AFFIDAVIT OF IGFR OWNER AGREEING TO REGULATION UNDER BEST MANAGEMENT PRACTICES PROGRAM OF TMP

INSTRUCTIONS

1. Complete form (type or print in ink), sign and have signature notarized.
2. Affidavit must be signed by the current owner of the IGFR or a person authorized to sign on the owner’s behalf. If affidavit is signed by a person other than the IGFR owner, ADWR may require written evidence of authority to sign on the owner’s behalf. If there are multiple owners, each owner must complete a separate affidavit.

STATE OF ________________________
) ss.
COUNTY OF_____________________

I, ___________________________________________, the undersigned, being first duly sworn on oath, depose and state as follows:

1. Certificate of Irrigation Grandfathered Right No. 58-_______________________ (“IGFR”) is owned as follows: (check one):
   ___ By me (in my name only or with one or more other persons).
   ___ By ___________________________________________________ (name of IGFR owner) and I have authority to sign this affidavit on behalf of the IGFR owner.

2. The IGFR is currently being leased to __________________________ (“Lessee”).

3. The IGFR owner agrees that Lessee may apply to the Arizona Department of Water Resources (“ADWR”) for regulation under the Best Management Practices (“BMP”) Program of the Third Management Plan (“TMP”) with respect to the IGFR. The IGFR owner understands that if the application is approved by ADWR, the land to which the IGFR is appurtenant will be enrolled in the BMP Program and the IGFR owner and lessee will be regulated under the BMP Program as provided in section 4-104 of the TMP until the effective date of the agricultural conservation requirements in the Fourth Management Plan. The IGFR owner also understands that the balance in the IGFR’s flex account will remain unchanged while the land is enrolled in the BMP Program (credits and debits will not be registered to the account and credits may not be transferred to or from the account).

___________________________________
Signature

___________________________________
Title (if applicable)

Subscribed and sworn to before me, this ____ day of ______________________, 200__ by
__________________________________________.

________________________________
Notary Public

SEAL

My Commission Expires