



Application to Store Water for Beneficial Use

CASHIER'S USE ONLY
0975-542-WATR-PA-0570
38-3802
Name _____

\$75⁰⁰ fee

For more information regarding the DNR Water Allocation Program, please visit: www.iowadnr.gov/Water-Use

For technical questions, contact Casey Welty at 515-725-8330.

PAY ON-LINE through your new account	PAY BY CHECK or MONEY ORDER	PAY BY CREDIT CARD without creating an online account
DNR accepts: <ul style="list-style-type: none"> • Visa • MasterCard • Discover Log onto your account. Click on the Pay Fees button.	1. Make check payable to Iowa Department of Natural Resources 2. Attach this invoice to your payment and 3. Mail invoice and fee to: IOWA DNR FLOOD PLAIN AND DAM SAFETY 502 E 9TH ST DES MOINES IA 50319-0034	Email: a copy of the invoice to Webmaster@dnr.iowa.gov with the subject line: Credit Card Payment for (Company Name) OR Fax: to 515-725-8201 Wait a minimum of 20 minutes after sending then call 515-725-8200 to make the payment.

Who will be the Permit Holder?

Business Name _____

First Name _____ Last Name _____

Address 1 _____ Address 2 _____

City _____ State _____ Zip _____

E-mail _____ Primary Phone _____

Secondary Phone _____ Fax _____

Who is the current Property Owner?

Same as Permit Holder? Yes No

Business Name _____

First Name _____ Last Name _____

Address 1 _____ Address 2 _____

City _____ State _____ Zip _____

E-mail _____ Primary Phone _____

Secondary Phone _____ Fax _____

Authorized Representative (optional)

Business Name _____

First Name _____ Last Name _____

Address 1 _____ Address 2 _____

City _____ State _____ Zip _____

E-mail _____ Primary Phone _____

Secondary Phone _____ Fax _____

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Legal Description of Land on which Water is to be Stored	Quarter	Quarter	Section	Township	Range	County Name
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ATTACH A SCALE MAP OR AERIAL PHOTO OF IMPOUNDMENT.

Impoundment Surface Area (acres)	Average Depth of Impoundment (feet)	Maximum Quantity of Permanent Storage (acre-feet)
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Purpose of Impoundment

Municipal
 Industrial
 Recreational
 Irrigation
 Erosion Control
 Other (specify) _____

Annual Storage <input type="checkbox"/> Storage throughout the year <input type="checkbox"/> Other (specify dates) → Storage of Water Estimated to Begin On: _____	Begin	End

Source of Water for Impoundment

Groundwater withdraw or surface diversion
 Dam or other structure across surface watercourse (complete the following)

Name of Watercourse	Watercourse Normally Dry on (dates):	Does watershed originate on Applicant's land?	Surface Runoff Collection Area (acres):

Certification

I certify the above information is true and correct to the best of my knowledge and that I will provide any additional information to the Department as may be requested.

The Iowa Administrative Code states that water storage permits must be approved or denied within 90 days. By signing this document, the applicant authorizes an extension in the event this application is incomplete or needs further analysis.

Signature: _____ Date: _____

If this box is checked, the applicant declines an extension and understands that this application may be denied if the application is incomplete.