



## ITI System Evaluation Application

**Document 1 of 2.** Before a system evaluation can be performed, this document and the Onboarding document must be completed and submitted to the GMD1 Office. Limit of 2 Pivot System Evaluations per applicant. Please contact GMD1 for questions or if you have a system with more than 2 pivots.

**Applicant Name** (*W9 Payable to*): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

### **Description of System –**

Number of Pivot(s): \_\_\_\_\_ Number of Well(s): \_\_\_\_\_ County: \_\_\_\_\_

**Pivot Legals –** Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ ¼: \_\_\_\_\_

By signing this document, you agree that you are legally authorized to sign as the Water Right owner, and/or the Water Right Correspondent, and/or the farm tenant or landowner. You authorize the work to be completed on this well & equipment in conformity with the System Evaluation. You acknowledge such work may include, but is not limited to, creating access for water level monitoring and use of water level monitoring devices. You agree to indemnify and hold harmless GMD1 and associated technicians for any damage or injury to person or property resulting from such work.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please note that the information on this form will be made available to the Division of Conservation.

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**Internal Use Only**

Grant PO: # \_\_\_\_\_

**Application Number:** \_\_\_\_\_ **Evaluation Date:** \_\_\_\_\_ **Report Received on:** \_\_\_\_\_

**Total Amount Billed to DOC:** \$ \_\_\_\_\_ **Date Invoiced:** \_\_\_\_\_ **Invoice#:** \_\_\_\_\_

**Received:** \_\_\_\_\_ **Check #:** \_\_\_\_\_ **Amount:** \$ \_\_\_\_\_

**Evaluation Total:** \$ \_\_\_\_\_

**Evaluator:** \_\_\_\_\_ **Invoice: #** \_\_\_\_\_ **Received:** \_\_\_\_\_

**Evaluator Rate:** \$2,000 per system ( \_\_\_\_ ) + \$1,000 per Additional Well or Pivot ( \_\_\_\_ )

**Payment to Evaluator:** \_\_\_\_\_ **Check No.:** \_\_\_\_\_ **Total Check Amount:** \$ \_\_\_\_\_

**Payment Made to:** \_\_\_\_\_

**Stipend Total:** \$ \_\_\_\_\_

**Stipend Qualification:** Y / N **Amount:** \$500 per pivot onboarding ( \_\_\_\_ )

**Payment to Applicant:** \_\_\_\_\_ **Check No.:** \_\_\_\_\_ **Total Check Amount:** \$ \_\_\_\_\_