



UPPER ARKANSAS
WATER CONSERVANCY
 DISTRICT

APPLICATION FOR APPROVAL OF A WATER CONSERVATION PROGRAM

Date of Application: _____

Applicant:					
Contact Name:					
Last		First		Title	
Address:					
Street Address		Apartment/Unit #	City	State	Zip Code
Phone:	()	Email Address:			
Estimated Start of Conservation:			Estimated End of Conservation:		
Name of Ditch	Ditch Company Name Or N/A	Appropriation Date, Priority Number, or Admin. Number	Amount Decreed	Amount Owned by Applicant	Amount to be conserved
Name of Tributary from which water is diverted:					
Has this water right participated in a water conservation, land fallowing or water banking program within the last 10 years? (Mark One)	No	Yes	If yes, which program, through which entity and when:		
Provide a description & location of the planned Water Conservation Program & attach map delineating the area(s) to be dried-up, distance from irrigated area to the nearest tributary to which return flows go and name of the tributary.					
<p>See The Upper Arkansas Water Conservancy District “Water Conservation Program Guidelines and Process” document for information on the background, application process describing basic requirements of eligibility and additional required information, submission information, and conditions of approval.</p> <p><u>Provide application form and all necessary documents including an application fee of \$500.00.</u></p>					

Completed applications must be received by the Upper Arkansas Water Conservancy District and can be hand-delivered, faxed, e-mailed or mailed to:

Upper Arkansas Water Conservancy District
Attention: General Manager
PO Box 1090
339 East Rainbow Blvd.
Salida, CO 81201
Phone: (719) 539-5425 - Fax: (719) 539-7579
Email: gm@uawcd.com

The Upper Ark. Wtr. Conservancy District is not responsible for lost or undelivered applications. If submitted electronically, we suggest that an automated, electronic return receipt be requested to ensure delivery.