For Departmental Use Only

File No. 39- _____

Date Filed: _____

WFN _____

STATEMENT OF CLAIMANT FORM
FOR
STOCKPOND USE

LOWER GILA RIVER WATERSHED
SUPERIOR COURT OF MARICOPA COUNTY

1. **Claimant Name:** _____
   Claimant Address: _____ City _____
   State: _____ Zip Code _____ Telephone _____

2. **Basis of Claim:**
   A. ☐ Appropriation Right acquired prior to June 12, 1919. 1974 Water Rights Registration Act Registry No. _____
   B. ☐ Appropriation Right acquired after June 12, 1919. Application No. _____, Permit No. _____, or Certificate of Water Right No. _____
   C. ☐ Right acquired through the 1977 Stockponds Registration Act. Claim No. _____
   D. ☐ Decreed water right. Principal litigants, court, date and case no. _____
   _____
   E. ☐ Other, describe: _____

3. **Claimed Priority Date:** _____/_____/_____(month/day/year)

4. **Source of Water:**
   A. Stream, wash or arroyo: name _____, tributary to _____
   B. Is water supplied from a source other than natural channel flow into the stockpond?
   ☐ Yes ☐ No If yes, describe: _____

5. **Legal description of the location of the stockpond:** (attach additional sheet if required)
   _____ 1/4, _____ 1/4, _____ 1/4, Section _____ ,Township _____N/S, Range _____E/W

6. **If there are other uses supplied by the stockpond or its water source, describe:** _____
   _____

7. **Description of the Stockpond:**
   A. Name or other designation: _____
   B. Dam specifications:
      1) Date construction began: _____ and ended _____
      2) Height, _____ft.
      3) Does dam have an outlet structure other than spillway? ☐ Yes ☐ No
   C. Reservoir behind dam:
      1) Date water first stored: _____/_____/_____(month/date/year)
      2) Maximum length: _____ ft.
      3) Maximum width: _____ ft.
      4) Maximum depth of water at spillway crest: _____ ft.
      5) Maximum storage volume at spillway crest: _____ Acre-Feet

8. **Number and kind of livestock or wildlife watered by this stockpond:**
_____, for _____months per year.

9. **Attach** photographs, maps or sketches necessary to show the location of the stockpond(s) and any conveyance system and other point(s) of diversion.

10. **It may** be necessary for a representative from the Department of Water Resources to inspect the stockpond and diversion. Your signature following will grant permission to enter your property for the purpose of inspection: Signature of Claimant _____

11. **Should** it be necessary for a representative of the Department to contact you as the claimant or your representative, are there any special instructions regarding time of day or address to aid in locating the specified person? _____
_____

12. **Additional comments:** _____
_____
_____
_____
_____
_____
_____
(attach additional sheet if required)

13. **Attach Filing Fee to Form**. Mail form(s) and filing fee(s) to:

AZ DEPT OF WATER RESOURCES
ADJUDICATION SECTION
PO BOX 458
PHOENIX AZ 85001-0458

14. **Notarized Statement:**
I (We), _____
the claimant(s) named in this claim, do hereby certify under penalty of perjury, that the information contained and statements made herein are to the best of my (our) knowledge and belief true, correct and complete.

_____

_____

(seal)

_____ _____
My Commission Expires Notary Public

or, _____
Authorized Personnel of the Department of Water Resources