

Standing Rock Sioux Tribe
Standing Rock Sioux Indian Reservation
Standing Rock Water Resources Control Board

Application for Permit

To use Waters of the Standing Rock Sioux Indian Reservation

Surface Water Ground Water Treated Water

\$5.00 PER THOUSAND GALLONS **\$7.00 per thousand gallons**

For Office Use Only

Application No	District	Date	Time	Accepted
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Applicant's Name: _____

Telephone No: _____

Address: _____

Fax No: _____

City: _____ State: _____

Zip Code: _____

1. Source of Supply: Surface Ground Water Treated other

(Name of stream, lake, spring, etc. If unnamed, so state well, tunnel, infiltration, trench, etc.)

Tributary of: _____ Size & Depth: _____

2. Use to which water is to be applied:

Domestic supply – number of homes or units: _____

Irrigation – number of acres _____

Mining

Manufacturing

Municipal – Estimated population 20 years from this date: _____

Recreation

other (explain): _____

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Cubic Feet per Second or Gallons: _____ Acre Feet per Year: _____

Per Minute () CFS () GPM

Times during year water will be required: _____

Date Project will be started: _____ Date Project will be completed: _____

3. Location of Point of Diversion/Withdrawal: _____

On accompanying plats or maps, accurately mark or identify each point of diversion.
Give measured distance and bearing, or North-South and East-West distances from nearest
section corner: _____

Located within (smallest legal section, township, N. Range (E or W), District, and Subdivision:

Allotment Number: _____

Do you own the land on which this source is located? () Yes () No

In No, Insert Name and Address of Owner: _____

4. If this is within the limits of a recorded platted property, complete this section:

Lot: _____ Block: _____ of _____
(Give name of plat of addition or allotment number)

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5. Legal description of property on which water is to be used: _____

(Copy legal description from Deed or attach copy of Deed)

(Tax statement descriptions are not acceptable)

Also outline this property on the maps or plats submitted with this application.

What is your interest in the property on which the water is to be used?

Property Owner;

Lessee;

Contract Purchaser;

Other: Explain: _____

Are there any existing water uses appurtenant to the land on which the water is to be used?

Yes - What source: _____

Under what authority: _____

No

6. The Applicant consents to and agrees to the jurisdiction of the Standing Rock Sioux Tribe, the Standing Rock Sioux Tribal Court, and the Standing Rock Sioux Water Resources Control Board for any proceedings or disputes concerning the issuance, use, or any other administrative enforcement or dispute resolution regarding the application, use and other issues regarding the regulation of water permits granted by the Standing Rock Water Resources Control Board.

7. Signatures:

Applicant's Signature: _____ Date: _____

Legal Landowner's Signature: _____ Date: _____

Legal Landowner's Address: _____

For Office Use Only
Water Administrator and/or
Water Resources Control Board

Standing Rock Sioux Tribe

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Standing Rock Water Resources Control Board

This is to certify that I have examined the foregoing application together with any accompanying maps and data, and return the same for correction or completion as follows:

In order to retain its priority, this application must be returned to the Standing Rock Water Resources Control Board with Corrections on or before:

Date: _____

Witness my hand this _____ day of _____, 2010.

Standing Rock Water Resources Control Board

P.O. Box D

Dept of Water Resources

Fort Yates, ND 58538

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(701) 854-3077 Fax