

REQUEST FOR EXTENSION OF TIME
TO INSTALL IDWR APPROVED FLOW METER
Please fill out one form for each affected well

Please note: This request must be approved to authorize any extension.

Owner / Operator: _____

Well / Diversion Name: _____

IDWR Site Tag No.: _____

Legal Description: _____
(ex., T6S R14E Sec. 30 NWNW)

Water District: _____
(ex., WD120, WD130, etc.)

Reporting District: _____
(ground water district, irrigation district or other entity)
(ex., Bingham Ground Water District, Southwest Irrigation District)

1. Is the request for extension of time because of non-use? _____ Yes _____ No

If Yes, please go to Question #2.

If No, please describe the reason for requesting an extension of time, then go to Question #3:

2. Is the non-use related to a federal or state program? _____ Yes _____ No

If Yes, please describe the program: _____

What date does the program contract end: _____

If No, please explain the reason for non-use: _____

3. Date requested by which the required measuring device will be installed: _____

Attach additional explanation as necessary

PLEASE PROVIDE YOUR SIGNATURE AND CONTACT INFORMATION, AND RETURN FORM TO:
IDWR WATER DISTRIBUTION SECTION
PO BOX 83720
BOISE ID 83720-0098

Name/Title

Phone number

Date

Mailing Address

E-mail Address