



Wyoming State Engineer's Office

Elimination Request
 Surface Water Division
 Herschler Building 2W
 Cheyenne, Wyoming 82002

1. PERMITTEE INFORMATION:		
Names(s) of permit holder(s):		
Address:		
City:	State:	Zip:
Telephone:	Cell Phone:	
Email:		
Permit No.:	Facility Name:	

2. HEREBY REQUESTS ELIMINATION POINTS OF USE:	
The requirements for afore reference permit, issued by your office, have not been complied with on the Points of Use described below. Final proof for Beneficial Use of water will not be submitted. The State Engineer's Office is therefore authorized, and requested to eliminate the following described Points of Use from Permit No. _____ from the records of your office:	

THIS FORM MUST BE SIGNED BY ALL OF THE OWNERS OF THE ABOVE POINTS OF USE AND MUST BE ACCOMPANIED BY A CERTIFICATE OF OWNERSHIP.

Date: _____

 (Signature)
 Authorized person Applicant Agent

 (Printed Name)

 (Signature)
 Authorized person Applicant Agent

 (Printed Name)

