

**APPLICATION FOR PERMIT TO DIVERT OR WITHDRAW
FOR BENEFICIAL USE THE PUBLIC WATERS OF THE STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY, OFFICE OF LAND AND WATER RESOURCES
P.O. BOX 2309, JACKSON, MS 39225-2309; (601) 961-5171**

This box is for office use only

Issued:	Reissue Date:	Expires:	Permit No.
Lat:	Long:	Elev:	Quad:
Permit No. of Replaced Well:		Aquifer:	FIP Well No.
STAC:	Basin No.	DOH No.	
Dam Inv. No.	Hazard Class:	DS Approval/Date:	

THIS APPLICATION IS FOR (Circle one): **NEW PERMIT** **RENEWAL – PERMIT NO.** _____
REPLACEMENT **MODIFICATION**

THIS APPLICATION IS FOR (Circle one): **GROUNDWATER – COMPLETE SECTIONS A, B, D**
SURFACE WATER – COMPLETE SECTIONS A, C, D, E

BENEFICIAL USE (Circle one or more): 1) Public Water System 2) Irrigation 3) Industrial 4) Fish Culture
5) Recreation 6) Institutional (e.g. Church, School) 7) Commercial (e.g. Hotel, Casino, Restaurant) 8) Fire Protection
9) Livestock 10) Flood Protection 11) Wildlife Management 12) Other: _____

ARE YOU REQUESTING STANDBY STATUS: **YES** **NO** (Standby status does **not** allow for withdrawal of groundwater.)

SECTION A (REQUIRED)

LANDOWNER: _____
(Name) (E-mail address)

(Address)

(City) (State & Zip) (Telephone No.) (Mobile No.)

APPLICANT, AGENT OR LESSEE (if different from Landowner):

(Name) (E-mail address)

(Address)

(City) (State & Zip) (Telephone No.) (Mobile No.)

LOCATION of diversion/withdrawal point (A suitable map with location marked **MUST** accompany this application):

Latitude: _____ Longitude: _____ (Decimal degrees with at least four significant digits)
(Example: Latitude: 32.3065, Longitude: -90.1784)

_____ ¼ of the _____ ¼ of Section _____, Township _____, Range _____, County _____

Does the land to which this application pertains have any source(s) of water other than that for which you are now applying (circle one)? **YES** **NO**
If yes, describe the nature and amount of any additional supply and, if applicable, list permit number. _____

(CONTINUED ON BACK)

SECTION B (to be completed for **GROUNDWATER SOURCE**)

1. **AQUIFER:** _____ **MS DEPARTMENT OF HEALTH NO.:** _____

2. **DESCRIPTION** of completed well:

Driller: _____ Date completed: _____

Under whose name was well originally drilled (if known)? _____

Depth of well: _____ feet

Surface Casing: Length _____ feet; Diameter _____ inches; Type _____
(PVC, steel, stainless, black iron, other)

Screen: Length _____ feet; Diameter _____ inches; Type _____
(PVC, steel, stainless, open hole, other)

Pump: Type _____ ; Capacity _____ ;
(submersible, turbine, other) (gallons per minute)

Power unit: Type _____ ; Size _____ horsepower
(electric, tractor, diesel, gasoline, butane, other)

LOCAL WELL NAME: _____

3. **PERMITTED VOLUME:**

(a) _____ acre-feet per year at a maximum of _____ gallons per minute

(b) _____ million gallons per date at a maximum rate of _____ gallons per minute

SECTION C (to be completed for **SURFACE WATER SOURCE**)

1. **SOURCE** of water is from _____ which drains into _____

which drains into _____
(major stream or river)

2. **DESCRIPTION** of pump/diversion works:

Pump: Type _____ ; Diameter _____ inches; Capacity _____ gallons per minute
(turbine, jet, other)

Power Unit: Type _____ ; Size _____ horsepower
(electric, tractor, diesel, gasoline, butane, other)

3. **PERMITTED VOLUME**

_____ acre-feet per year at a maximum of _____ gallons per minute

SECTION D WATER USE DATA (REQUIRED) – complete sections related to beneficial use)

1. **IRRIGATION:** List the number of acres of each crop to be irrigated: Rice _____; Cotton _____ ; Oats _____ ;
Corn _____ ; Soybeans _____ ; Pasture _____ ; Truck _____ ; Wheat _____ ; Grain Sorghum _____ ;
Wildlife _____ ; Other (specify) _____ total acres

(a) Method of Irrigation (circle one) – Center Pivot Flood Furrow

(b) Land Condition (circle one) - Precision Land Formed Smoothed

(c) ASCS Farm No. _____ Tract No. _____

(CONTINUED ON NEXT PAGE)

2. **FISH CULTURE:** Explain how water will be used: _____
_____ ; Reservoir acreage _____

3. **PUBLIC WATER SYSTEM**

Choose "a" or "b". (a) The number of people served is _____ or (b) The number of connections is _____ .

4. **INDUSTRIAL:** If the water is released into a watercourse, indicate the amount released each year _____ (MGD)

Rate of release _____ (MGD); NPDES Permit No. _____

Explain any changes in quality of water to be released: _____

Explain how water will be used: _____

How much groundwater will be used for once-through non-contact cooling? _____

5. **RECREATION:** Explain how water will be used: _____

6. **OTHER USE:** Explain in detail (if needed, attach another page): _____

7. **REMARKS:** _____

SECTION E (to be completed for **SURFACE WATER IMPOUNDMENTS (DAMS)** on continuously flowing streams)

1. Name of storage reservoir: _____ Dam Height _____ feet

2. Surface area at normal pool: _____ Storage capacity at normal pool: _____ acre-feet

Additional Contact Information (Agent, etc.):

(Name)

(Title)

(Address)

(City, State, ZIP)

(Telephone) (Mobile)

(E-mail address)

The **ACCOMPANYING MAP** is hereby declared a part of this application.

I hereby attest that I am duly authorized and have legal capacity to execute and deliver this application and the information provided is accurate to the best of my ability.

(Print Name)

(Title)

(Signature/Date)