For Departmental Use Only

File No. 39- _____

Date Filed: _____

WFN _____

STATEMENT OF CLAIMANT FORM
FOR
OTHER USES[1]

UPPER SALT 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. ☐ Decreed water right. Principal litigants, court, date and case no. _____
   _____
   D. ☐ Right to withdraw groundwater. Grandfathered Right No. _____
   E. ☐ Other, describe: _____

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

4. **Use:**
   A. ☐ Municipal
   B. ☐ Commerical or Industrial
   C. ☐ Mining
   D. ☐ Stockwatering other than from a stockpond
   E. ☐ Recreation, Fish & Wildlife
   F. ☐ Other, describe:
   _____
   _____
   _____

5. **Source of Water:**
   A. ☐ Stream: name _____, tributary to _____
   B. ☐ Spring: name _____, tributary to _____
   C. ☐ Lake or Reservoir: name _____, tributary to _____
   D. ☐ Groundwater.

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

7. **If there are Irrigation, Domestic or Stockpond Uses also supplied from the Point of Diversion, describe:** _____

8. **Means of Diversion:**
   A. ☐ Instream pump.
   B. ☐ Gravity flow into a ditch, canal or pipeline.
   C. ☐ Well: Arizona Department of Water Resources Well Registration No. 55- _____
   D. ☐ Other, describe: _____

[1] *See Instructions for explanation of uses in this category*

9. Means of Conveyance:

A. ☐ Ditch, canal or pipeline. If the means of conveyance is owned and/or operated by some other entity, please give name and address: _____

_____

B. ☐ Other, describe: _____

10. Place of Use, if other than point of diversion: (attach additional sheet if required)

County _____

Legal Subdivision	**Section**	**Township**	**Range**
_____	_____	_____ N/S	_____ E/W
_____	_____	_____ N/S	_____ E/W

11. Claimed Right:

A. Maximum Flow Rate: _____ ☐ cubic-feet per second ☐ gallons per minute ☐ Arizona miner's inches

B. Annual Volume of Water Use: _____ acre-feet

C. Storage Right: _____ acre-feet

12. Attach photographs, maps or sketches necessary to show the point of diversion, storage resevoir(s) place(s) of use and means of conveyance.

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

14. 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? _____

_____

15. Additional comments: _____

_____

_____

_____

_____

(attach additional sheet if required)

16. 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

17. 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