WATERMASTER WATER RIGHT PERMIT APPLICATION REVIEW



Ар	plication Number:G-19344	WATER RESOURCE DEPARTMEN
Ар	plicant's Name: Todd Nelson Family LLC., BOUNTIFUL FARMS NURSERY c/o Blake Nelson	
<u>Ev</u> a	aluation of potential for injury to other water rights:	
1.	Would the proposed water allocation have the potential for injury to other water rights \blacksquare Yes \square No	?
2.	If the proposed water allocation will cause injury, can the permit be conditioned to avoid Yes ■ No □ N/A If "Yes", please list conditions necessary to avoid injury:	d injury?
Eva	aluation of appropriate Measurement, Recording and Reporting Condition:	
3.	Please select the <u>measurement device(s)</u> required for any permit issued under this appl ■ Totalizing Flow Meter □ Other/None − please describe below: □ Staff Gage	ication.
4.	Please select your recommended <u>reporting requirement</u> for any permit issued under the Please consider site-specific information, including but not limited to potential for injurrights, regulation history of the area, and level of stakeholder interest in the application. Require recording of volume of water diverted each month and require submission the Department annually. Do not require recording and reporting at this time.	y to other water
5.	Please provide any additional information or permit conditions that are necessary for the	nis application:
6.	Would you like to review a draft of any permit that might be issued under this application	on?
	☐ Yes ☐ No	
۱۸/۱	M name: Greg Wacker WM Signature Date	· 4/8/2025

Application Caseworker: Adam Frederick