gage is available. Gage 1: _____ Gage 2: _____			<input type="checkbox"/> F

g. Is each available stream gage operated and maintained by USGS or DNRC?		<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
i. If yes, skip to question 23.h.				
ii. If no, answer the following questions for each gage not operated and maintained by USGS or DNRC.				
1. How frequently are stage data recorded? Write "N/A" for Gage 2 if only one gage is not operated or maintained by USGS. Gage 1: _____ Gage 2: _____		<input type="checkbox"/> F		
2. If data gaps were to occur, are they identified and left unfilled or estimated using interpolation, ice correction, or indirect discharge measurements methods? a. Gage 1. _____ b. Gage 2. Write "N/A" on the line instead of answering yes or no, if only one gage is not operated or maintained by USGS or DNRC. _____		<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
3. Was the rating curve established and maintained throughout the duration of the period of record using measurements taken near the reference gage and stage recorder according to USGS protocols? a. Gage 1. _____ b. Gage 2. Write "N/A" on the line instead of answering yes or no, if only one gage is not operated or maintained by USGS or DNRC. _____		<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
4. Were requirements established and followed for maintaining a permanent gage datum and meeting specified accuracy limits? a. Gage 1. _____ b. Gage 2. Write "N/A" on the line instead of answering yes or no, if only one gage is not operated or maintained by USGS or DNRC. _____		<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F



<p>h. Do the data for one or more available stream gages meet the Department's standard to be sufficient to calculate the median of the mean monthly flow rate and volume during the proposed months of diversion?</p>	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
<p>i. If yes, record how many meet the standard, then skip to question 54 because this section is complete. _____</p>		<input type="checkbox"/> F
<p>ii. If no, answer question 24.</p>		
<p>24. If no gage data are available or if available gage data do not meet the Department's standard to be sufficient to calculate the median of the mean monthly flow rate and volume during the proposed months of diversion, is the source otherwise measured?</p>	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
<p>a. If no, measurements may be necessary. The Department cannot deem the preapplication meeting form adequately completed until the Department receives gage data and/or measurements that meet the requirements of ARM 36.12.1702 or, in combination with an approved variance request, are sufficient to complete any necessary technical analyses or scientific credibility reviews and to evaluate the applicable criteria. Skip to question 25.</p>		
<p>b. If yes,</p>		
<p>i. Submit available measurements to the Department.</p>	<input type="checkbox"/> S	<input type="checkbox"/> F
<p>ii. Who collected the measurements? _____</p>	<input type="checkbox"/> A	<input type="checkbox"/> F
<p>iii. With what method were the data collected? _____</p>	<input type="checkbox"/> A	<input type="checkbox"/> F
<p>iv. What is the period of record? _____</p>		<input type="checkbox"/> F
<p>v. What is the frequency of measurement? _____</p>		<input type="checkbox"/> F
<p>vi. Are there gaps in the data?</p>	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F



1. If yes, what is the nature of the gaps and how are gaps handled to ensure data quality? <hr/> <hr/> <hr/>		<input type="checkbox"/> A	<input type="checkbox"/> F
vii. Is there a process for maintaining the data and meeting specified accuracy limits?		<input type="checkbox"/> Y	<input type="checkbox"/> N
1. If yes, explain. <hr/> <hr/> <hr/>		<input type="checkbox"/> A	<input type="checkbox"/> F
viii. Do available measurement data meet the Department's standard to be sufficient to calculate the median of the mean monthly flow rate and volume during the proposed months of diversion?		<input type="checkbox"/> Y	<input type="checkbox"/> N
1. If yes, this section is complete. Skip to question 54.			
2. If no, answer question 25.			
25. Do the available measurement data, gage and/or otherwise measured, meet the Department's standard of including a minimum of high, moderate, and low flows to be sufficient to use for validation of a Department-accepted estimation technique?		<input type="checkbox"/> Y	<input type="checkbox"/> N
a. If yes,			
i. Describe how the measurements are representative of high, moderate, and low flows. <hr/> <hr/> <hr/>		<input type="checkbox"/> A	<input type="checkbox"/> F
ii. Describe the estimation technique. <hr/> <hr/> <hr/>		<input type="checkbox"/> A	<input type="checkbox"/> F
b. If no, but a Department-accepted estimation technique will be appropriate for the source:			



i. Will measurements be collected prior to submission of Form 600P-B that meet the Department's standard of including a minimum of high, moderate, and low flows to be sufficient to use for calibration of a Department-accepted estimation technique?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
1. If yes,		
a. With what method will the data be collected? <hr/> <hr/>	<input type="checkbox"/> A	<input type="checkbox"/> F
b. What will be the interval of measurement? <hr/>	<input type="checkbox"/> F	
c. Describe the proposed estimation technique. <hr/> <hr/> <hr/> <hr/>	<input type="checkbox"/> A	<input type="checkbox"/> F
2. If no, do you plan on requesting a variance from measurement requirements pursuant to ARM 36.12.1702(1)(b)? If you plan to request a variance, you must submit Form 653 on or before the Variance Request Deadline. The Department cannot deem the preapplication meeting form adequately completed until the Department receives measurements that meet the requirements of ARM 36.12.1702(1)(b) or, in combination with an approved variance request, are sufficient to complete any necessary technical analyses or scientific credibility reviews and to evaluate the applicable criteria.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
c. If no, because no Department-accepted estimation technique will be appropriate for the source:		
i. Describe why no Department-accepted estimation technique is appropriate for the source characteristics. <hr/> <hr/> <hr/>	<input type="checkbox"/> A	<input type="checkbox"/> F
ii. Do the available measurement data, gage and/or otherwise measured, meet the Department's standard for monthly measurements throughout the proposed period of diversion pursuant to ARM 36.12.1702(4)?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F



