



Kansas Water Office

901 S Kansas Ave.
Topeka, KS 66612-1249

WATER CONSERVATION PROJECT FUND APPLICATION

APPLICANT INFORMATION

Applicant Name: _____

Principle Contact: _____ **Position:** _____

Phone: _____ **Email:** _____

Mailing Address: _____

Project Title: _____

PROJECT DESCRIPTION

1. General Description. Briefly describe project. If required by Chief Engineer, please provide documentation.

2. Project Area/Location. Include the legal description by quarter section, township and range of all major components. Include a map locating major components of the project.

County(s) in which project is located:

Component: 1/4 _____ 1/4 _____ Section _____ Township _____ S Range _____ W

Component: 1/4 _____ 1/4 _____ Section _____ Township _____ S Range _____ W

Component: 1/4 _____ 1/4 _____ Section _____ Township _____ S Range _____ W

Component: 1/4 _____ 1/4 _____ Section _____ Township _____ S Range _____ W

Ditch Company(s) Affiliation and ditch company involvement in project (if any): _____

3. Results of Project. Describe any benefits (example: water use efficiency, measurements, water quality) and or recommendations (feasibility study).

Project Goal:

WCPF Eligibility (check all applicable):

- Efficiency improvements to canals or laterals owned by a ditch company
- Projects to improve the operational efficiency or management of such canals or laterals
- Water use efficiency devices, tailwater systems or irrigation system efficiency upgrades
- Water measurement flumes, meters, gauges, data collection platforms or related monitoring equipment
- Artificial recharge or purchase of water rights for stream recovery or aquifer restoration
- Maintenance of the Arkansas River channel
- Monitoring and enforcement of Colorado's compliance with the Arkansas River compact.
- Similar type of project (describe) _____

Completion Date (or anticipated completion date): _____

4. Documentation. List capital improvements, reports and other materials completed for this projects. Provide copies of each document generated for which reimbursement is being sought. (Documents may be submitted electronically to dcoe@kwo.state.ks.us.)

5. Project Cost. Provide a brief description of project costs for which funding is being requested. Complete project budget is required to adequately evaluate request. If seeking reimbursement, provide copies of receipts for materials and labor.

SIGNATURE and PAYMENT INFORMATION

Signature: _____ **Office/Title:** _____
Print Name: _____ **Date:** _____
Payment Name: _____ **Payment Address:** _____

SUBMITTAL

Return To: **Director**
Kansas Water Office
901 S Kansas Avenue
Topeka, KS 66612-1249

Principle Contact: **Diane Coe**

Phone: **785-296-3185**
