MONTANA WATER COURT, YELLOWSTONE DIVISION
SHIELDS RIVER - BASIN 43A

NOTICE OF OBJECTION AND REQUEST FOR HEARING

1. Claim #:_____ **2.** County:_____
(One Claim Number Per Form)

3. Page number in Decree:_____ **4.** Source:_____

5. Name of Owner(s) to whom the water right was issued: _____
_____

6. Objector's Name, Address, and Phone Number:

_____
LAST NAME FIRST NAME MID. INITIAL

_____
STREET ADDRESS OR PO BOX

_____
CITY STATE ZIP CODE

(____)_____
PHONE NUMBER E-MAIL

7. Objector's Attorney name, address, and phone number:

_____
LAST NAME FIRST NAME MID. INITIAL

_____
STREET ADDRESS OR PO BOX

_____
CITY STATE ZIP CODE

(____)_____
PHONE NUMBER E-MAIL

8. Basis of Objection:

___ All Elements
___ Flow Rate/Volume
___ Ownership
___ Period of Diversion/Period of Use
___ Place of Use/Maximum Acres
___ Point of Diversion/Means of Diversion
___ Priority Date
___ Purpose of Right
___ Source
___ Abandonment/Non-Perfection
___Other:_____
_____

9. State the changes you think should be made to this claim and why. State the specific grounds and evidence on which the Objection is based. (Use additional paper if necessary.)

_____
_____
_____
_____

DATED this ____ day of _____, 2019.

_____
SIGNATURE OF OBJECTOR OR OBJECTOR'S ATTORNEY

(TURN FORM OVER AND COMPLETE OTHER SIDE)

⇒ *You **must** mail a copy of this Objection to all the Owners on the water right. If you are objecting to your own water right and are the sole owner listed on the water right then you do not need to fill out the Certificate of Mailing.*

⇒ *If you are objecting to your own water right and there are multiple owners on the claim you **must** mail a copy of this Objection to all the other Owners listed on your water right.*

⇒ *The Certificate of Mailing **must** be completed and mailed **<u>when</u>** filing the original Objection with the Water Court.*

CERTIFICATE OF MAILING

I, _____, declare under penalty of perjury, that on the ____ day of
YOUR NAME
_____, 2019, I mailed a copy of this Objection, postage prepaid, addressed to the following owner(s):

_____	_____
OWNER	OWNER
_____	_____
STREET ADDRESS OR PO BOX	STREET ADDRESS OR PO BOX
_____	_____
CITY STATE ZIP CODE	CITY STATE ZIP CODE

(*Use additional paper if needed for more names & addresses*)

_____
SIGNATURE FOR CERTIFICATE OF MAILING

Please send this completed original to: **Montana Water Court**
PO Box 1389
Bozeman, MT 59771-1389

Questions? Call the Montana Water Court at 1-800-624-3270 (In-state only) or (406) 586-4364.
Fax: (406) 522-4131 or E-mail: watercourt@mt.gov

OBJECTIONS MUST BE RECEIVED AT THE WATER COURT BY 5:00 PM ON <u>OCTOBER 15, 2019.</u>