1. If no, will measurements be collected prior to submission of a completed Form 600P that meet the Department's standard of monthly measurements throughout the proposed period of diversion?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
a. If yes, with what method will the data be collected? _____ _____	<input type="checkbox"/> A	<input type="checkbox"/> F
b. If no, do you plan on requesting a variance from measurement requirements pursuant to ARM 36.12.1702(4)? If you plan to request a variance, you must submit Form 653 on or before the Variance Request Deadline. The Department cannot deem the preapplication meeting form adequately completed until the Department receives measurements that meet the requirements of ARM 36.12.1702(4) or, in combination with an approved variance request, are sufficient to complete any necessary technical analyses or scientific credibility reviews and to evaluate the applicable criteria.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F

Surface Water Analysis: Ephemeral

Applicable Not Applicable

26. Did you elect for the Department to conduct the Technical Analyses?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
a. If yes, do you have climate or drainage area data you would like the Department to consider during Technical Analyses?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
i. If yes, submit this information to the Department. _____ _____ _____	<input type="checkbox"/> S	<input type="checkbox"/> F
b. If no,		
i. Describe the estimation technique you propose to use to estimate physical availability at the point of diversion. _____ _____ _____	<input type="checkbox"/> A	<input type="checkbox"/> F
ii. What is the net annual precipitation? Include the source of this information. _____ _____ _____	<input type="checkbox"/> A	<input type="checkbox"/> F



iii. What is the drainage area upstream of the point of diversion and how was this figure calculated? <hr/> <hr/> <hr/>	<input type="checkbox"/> A	<input type="checkbox"/> F
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Surface Water Analysis: Lakes

Applicable Not Applicable

27. Has the lake volume been quantified by a qualified entity based on bathymetric data?	<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
a. If yes, provide this information to DNRC.	<input type="checkbox"/> S		
b. If no, answer the following questions,			
i. When do you plan to collect this information? <hr/> <hr/>	<input type="checkbox"/> F		
ii. What data collection method will you use? <hr/> <hr/>	<input type="checkbox"/> A	<input type="checkbox"/> F	

Surface Water Analysis: Other

Applicable Not Applicable

28. Explain why the source type is "other". <hr/> <hr/>	<input type="checkbox"/> A	<input type="checkbox"/> F	
29. Have you measured the source?	<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
a. If yes, answer the following questions,			
i. With what method was the measurement data collected? <hr/> <hr/>	<input type="checkbox"/> A	<input type="checkbox"/> F	

ii. What is the measurement interval? _____		<input type="checkbox"/> F
1. Does the interval meet the Department's standard for monthly measurements throughout the proposed period of diversion pursuant to ARM 36.12.1702(4)? a. If no, do you plan on requesting a variance from measurement requirements pursuant to ARM 36.12.1702(4)? If you plan to request a variance, you must submit Form 653 on or before the Variance Request Deadline.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
b. If no, i. When do you plan to measure? _____		<input type="checkbox"/> F
ii. What data collection method will be used? _____ _____	<input type="checkbox"/> A	<input type="checkbox"/> F
iii. Do you plan on requesting a variance from measurement requirements pursuant to ARM 36.12.1702(4)? If you plan to request a variance, you must submit Form 653 on or before the Variance Request Deadline. The Department cannot deem the preapplication meeting form adequately completed until the Department receives measurements that meet the requirements of ARM 36.12.1702(4) or, in combination with an approved variance request, are sufficient to complete any necessary technical analyses or scientific credibility reviews and to evaluate the applicable criteria.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F

Area of Potential Impact Analysis

No additional information needed for Technical Analyses.



GROUNDWATER

Applicable, move on to question 30. **Not Applicable**, skip to question 54.

The following questions are mandatory for groundwater permit applications and must be filled out before the Preapplication Meeting Form is determined to be complete.

Groundwater Analysis for Permits

Questions, Narrative Responses, and Tables		Check-boxes	Follow-up		
30. What is the type of groundwater diversion?		<input type="checkbox"/> A	<input type="checkbox"/> F		
Well/Pumping Pit	Answer questions 31 to 35	Developed Spring	Answer question 36	Pond	Answer questions 37 to 39

Groundwater Analysis for Permits: Well/Pumping Pit

Applicable Not Applicable

31. Per ARM 36.12.121 a 24- or 72-hour aquifer test is required; do you propose not to conduct the test? An 8-hour test will be required, if no aquifer test is completed.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
a. If yes, explain. The Department will let you know if the request is reasonable and identify additional data needs. _____ _____ _____ _____	<input type="checkbox"/> A	<input type="checkbox"/> F

