



# MARYLAND DEPARTMENT OF THE ENVIRONMENT

Water and Science Administration – Water Supply Program

1800 Washington Blvd, Baltimore MD 21230

410-537-3590 \* 1-800-633-6101 \* fax 410-537-3157

## APPLICATION TO APPROPRIATE AND USE WATERS OF THE STATE FOR AGRICULTURAL PURPOSES

Type of Application	<input type="checkbox"/> New	<input type="checkbox"/> Renewal	<input type="checkbox"/> Modification	Existing Permit Number:
<input type="checkbox"/> Required Permit (10,000 gallons per day or more averaged over a year)				
<input type="checkbox"/> Voluntary Permit (less than 10,000 gallons per day averaged over a year)				

### APPLICANT INFORMATION *(Person/Entity to whom permit will be issued)*

Name:		Contact name:		
Mailing address:				
City:		State:		Zip Code:
Phone:	Mobile:		Fax:	
Email:				
The applicant is the: <input type="checkbox"/> Water User <input type="checkbox"/> Land Owner <input type="checkbox"/> Both				
If applicant is the water user, is this a lease agreement? <input type="checkbox"/> Yes <input type="checkbox"/> No Lease ends (year):				
If applicant is the land owner, will the land be leased to another person/entity? <input type="checkbox"/> Yes <input type="checkbox"/> No Lease ends (year):				
Permit is to be issued to <input type="checkbox"/> Individual <input type="checkbox"/> Business				

### LAND/PROPERTY OWNER INFORMATION *(IF DIFFERENT FROM APPLICANT)*

Name:				
Mailing Address:				
City:		State:		Zip Code:
Phone:	Mobile:		Fax:	
Email:				

### WATER USE *(Please check all that apply; attach additional sheets if necessary)*

<input type="checkbox"/> Field crop irrigation	Total number of irrigated acres:	Farm Name:		
Crop type:	Number of irrigated acres:	Type of irrigation system (center pivot, travelling gun, drip, etc.):	Crop yield goal:	
Do you practice double-cropping? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate crops:				
<input type="checkbox"/> Vegetable irrigation	Type(s) of vegetables:			
	Number of irrigated acres:			
<input type="checkbox"/> Livestock watering	Number and type of livestock:			
<input type="checkbox"/> Poultry watering	Type of poultry (broilers, roasters, layers, turkeys, etc.):			
	Number of houses:	Number of birds/flock:	Number of flocks/yr:	
Cooling system <input type="checkbox"/> Yes <input type="checkbox"/> No Check type(s) <input type="checkbox"/> Evaporative cooling pad <input type="checkbox"/> Fogger				
<input type="checkbox"/> Aquaculture				
<input type="checkbox"/> Horticultural operation	Type:			
<input type="checkbox"/> Other (Specify)				

**LOCATION OF WITHDRAWAL (Attach additional sheets if necessary)**

Street address and/or location description:

Town/City:

County:

Tax map/grid/parcel/lot:

Lat/Long:

*Please attach a map showing the existing and proposed water withdrawal locations (wells, ponds, streams, etc.)**Please attach a map showing the proposed irrigation layout.***GROUNDWATER SOURCE(S) (Attach additional sheets if necessary)**Source (check all that apply)  Well  Spring  Groundwater Pond  Other (describe)

Total no. of wells:

No. of new wells:

No. of existing wells (not abandoned):

Well tag number

Well name/description

Depth (ft)

Diameter (inches)

 New  Existing New  Existing New  Existing New  Existing New  Existing New  Existing

If groundwater pond, depth of pond (feet):

*Please attach any information from boreholes, test well(s), and/or aquifer tests***SURFACE WATER SOURCE**Source (check all that apply)  Stream/River  Lake  Pond  Bay

Name of source:

Location of intake:

Is the intake located on property owned by the applicant?  Yes  No

Surface Water Pump Capacity (gallons per minute):

Maximum Run Time in a Day (hours):

**CONSERVATION EASEMENTS**Is there a conservation easement on any part or all of this(these) property(ies)?  Yes  No

If yes, who holds the easement?

Have you notified the holder of the easement of your intent to use the water?  Yes  No  N/A**PRIVACY NOTIFICATION**

This Notice is provided pursuant to § 10-624 of the State Government Article of the Maryland Code. The personal information requested on this form is intended to be used in processing your application. Failure to provide the information requested may result in your application not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment ("MDE") is a public agency and subject to the Maryland Public Information Act. This form and the information provided on this form may be made available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by federal or State law.

**SIGNATURE**

I certify and affirm under penalty of perjury that all of the information I am providing on this date is complete, true and accurate to the best of my knowledge. I am aware that submitting false, inaccurate or incomplete information may result in the denial or revocation of the permit, or be subject to any other sanctions allowed under Maryland Law.

Signature of Applicant:

Name (please print):

Title:

Date: