

Claim #				
(ONE CLA	AIM NUMBER PER FORM – CL	AIM NUMBER MUS	F BE LISTED ON THE 400 OBJECTION LIST)
Source				
County				<u></u>
Name, Address, and	d Phone Number of Par	ty Appearing:		
Last Name	First Name]	Middle Initial	
Street Address or P	ost Office Box			
City	State	Zip Code	Phone/E-mail	
Name, Address, and	d Phone Number of Par	ty's Attorney, i	f any	
Last Name	First Name]	Middle Initial	
Street Address or P	ost Office Box			
City	State	Zip Code	Phone/E-mail	
	Source County Name, Address, and Last Name Street Address or P City Name, Address, and Last Name Street Address or P	Source County Name, Address, and Phone Number of Par Last Name First Name Street Address or Post Office Box City State Name, Address, and Phone Number of Par Last Name First Name Street Address or Post Office Box	Source County Name, Address, and Phone Number of Party Appearing: Last Name First Name I Street Address or Post Office Box City State Zip Code Name, Address, and Phone Number of Party's Attorney, i Last Name First Name I Street Address or Post Office Box	Last Name First Name Middle Initial Street Address or Post Office Box

(TURN FORM OVER AND COMPLETE BACKSIDE)

6. State the changes that you think should be made to this claim and why.

SIGNATURE OF APPEARING PARTY (YOUR NAME)

YOU MUST MAIL A COPY OF THIS NOTICE OF INTENT TO APPEAR TO ALL OF THE OWNER(S) OF THIS WATER RIGHT. COMPLETION OF THE CERTIFICATE OF MAILING, FOUND BELOW, INDICATES TO THE COURT THAT YOU HAVE MAILED A COPY OF THIS NOTICE OF INTENT TO APPEAR TO ALL OF THE OWNER(S) LISTED.

CERTIFICATE OF MAILING

I,	, do solemnly swear that on the day of	
, 20	24, I placed a copy of this Notice of Intent to Appear in the U.S. M	⁄Iail,
postage prepaid. The copy of t	his Notice of Intent to Appear was mailed to the owner(s) of the wa	ater
right: (Use additional paper ij	f necessary for more names needed)	
Name:	Name:	
Address:	Address:	

City & State:	City & State:

SIGNATURE FOR CERTIFICATE OF MAILING

Please email this completed form to:

watercourt@mt.gov

Or mail to:

Montana Water Court PO Box 1389 Bozeman, MT 59771-1389

The form should be mailed OR e-mailed, not both.

THIS FORM MUST BE RECEIVED AT THE MONTANA WATER COURT BY <u>DECEMBER 9, 2024</u>.