32. Submit Aquifer Test Data Form (Form 633). If a variance is requested, Form 633 must be submitted on or before the Variance Request Deadline. If no variance is requested, Form 633 is due by the time the preapplication meeting form is complete but may be submitted earlier. However, if the Department determines a variance is needed and the Variance Request Deadline has passed, to submit the Form 653 you must reschedule the preapplication meeting or submit the application without expedited fees and timelines (ARM 36.12.1302(6)).	<input type="checkbox"/> S	<input type="checkbox"/> F
33. Submit the Aquifer Testing Addendum (Form 600/606-ATA) and associated materials (e.g., well logs). If you request a variance, Form 600/606-ATA must be submitted on or before the Variance Request Deadline. If no variance is requested, Form 600/606-ATA is due by the time the preapplication meeting form is complete but may be submitted earlier. However, if the Department determines a variance is needed and the Variance Request Deadline has passed, to submit the Form 653 you must reschedule the preapplication meeting or submit the application without expedited fees and timelines (ARM 36.12.1302(6)).	<input type="checkbox"/> S	<input type="checkbox"/> F
34. Are you requesting a variance from ARM 36.12.121? If you are unsure if a variance request will be needed, mark follow-up and answer this question once Form 600/606-ATA and Form 633 are complete. A variance must be requested by the Variance Request Deadline.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
<p>a. If yes, submit Form 653, Form 600/606-ATA, and Form 633 together on or before the Variance Request Deadline.</p> <p>b. If no, you may choose to submit Form 600/606-ATA and Form 633 before the Variance Request Deadline, and the Department will review these two forms. However, if the Department determines a variance is needed after the Variance Request Deadline, to submit the Form 653 you must reschedule the preapplication meeting or submit the application without expedited fees and timelines (ARM 36.12.1302(6)).</p>	<input type="checkbox"/> S	<input type="checkbox"/> F
35. Have all proposed wells/pumping pits been constructed?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
a. If no, answer the following questions:		
i. Submit a list of the POD IDs for all wells/pumping pits and mark whether they have or have not been constructed.	<input type="checkbox"/> S	<input type="checkbox"/> F
ii. When will all proposed wells/pumping pits be constructed?		<input type="checkbox"/> F
iii. Is the requested volume for each proposed well/pumping pit known?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
1. If yes, list the flow rate and volume requested for each proposed well/pumping pit. Label with POD ID.	<input type="checkbox"/> A	<input type="checkbox"/> F
<hr/> <hr/> <hr/>		

2. If no, what is the total requested volume (AF) and the number of proposed PODs? <hr/>	<input type="checkbox"/>	<input type="checkbox"/> F
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Groundwater Analysis for Permits: Developed Spring

Applicable Not Applicable

36. Have you measured the source?	<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
a. If yes, submit the measurements and answer the following questions,	<input type="checkbox"/> S	<input type="checkbox"/> F	
i. Do you have flow rate (GPM or CFS) and volume measurements?	<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
ii. With what method were measurements collected? <hr/> <hr/>	<input type="checkbox"/> A	<input type="checkbox"/> F	
iii. What is the interval of measurements? <hr/>			<input type="checkbox"/> F
iv. Is the interval of measurements sufficient to comply with ARM 36.12.1703(1)?	<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
b. If no, or if measurements do not comply with ARM 36.12.1703(1), answer the following questions. The Department cannot deem the preapplication meeting form adequately completed until the Department receives measurements that meet the requirements of ARM 36.12.1703(1). Variances from ARM 36.12.1703(1) are not allowed.			
i. When do you plan to measure? <hr/>			<input type="checkbox"/> F
ii. With what method and at what interval will measurements be collected? <hr/> <hr/>	<input type="checkbox"/> A	<input type="checkbox"/> F	



Groundwater Analysis for Permits: Pond

Applicable Not Applicable

37. Submit Form 653 to apply for a variance from ARM 36.12.121 for the Aquifer Test on or before the Variance Request Deadline.	<input type="checkbox"/> S	<input type="checkbox"/> F
38. Submit pond bathymetry data, survey, or engineering plans to the Department.	<input type="checkbox"/> S	<input type="checkbox"/> F
39. Is the pond fed or drained by surface water?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
a. If yes,		
i. Explain.	<input type="checkbox"/> A	<input type="checkbox"/> F
ii. Submit measurements of the connected surface water source. These may include inflow and outflow measurements.	<input type="checkbox"/> S	<input type="checkbox"/> F

Surface Water Depletion Analysis

40. Is the type of groundwater diversion for your proposed project a developed spring? If yes, skip to question 45 because this section is complete. If no, move onto question 41.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
41. Is the type of groundwater diversion for your proposed project a pond? If yes, answer question 41.a, then skip to question 45 because this section is complete. If no, move onto question 42.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
a. Will any of the ponds have diversions for out-of-pond use that differ from, if year-round use, an allocation of diverted volume by the number of days in the month, or, if irrigation/lawn and garden use, the 80% dry year net irrigation requirement (IWR, NRCS 2003)?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
i. If yes, provide a schedule of the diversions for out-of-pond use in the table below. Use the same POD # as the project map (question 2). Attach any additional schedules with POD # labeled.	<input type="checkbox"/> A	<input type="checkbox"/> F

POD #			
Month	Diversions for Out-of-Pond Use Volume (AF)	Month	Diversions for Out-of-Pond Use Volume (AF)
January		July	
February		August	
March		September	
April		October	
May		November	
June		December	



