WATERMASTER WATER RIGHT PERMIT APPLICATION REVIEW



| Application Number:G-19071 | WATER RESOURCE DEPARTMENT |
|---|---|
| Applicant's Name: BRIAN ZIELINSKI | |
| Evaluation of potential for injury to other water rig | hts: |
| Would the proposed water allocation have the p | otential for injury to other water rights? |
| ■ Yes □ No | |
| 2. If the proposed water allocation will cause injury | , can the permit be conditioned to avoid injury? |
| ☐ Yes ■ No ☐ N/A | |
| If "Yes", please list conditions necessary to avoid injury: | |
| | |
| Evaluation of appropriate Measurement, Recording | g and Reporting Condition: |
| 3. Please select the measurement device(s) require | ed for any permit issued under this application. |
| ■ Totalizing Flow Meter □ Other/Non- | e – please describe below: |
| ☐ Staff Gage . | |
| | |
| | |
| | <u>irement</u> for any permit issued under this application. ng but not limited to potential for injury to other water f stakeholder interest in the application. |
| Require recording of volume of water diverted the Department annually. | ed each month and require submission of a report to |
| \square Do not require recording and reporting at thi | s time. |
| 5. Please provide any additional information or per | mit conditions that are necessary for this application: |
| | |
| | |
| | |
| 6. Would you like to review a draft of any permit the | nat might be issued under this application? |
| ■ Yes □ No | |
| WM name: Greg Wacker WM Signat | ure: Date: 10/21/2025 |
| | Date: 10/21/2025 |
| Application Caseworker: <u>Amanda Mather</u> | |