

Return Address:
NAME: _____
ADDRESS: _____
CITY: _____ STATE: ____ ZIP: _____



Water Resources Program Voluntary Relinquishment of Water Right

- Full Relinquishment Partial Relinquishment
 Surface Water Ground Water Reservoir

Contact Name:		Water Right Number:	
Address:			
City:		State:	Zip:
E-mail Address:		Telephone No:	Other No:

I (we) _____ am (are) the holder(s) of the above referenced water right.

- Full Relinquishment**
I (we) relinquish Water Right Number _____ to the State of Washington.
- Partial Relinquishment**
I (we) relinquish a portion of the water right described as follows (*describe quantity, purpose, place of use to be relinquished*): _____

Legal description of the place of use.

(This information may be found on a real estate contract, property deed, or title insurance policy).

Lot	Block	Section	Subdivision Name/Case No.		
1/4	1/4	Section	Twp.	Range	County
Parcel No.					

Do you own all the lands in the place of use? YES NO. If no, provide the following:

Owner(s) Name(s):		
Address (s):		
City:	State:	Zip:

The following statements are true to the best of my knowledge:

- I (we) are not aware of any changes, sales, or transfers of this water right to another party.
- I (we) have no further requirement to put to beneficial use all or the portion of the water right described above.
- I (we) agree to relinquish all or the portion of the water right described above.
- I (we) understand that based on the above information the Department of Ecology may issue an Order of Relinquishment.

Signature(s): _____

Date: ____ / ____ / ____

Date: ____ / ____ / ____

State of: _____

} §

County of: _____

I hereby certify that I know or have satisfactory evidence that _____

(Name)

is the person or persons who appeared before me, and said person(s) acknowledged that he/she signed this instrument and acknowledged it to be his/her free and voluntary act for the uses and purposes mentioned in this document.

_____ day of _____, _____

Printed Name:

My Appointment expires:

____ / ____ / ____

Notary Public Signature:

Seal
or
Stamp