42. What is the flow rate (GPM or CFS), volume (AF), and period of diversion required (MM/DD-MM/DD) at each well/pumping pit? What is the well/pumping pit depth (FT), if available, or estimated well/pumping pit depth (FT). Please use the same POD # as the project map (question 2) to match this information with the location information.							<input type="checkbox"/> A	<input type="checkbox"/> F
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POD #	Flow Rate			Volume AF	Period of Diversion MM/DD-MM/DD	Depth FT	Measured or Estimated
	Flow Rate	GPM	CFS				
		<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>				

43. Will any of the <i>new</i> wells/pumping pits have a monthly pumping schedule that differs from, if year-round use, an allocation of diverted volume by the number of days in the month, or, if irrigation/lawn and garden use, the 80% dry year net irrigation requirement (IWR, NRCS 2003)?							<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
a. If yes, provide the alternative pumping schedule(s) in the table below. Use the same POD # as the project map (question 2). Attach any additional pumping schedules with POD # labeled.							<input type="checkbox"/> A	<input type="checkbox"/> F	

POD #	POD #							
	Month	Volume (AF)	Month	Volume (AF)	Month	Volume (AF)	Month	Volume (AF)
January		July			January		July	
February		August			February		August	
March		September			March		September	
April		October			April		October	
May		November			May		November	
June		December			June		December	

44. Will one or more <i>existing</i> wells/pumping pits be used for the proposed project?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
a. If yes, will any of the <i>existing</i> wells/pumping pits have a monthly pumping schedule, before or after the proposed project, that differs from an allocation of diverted volume by the number of days in the month (if year-round use) or the 80% dry year net irrigation requirement (if irrigation/lawn and garden use) (IWR, NRCS 2003)?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
i. If yes, provide the pumping schedules before and after the proposed project in the table below. Use the same POD # as the project map (question 2). Attach any additional pumping schedules with POD # and before/after proposed project labeled.	<input type="checkbox"/> A	<input type="checkbox"/> F

Before proposed project: POD #		After proposed project: POD #	
Month	Volume (AF)	Month	Volume (AF)
January		July	
February		August	
March		September	
April		October	
May		November	
June		December	
January		January	
February		February	
March		March	
April		April	
May		May	
June		June	
July		July	
August		August	
September		September	
October		October	
November		November	
December		December	

Surface Water Analysis of Depleted Surface Water

45. Based on the preliminary net depletion data provided by the Department at this preapplication meeting, what are the hydraulically connected surface water source(s)? <i>*Net depletion data provided by the Department at the preapplication meeting is preliminary and is subject to change during Technical Analyses. If the source or location of net depletion data changes during Technical Analyses, then surface water analysis of depleted surface water source(s) will reflect the Technical Analyses; this will not constitute a change of any element to the proposed application pursuant to ARM 36.12.1302(6)(a).</i> If the type of groundwater diversion for your proposed project is a developed spring, write "NA" and skip to question 51 because this section is complete.	<input type="checkbox"/> A	<input type="checkbox"/> F
46. Answer the questions in this section one time for each hydraulically connected source. Use the "Additional Hydraulically Connected Source (600P)" sheet, as necessary. For which hydraulically connected source are you answering questions 47 to 50? _____		<input type="checkbox"/> F
47. Are stream gage data available?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
a. If yes, answer question 48.		
b. If no, answer question 49.		

48. Stream gage data are available		
a. Is one stream gage located above and one stream gage located below the start of the depleted reach?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
i. If no, is only one stream gage located near the start of the depleted reach?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
1. If yes, is the stream gage upstream or downstream? _____		<input type="checkbox"/> F
b. List the gage name(s). Write "N/A" for Gage 2 if one gage available. Gage 1: _____ Gage 2: _____		<input type="checkbox"/> F
c. What is the distance between the gage(s) and the start of the depleted reach? Write "N/A" for Gage 2 if one gage available. Gage 1: _____ Gage 2: _____		<input type="checkbox"/> F
d. Is there a limiting or controlling factor on the source between the stream gage(s) and the start of the depleted reach? This includes dams that control the flow and streams with large gaining and/or losing reaches. If you have questions about this, the Regional Office may provide assistance. i. If yes, explain. _____ _____	<input type="checkbox"/> A	<input type="checkbox"/> F
e. How long is the period of record? Write "N/A" for Gage 2 if one gage is available. Gage 1: _____ Gage 2: _____		<input type="checkbox"/> F
f. Who operates and maintains the gage(s)? Write "N/A" for Gage 2 if one gage is available. Gage 1: _____ Gage 2: _____		<input type="checkbox"/> F
g. Is each available stream gage operated and maintained by USGS or DNRC? i. If yes, skip to question 48.h. ii. If no, answer the following questions for each gage not operated and maintained by USGS or DNRC.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F

