

REQUEST FOR CERTIFICATION OF IRRIGATED ACRES MODIFICATION



LOWER NIOBRARA NATURAL RESOURCES DISTRICT

410 Walnut Street • P.O. Box 350
Butte, NE 68722-0350

www.lnnrd.org

Phone: (402) 775-2343
Fax: (402) 775-2334

Landowner

Name: _____ Phone: _____

Address _____

Field Information

Legal Description of Irrigated Acres: 1/4 Section _____, Section(s) _____, Township _____, Range _____, _____ County

LNNRD Field Number (Upper right corner of Irrigated Acre Certification form): _____

Explanation for Modification Request (Use additional pages if needed):

Please attach documentation to support modification: (FSA, Assessor, Other)

Landowner Signature _____ Date _____

NRD Approval by _____ Date _____

For NRD Use Only	
Field ID Number: _____	Request Number _____
Customer ID Number: _____	