## WATER BANK DEPOSIT FORM

Water Right Owner:	
Contact Person (If Different):	
Mailing Address:	_
Phone Number:	
Acreage of water hereby deposited:	
If a hydrographic survey is available, provide the ma	p name, map number, and tract number:
Otherwise, please provide a description of the tract of	f land and a map if available:
Initial Deposit Year:	
Signature of Depositor	Date
Signature of Water Bank Record Keeper	Date
FOR ACEQUIA USE ONLY BANKING LOG – OWNER DEPOSITS AND W	Page
Depositor Name:	
Date:	
Initial Owner DepositOwner Withdrawal – Owner Deposit	
Owner Withdrawal Effective Date (if different than a	above):
Name of Water Bank Record Keeper	