1. How frequently is stage data recorded? Write "N/A" for Gage 2 if only one gage is not operated or maintained by USGS. Gage 1: _____ Gage 2: _____		<input type="checkbox"/> F
2. If data gaps were to occur, are they identified and left unfilled or estimated using interpolation, ice correction, or indirect discharge measurements methods? a. Gage 1. _____ b. Gage 2. Write "N/A" on the line instead of answering yes or no, if only one gage is not operated or maintained by USGS or DNRC. _____	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
3. Was the rating curve established and maintained throughout the duration of the period of record using measurements taken near the reference gage and stage recorder according to USGS protocols? a. Gage 1. _____ b. Gage 2. Write "N/A" on the line instead of answering yes or no, if only one gage is not operated or maintained by USGS or DNRC. _____	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
4. Were there requirements for maintaining a permanent gage datum and meeting specified accuracy limits? a. Gage 1. _____ b. Gage 2. Write "N/A" on the line instead of answering yes or no, if only one gage is not operated or maintained by USGS or DNRC. _____	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
h. Do the data for one or more available stream gages meet the Department's standard to be sufficient to calculate the median of the mean monthly flow rate and volume during the months with net depletions? i. If yes, record how many meet the standard, then skip to question 54 because this section is complete. _____ ii. If no, answer question 49.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
49. If no gage data are available or if available gage data do not meet the Department's standard to be sufficient to calculate the median of the mean monthly flow rate and volume during the months with net depletions, is the source otherwise measured?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F

a. If no, measurements may be necessary. The Department cannot deem the preapplication meeting form adequately completed until the Department receives gage data and/or measurements that meet the Department's measurement standards or, in combination with an approved request to deviate from the Department's standards, are sufficient to complete any necessary technical analyses or scientific credibility reviews and to evaluate the applicable criteria. Skip to question 50.		
b. If yes,		
i. Submit measurements to the Department.	<input type="checkbox"/> S	<input type="checkbox"/> F
ii. Who collected the measurements? _____	<input type="checkbox"/> A	<input type="checkbox"/> F
iii. With what method was the data collected? _____	<input type="checkbox"/> A	<input type="checkbox"/> F
iv. What is the period of record? _____		<input type="checkbox"/> F
v. What is the frequency of measurement? _____		<input type="checkbox"/> F
vi. Are there gaps in the data? 1. If yes, what is the nature of the gaps and how are gaps handled to ensure data quality? _____	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
vii. Is there a process for maintaining the data and meeting specified accuracy limits? 1. If yes, explain. _____	<input type="checkbox"/> A	<input type="checkbox"/> F
viii. Do available measurement data meet the Department's standard to be sufficient to calculate the median of the mean monthly flow rate and volume during the months with net depletions? 1. If yes, this section is complete. Skip to question 54. 2. If no, answer question 50.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F



50. Do the available measurement data, gage and/or otherwise measured, meet the Department's standard of including a minimum of high, moderate, and low flows to be sufficient to use for calibration of a Department-accepted estimation technique?	<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
a. If yes,			
i. Describe how the measurements are representative of high, moderate, and low flows.	<input type="checkbox"/> A	<input type="checkbox"/> F	

ii. Describe the estimation technique.	<input type="checkbox"/> A	<input type="checkbox"/> F	

b. If no, but a Department-accepted estimation technique will be appropriate for the hydraulically connected surface water source:			
i. Will measurements be collected prior to submission of a completed Form 600P-B that meet the Department's standard of including a minimum of high, moderate, and low flows to be sufficient to use for calibration of a Department-accepted estimation technique?	<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
1. If yes,			
a. With what method will the data be collected?	<input type="checkbox"/> A	<input type="checkbox"/> F	

b. What will be the interval of measurement?	<input type="checkbox"/> F		



<p>c. Describe the proposed estimation technique.</p> <hr/> <hr/> <hr/> <hr/>		<input type="checkbox"/> A	<input type="checkbox"/> F
<p>2. If no, do you plan on requesting to deviate from the Department's standard of including a minimum of high, moderate, and low flows to be sufficient to use for calibration of a Department-accepted estimation technique? The Department's technical analyses or scientific credibility review of your technical analyses cannot commence until the Department receives measurements that meet Department measurement standards, or in combination with a request to deviate, are sufficient to complete any necessary technical analyses or scientific credibility reviews and to evaluate the applicable criteria.</p>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
<p>c. If no, because no Department-accepted estimation technique will be appropriate for the hydraulically connected surface water source:</p> <p>i. Describe why no Department-accepted estimation technique is appropriate for the source characteristics.</p> <hr/> <hr/> <hr/>		<input type="checkbox"/> A	<input type="checkbox"/> F
<p>ii. Do the available measurement data, gage and/or otherwise measured, meet the Department's standard for monthly measurements throughout the months with net depletions?</p> <p>1. If no, will measurements be collected prior to submission of a completed Form 600P that meet the Department's standard of monthly measurements throughout the months with net depletions?</p> <p>a. If yes, with what method will the data be collected?</p> <hr/> <hr/>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F



<p>b. If no, do you plan on requesting to deviate from the Department's standard for monthly measurements throughout the months with net depletions? The Department's technical analyses or scientific credibility review of your technical analyses cannot commence until the Department receives measurements that meet Department measurement standards, or in combination with a request to deviate, are sufficient to complete any necessary technical analyses or scientific credibility reviews and to evaluate the applicable criteria.</p>	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
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Area of Potential Impact Analysis of Depleted Surface Water

All information for area of potential impact of depleted surface water was collected in previous questions.

Hydrogeologic Report

<p>51. Does your project include one or more wells, pumping pits, or ponds that are in a basin closure area? If yes, fill out questions 52 to 53. Your project must have a Hydrogeologic Report that conforms with § 85-2-361 to comply with the requirements of § 85-2-360, MCA. A Hydrogeologic Report Addendum (Form 600-HRA) or Department Technical Analyses may be used to meet these requirements.</p>	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
<p>52. Did you elect in question 1 for the Department to conduct the Technical Analyses?</p> <p>a. If yes, the Basin Closure Area Addendum (Form 600-BCA), Form 600-HRA, and Hydrogeologic Report are not required at this time. The Department's Technical Analyses will meet requirements of §85-2-360, MCA for a Hydrogeologic Report and Form 600-HRA. Form 600-BCA will be required with application submittal.</p> <p>b. If no, submit the Basin Closure Area Addendum (Form 600-BCA) and Hydrogeologic Report Addendum (600-HRA) with your Technical Analyses.</p>	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
<p>53. If the Hydrogeologic Report indicates that the proposed groundwater use will impact a surface water source, identify and explain which of the following three options best describes your plan to mitigate depletions of hydraulically connected surface water and respond to the relevant questions below.</p> <p><input type="checkbox"/> Application to Change a Water Right to mitigate the adverse effects created <input type="checkbox"/> Alternative mitigation plan <input type="checkbox"/> Documentation to show a mitigation plan is not required</p>	<input type="checkbox"/> S	<input type="checkbox"/> F
<p>a. Application to Change a Water Right to mitigate the adverse effects created: Submit a summary of your initial proposal. <i>A separate Preapplication Meeting will be required for each Application to Change a Water right to a mitigation or aquifer recharge purpose to qualify for expedited timelines and reduced filing fees for the project per ARM 36.12.1302(7)(a).</i></p>	<input type="checkbox"/> S	<input type="checkbox"/> F
<p>b. Alternative mitigation plan: Submit a summary of your initial proposal.</p>	<input type="checkbox"/> S	<input type="checkbox"/> F



i. Do you propose to use water with a marketing for mitigation/aquifer recharge purpose?	<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> F
1. If yes,			
a. List the change authorization number(s) for all water rights proposed for use.	<input type="checkbox"/> A	<input type="checkbox"/> F	

b. What is the area defined for marketing for all water rights proposed for use?	<input type="checkbox"/> A	<input type="checkbox"/> F	

c. If Marketing for aquifer recharge, submit the analysis of the monthly accretions to hydraulically connected surface water(s); otherwise write "NA". _____	<input type="checkbox"/> S	<input type="checkbox"/> F	

c. Documentation to show a mitigation plan is not required: Submit all documentation.	<input type="checkbox"/> S	<input type="checkbox"/> F	



MANDATORY PROJECT-SPECIFIC QUESTIONS

The following questions are mandatory when applicable and must be filled out before the Preapplication Meeting Form is determined to be complete.

Project-Specific Questions: Controlled Groundwater Areas and Basin Closures

Questions, Narrative Responses, and Tables	Check-boxes	Follow-up
54. Does the project include one or more groundwater points of diversion located in the East Valley Controlled Groundwater Area (EVCGWA)?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
a. If yes, is the use over 35 GPM or 10 AF/YR?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
i. If no, this is the incorrect form. Use instead Form 600-EVCGWA: East Valley Controlled Groundwater Area Permit Application.		
ii. If yes, how does this project meet the specific requirements of the East Valley Controlled Groundwater Area? Include any relevant documentation.	<input type="checkbox"/> A	<input type="checkbox"/> F
b. If no, skip to question 55.		
55. Does the project include one or more groundwater points of diversion located in the Yellowstone Controlled Groundwater Area?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
a. If yes, is the proposed flow rate and volume over 35 GPM or 10 AF/YR?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
i. If no, this is the incorrect form. Use instead Form 600-YCGA: Yellowstone Controlled Groundwater Area Permit Application.		
ii. If yes, answer the remaining parts of question 55 and submit <i>Form 600 YCGA: A Yellowstone Controlled Groundwater Area Addendum Over 35 gallons per minute</i> with the application.		
1. Does the proposed use require a point of diversion with water temperature of 60 degrees Fahrenheit or more?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
2. If an application is in a basin tributary to a category 3 or 4 stream (generally in or upstream of Yellowstone National Park), submit with the application a report prepared by a qualified professional verifying that the appropriation is not hydrologically connected to surface flow that is tributary to the reserved portion of category 3 or 4 streams.		
b. If no, skip to question 56.		



<p>56. Is the project for surface water or groundwater and subject to one or more of the Controlled Groundwater Areas; administrative, Department ordered, or legislative basin closures; or compact closures listed on the Department's website (https://dhrc.mt.gov/Water-Resources/Water-Rights/Basin-Closures-Stream-Depletion-Controlled-Ground-Water-Areas) not covered in questions 54 to 55?</p>	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> F
<p>a. If yes, identify each area and describe how the proposed project meets its requirements. An application must meet the specific requirements of the Controlled Groundwater Area or closure to be accepted by the Department.</p> <hr/>	<input type="checkbox"/> A	<input type="checkbox"/> F



NON-MANDATORY QUESTIONS FOR CRITERIA ANALYSIS

The following questions are not mandatory. They should be discussed in the Preapplication Meeting, but do not need to be filled out before the Preapplication Meeting Form is determined to be complete.

