

PETITION FOR WATERMASTER'S SERVICES

_____, Idaho
City or County

_____, 20____
Date

TO: IDAHO DEPARTMENT OF WATER RESOURCES

RE: Water District No. _____

Water District Name (Stream/Source): _____

I, the undersigned, owner or manager of ditches or person controlling ditches in Water District No. _____, hereby request the services of the watermaster for the reason that there is a necessity for the use and control of the waters of the District.

NAME OF WATERMASTER: _____

Date watermaster services are to start: _____

If known, the date watermaster services are to terminate: _____

Water User Information:

Printed Name

Signature

Address

Telephone

E-Mail

NOTE: Watermaster cannot begin services until all conditions of his/her appointment have been fulfilled.