

MOHAVE VALLEY IRRIGATION & DRAINAGE DISTRICT

1460 East Commercial Street
Mohave Valley, Arizona 86440
Phone: (928) 768-3325 • Fax: (928) 768-5239
Email: office@mvidd.net • Website: MVIDD.net

APPLICATION FOR AGRICULTURAL WATER ENTITLEMENT

INSTRUCTIONS

1. Complete Mohave Valley Irrigation & Drainage District's (the District) application.
2. Paperwork required:
 - Copy of Recorded Deed with Legal Description
 - Map of the property indicating where and what type of crop(s) are to be farmed, and depict where any structures are located on the property with a description of their use. Provide location of Diversion Point(s). (Well Location)
 - Completed **Consent to Conditions and/or Waiver of Diminution of Value** ([Only for Water Transfers](#))
3. Diversion Point(s) required:
 - ADWR Well Registration Number: 55-_____
 - Cadastral
 - Longitude & Latitude

ALL FEES ARE NON-REFUNDABLE

All required paperwork must be submitted for this application to be considered complete. If any paperwork is missing the District will not process this application.

When completed please mail or deliver to:

Mohave Valley Irrigation & Drainage District
1460 Commercial Street
Mohave Valley, AZ 86440

If you have any questions please contact the District office at 928-768-3325 or Email us at office@mvidd.net.

Part I. Applicant Information:

DATE: _____

Township, Range, Section: Township _____ Range _____ Section _____

WATER USER: Name: _____

Address: _____

Contact Name: _____

Phone No.: _____

Email: _____

PROPERTY SERVED: Address: _____

GROSS ACRES: Assessor' Amount: _____

IRRIGABLE ACRES: FSA Map amount or Gross Acres less 8%: _____

LEGAL DESCRIPTION: See Exhibit "A"

APN(S): List All: _____

DIVERSION POINT(S): Longitude: _____ Latitude: _____

Longitude: _____ Latitude: _____

Longitude: _____ Latitude: _____

Cadastral: _____

WELL SITE(S): No.: _____ No.: _____ No.: _____

WATER ENTITLEMENT: Amount Requested : _____ Acre Feet

***Any application questions:** Call the office at (928)768-3325**

Part II. Lessee Contact Information (if applicable)

Name: _____

Address: _____

Phone: _____ Fax: _____

Cell: _____ Email: _____

Correspondence to be sent to (Please Check Only One):

Owner Only: _____ Lessee Only: _____ Both: _____

PART III. Description of Property to be Farmed

Attach all Assessors' Parcel Pages for this section of land to be farmed. If you have a FSA Map also attach it.

Has any portion of this property recently been used for agricultural purposes? Yes or No

If YES, What crops are being farmed? _____

Part IV. Type of Entitlement being requested

New Water Allocation: Increase in Water Allocation: Transfer of Water Allocation:

Amount of Acre Feet of water being requested or transferred: _____

****For Transfers Only****

If this is a request for a water transfer, list the property that the current allocation is on and where the transfer of water is going to.

Currently Allocated to: Contract No.: _____

Parcel APN(S): _____

Transferring to: Contract No.: _____

Parcel APN(S): _____

Part V. Signatures

Please sign and date.

Owner (Please Print)

Signature

Date

THIS SECTION FOR MOHAVE VALLEY IRRIGATION & DRAINAGE USE ONLY

Received: _____ Reviewed: _____

Meeting Agenda: _____ Approved/Denied: _____

Comments: _____

Contract No.: _____