Adverse Effect

61. Will the point of diversion or conveyance infrastructure be shared with one or more existing water rights?	<input type="checkbox"/> Y <input type="checkbox"/> N
a. If yes, explain how capacity of the shared point of diversion and/or conveyance infrastructure is sufficient for all water rights.	<input type="checkbox"/> A
<hr/> <hr/> <hr/> <hr/> <hr/>	

Adequate Diversion Means and Operation

62. Submit a diagram of how you will operate your system from the point of diversion to the place of use.	<input type="checkbox"/> S
63. Describe specific information about the capacity of the diversionary structure(s). This may include, where applicable: pump curves and total dynamic head calculations, headgate design specifications, and dike or dam height and length.	<input type="checkbox"/> A
<hr/> <hr/> <hr/> <hr/> <hr/>	



<p>64. Describe the size, materials, capacity, and configuration of infrastructure to convey water from point of diversion to place of use. This may include but is not limited to, pipelines and ditches. Include a description of any losses related to the proposed conveyance. Ditch conveyance losses may be estimated numerous ways, which include a ditch loss rate or Department standard methods. You may work with the Department to estimate ditch conveyance losses but will need to provide sufficient baseline information; which includes ditch slope, dimensions, length, lining material, soil type, and location.</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<input type="checkbox"/> A
<p>65. Describe how the proposed diversion and conveyance infrastructure can provide the required flow and volume, for the purposes plus any conveyance losses and storage, throughout the proposed period of diversion.</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<input type="checkbox"/> A
<p>66. Provide a plan of operations, which includes specific information about how water is delivered within the place of use. This may include, where applicable, the range of flow rates needed for a pivot.</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<input type="checkbox"/> A



67. Does the proposed conveyance require easements?	<input type="checkbox"/> Y <input type="checkbox"/> N
a. If yes, explain. <hr/> <hr/> <hr/>	<input type="checkbox"/> A
68. Do you own the land where all proposed points of diversion are located?	<input type="checkbox"/> Y <input type="checkbox"/> N
a. If no, documentation to show you have the right to use all points of diversion located on each property you do not own will be required upon application submittal. This may include, but is not limited to, a well agreement, an easement, or permission of the party that owns the property where the proposed point(s) of diversion are located.	
69. Describe any places of storage, including whether drainage devices will be installed, and provide preliminary designs, if available. Preliminary designs will be required at application submittal. <hr/> <hr/> <hr/>	<input type="checkbox"/> A
70. Do you have any plans to measure your diversion and use?	<input type="checkbox"/> Y <input type="checkbox"/> N
a. If yes, describe the plan and the type of measurements you will take. <hr/> <hr/> <hr/>	<input type="checkbox"/> A

Beneficial Use

71. Does the Department have a standard for any of the purposes for which water is used? Department standards can be found in ARM 36.12.112 and ARM 36.12.115.	<input type="checkbox"/> Y <input type="checkbox"/> N
a. If yes, list the purposes for which the Department has a standard and note whether the proposed use falls within or outside the standard. <hr/> <hr/>	



<p>72. If no Departmental standard exists for any proposed purpose, or if any proposed purpose falls outside of Department standards, explain how the use is reasonable for that purpose.</p> <hr/> <hr/> <hr/> <hr/> <hr/>	<input type="checkbox"/> A
<p>73. Will your proposed project be subject to DEQ requirements for a public water supply (PWS) system or Certificate of Subdivision Approval (COSA)?</p>	<input type="checkbox"/> Y <input type="checkbox"/> N
<p>a. If yes,</p>	
<p>i. Have you researched or consulted with DEQ regarding those requirements?</p>	<input type="checkbox"/> Y <input type="checkbox"/> N
<p>74. Are you proposing to use surface water for in-house domestic use?</p>	<input type="checkbox"/> Y <input type="checkbox"/> N
<p>a. If yes, does a COSA exist for the proposed place of use?</p>	<input type="checkbox"/> Y <input type="checkbox"/> N
<p>i. If yes, please submit the COSA.</p>	<input type="checkbox"/> S
<p>ii. If no, have you researched or consulted with DEQ regarding their requirements?</p>	<input type="checkbox"/> Y <input type="checkbox"/> N

Possessory Interest

<p>75. Do you meet one of the exceptions to possessory interest requirements, pursuant to ARM 36.12.1802? Exceptions include cases where the application is for sale, rental, distribution, or is a municipal use, or in any other context in which water is being supplied to another and it is clear that the ultimate user will not accept the supply without consenting to the use of water on the user's place of use.</p>	<input type="checkbox"/> Y <input type="checkbox"/> N
<p>a. If yes, explain.</p> <hr/> <hr/> <hr/> <hr/>	<input type="checkbox"/> A

b. If no,	
i. Do you own all proposed places of use?	<input type="checkbox"/> Y <input type="checkbox"/> N
1. If no,	
a. Explain. Documentation that shows you either have possessory interest or written permission of the parties with possessory interest of the place of use will be required at application submittal.	<input type="checkbox"/> A
<hr/> <hr/> <hr/>	
b. Would you like the water right to be appurtenant to the land? Please note that if your water right is not appurtenant to land it will not transfer by default with the conveyance of the property, pursuant to § 85-2-403.	<input type="checkbox"/> Y <input type="checkbox"/> N
i. If no, explain.	<input type="checkbox"/> A
<hr/> <hr/> <hr/>	

Non-Mandatory Project Specific Questions

Place of Storage

76. Does the proposal include at least one place of storage? If yes, answer questions 77 to 80 for each individual place of storage (use "Additional Place of Storage (600P)" sheet for additional places of storage). A Permit Storage Addendum (Form 600-SA) will be required at application submittal. If no, this section is complete, and you can skip to question 81.	<input type="checkbox"/> Y <input type="checkbox"/> N
77. Are preliminary designs available? Preliminary designs will be required at application submittal.	<input type="checkbox"/> S
a. If yes, submit preliminary designs.	<input type="checkbox"/> Y <input type="checkbox"/> N
78. Will the place of storage be lined?	<input type="checkbox"/> Y <input type="checkbox"/> N
79. What is the annual net evaporation of water from the place of storage, based on the Department's gridded net evaporation layer? If you propose a different method, attach an explanation and justification of the method.	A
<hr/>	



80. Is the place of storage capacity calculated to be greater than 50 AF?	<input type="checkbox"/> Y <input type="checkbox"/> N
a. If yes, have you made an application to the DNRC Water Operations Bureau for a determination of whether the dam or reservoir is a high-hazard dam? This will be required by application submittal.	<input type="checkbox"/> Y <input type="checkbox"/> N

Project-Specific Questions: Water Marketing

81. Does the proposal include water marketing? If yes, please answer the questions in this section (questions 82 to 85). A Water Marketing Addendum Purpose Addendum (600/606-WMA) will be required at application submittal. If no, this section is complete.	<input type="checkbox"/> Y <input type="checkbox"/> N
82. For what purpose(s) will the marketed water be used? _____ _____ _____	<input type="checkbox"/> A
83. How will you control or limit access to the water? _____ _____ _____	<input type="checkbox"/> A
84. Do you have contracts for the entire volume and flow rate sought?	<input type="checkbox"/> Y <input type="checkbox"/> N
85. Provide a service area map. Create map on an aerial photograph or topographic map and show the following: general service area boundary, section corners, township and range, scale bar, and north arrow.	<input type="checkbox"/> S



FOLLOW-UP

The tables below will identify all questions marked for follow-up. Applicant follow-up will be submitted with the completed Preapplication Meeting Form: Part B (Form 600P-B). Applicant will provide all responses to questions marked for follow-up on a separate document entitled "Follow-up Responses." At the preapplication meeting, the Department may offer to provide the Applicant with information pertinent to identified follow-up. In this case, record in the notes column what information the Department will provide and the date by which the Department will email this information to the Applicant. This information will supplement but not replace Applicant follow-up. It is the responsibility of the Applicant to provide all follow-up, including questions supplemented by Department information, in the "Follow-up Responses" document.

The “Follow-up Responses” document must conform to the following standards. Label all responses with the question number. Answer questions in the same format as the form. For responses in the form of checkboxes, write “Y”, “N”, “S”. Constrain narrative responses to the specific question as is asked on the form; do not respond to multiple questions in one narrative. Label units in narrative responses and tables. Tables must have the exact headings found on the form. Questions that require items to be submitted to the Department may be marked “S” when the required item is attached to the Preapplication Meeting Form. Label all submitted items with the question number for which they were submitted.

The Applicant may not alter the Preapplication Meeting Form: Part A (Form 600P-A) signed at the Preapplication Meeting. Instead, the Applicant must use the Amended Responses procedure defined in Form 600P-B. Do not include additional information for questions that were not marked for follow-up on this table; instead include any additional information pursuant to the process for amending responses defined in Form 600P-B.



PREAPPLICATION MEETING AFFIDAVIT & CERTIFICATION

"We attest that the information on this form accurately describes the proposed project discussed during the preapplication meeting, and that the items marked for follow-up will require the Applicant to provide additional information before the form is deemed complete."

"Applicant acknowledges that any information provided by the Department during the preapplication meeting is preliminary and subject to change."

"Applicant acknowledges that if the follow-up information provided to the Department substantially changes the proposed project, for example in a way that alters which sections of the form are applicable or which technical analyses are required, or who is to complete the technical analyses, the applicant will need to schedule a new preapplication meeting so that the Department can identify any additional information necessary for completion of the technical analyses (ARM 36.12.1302(3)(c))."

Upon Department receipt of the completed form (within 180 days following the meeting), the Department reserves five business days to return the form to the applicant if:

- 1 – the completed form does not include all necessary follow-up information identified in the meeting, OR
- 2 – the completed form is not adequate for the Department to proceed with technical analyses, OR
- 3 – the applicant has elected to complete technical analyses and has not submitted each piece of technical analysis required, OR
- 4 – the applicant has substantially changed the details of the proposed project, such as in a way that alters which sections of the form are applicable, which technical analyses are required, or who is to complete the technical analyses.

If the Department returns the form to the Applicant within these five days due to reasons 1-3 above, the Applicant can use the balance of their 180-day period in ARM 36.12.1302(4) or (5) to gather the remaining follow-up information needed. If there is no time remaining in the 180-day period, the Applicant can submit a written request for a new preapplication meeting, pursuant to ARM 36.12.1302(2). Even if there is still time remaining, the Applicant can choose to schedule a new preapplication meeting. The Department shall transfer the \$500 payment received to the new preapplication meeting or refund the payment to the Applicant if the Applicant desires. If the Department returns the form to the Applicant within these five days due to reason (4) above, the Applicant must submit a written request for a new preapplication meeting, pursuant to ARM 36.12.1302(2). The Department shall transfer the \$500 payment received to the new preapplication meeting or refund the payment to the Applicant if the Applicant desires.

Applicant Signature

Date

Applicant Signature

Date

Department Signature

Date

