

**APPLICATION TO PLACE IMPROVEMENT UPON STATE LAND
INFORMATION SHEET**

To avoid having your application rejected, please READ prior to submitting your application.

1. FILING INSTRUCTIONS:

- A. Submit ONE APPLICATION PER PROJECT, PER LEASE/PERMIT. Grazing Lessees/Permittees may apply for more than one project per application, but no more than can be completed within one year's time from the date of approval.
- B. Complete questions and SIGN application on Page 1. Complete appropriate questionnaire and complete Environmental Disclosure.
- C. Submit non-refundable \$150 filing fee.

2. SIGNATURE(S):

The application MUST BE SIGNED BY THE LESSEE(S)/PERMITTEE(S) OF RECORD. If anyone other than the lessee(s)/ permittee(s) signs this application, a notarized written authorization (Power of Attorney) must accompany the application. An additional \$50.00 filing fee is required when filing a Power of Attorney.

3. WRITTEN APPROVAL REQUIRED:

WRITTEN APPROVAL OF THE STATE LAND COMMISSIONER IS REQUIRED BEFORE AN IMPROVEMENT CAN BE PLACED. Lessees/permittees must remove temporary improvements upon expiration, cancellation or abandonment of the lease or permit. Pursuant to A.R.S. § 37-321, unless permission is granted by the Department, the applicant shall not be entitled to reimbursement for permanent improvements. Upon the expiration or cancellation of the lease or permit, such unauthorized improvements shall be forfeited and become the property of the State of Arizona. If an improvement has been started, or completed, **DO NOT USE THIS FORM**, you must submit the "Report of Improvement Placed Without Prior Approval" form. Improvements that are placed without prior approval are subject to removal or modification at the lessee's expense. Disturbed land will also be subject to reclamation at the lessee's expense.

4. PROCESSING TIME:

PLAN AHEAD. Expect a minimum of 90 days processing time for this application to be reviewed by the State Land Department. This application must be reviewed by some or all of the following agencies: Arizona Game and Fish Department, Arizona State Museum, State Historic Preservation Office, Arizona Department of Agriculture, and the Forestry Division. These agencies require between thirty (30) and sixty (60) days to review and respond to the Department.

5. COMMERCIAL LESSEE(S)/PERMITTEE(S) ONLY:

Complete the questionnaire on page 3 and indicate the location of the proposed improvement on the map on page 6 or on another suitable map.

6. **GRAZING LESSEE(S)/PERMITTEE(S) ONLY:**

Complete the questionnaire on page 4 and indicate the location of the proposed improvement on the map on page 6 or on another suitable map.

7. **AGRICULTURAL LESSEE(S)/PERMITTEE(S) ONLY:**

Complete the questionnaire on page 5 and indicate the location of the proposed improvement on the map on page 6 or on another suitable map.

8. **OTHER REQUIREMENTS:**

- A. Construction of improvements may impact archaeological sites, threaten wildlife species, protected plants and natural products with commercial value, such as fuel wood or cactus. The approved improvement application may include specific conditions which will lessen the impact on these resources. All conditions incorporated into an approved application **MUST** be adhered to.
- B. If the proposed improvement entails the appropriation of public water, as defined in A.R.S. § 45-141, an **Application for Permit to Appropriate Public Water of the State of Arizona** must be submitted to the Arizona Department of Water Resources (A.D.W.R.) **UPON** authorization of this **Application to Place Improvements**. This Permit must be received **PRIOR** to any associated construction. If the proposed improvement entails the drilling of a well, a **Notice of Intent to Drill** must be submitted to A.D.W.R. **UPON** authorization of this **Application to Place Improvements**. The **Authorization to Drill** must be received **PRIOR** to any associated construction.
- C. Authorization from the State Land Department for you to commence with **any** water related construction will be contingent upon your compliance with the State Water Codes and conditions stipulated in your lease pertaining to the establishment of water rights on State Trust Lands.
- D. Improvements to be constructed on State Land must comply with local zoning and building codes. Applicant must check with the local jurisdiction for compliance requirements. Failure to adhere to local codes may result in cancellation of the lease or permit.

9. **UPON APPROVAL:**

The Department will:

- 1. Retain the original copy for the file.
- 2. Return one (1) copy to the lessee/permittee along with a **REPORT OF IMPROVEMENT** form which must be completed and returned to the State Land Department upon the completion date specified in the original Application to Place Improvement.

Note: Only those improvements previously approved will be accepted on the Report of Improvement.

10. **ASSISTANCE:**

Contact one of the following Sections for technical assistance, if required.

Agriculture	(602) 542-4625
Commercial	(602) 542-3000
Grazing	(602) 542-4625
Homesite	(602) 542-3000

RETURN TO:
 ARIZONA STATE LAND DEPARTMENT
 PUBLIC COUNTER
 1616 WEST ADAMS
 PHOENIX, ARIZONA 85007
 SUBMIT NON-REFUNDABLE
 \$150 FILING FEE

DEPARTMENTAL USE ONLY	
ACCOUNTING	T & C
Filing Fee: \$150.00 (43)	Exam: _____ App. entry: _____

ROLODEX # _____

LEASE/PERMIT NO. _____ - _____

APPLICATION TO PLACE IMPROVEMENT

COMPLETE QUESTIONS, SIGN AND SUBMIT APPLICATION WITH NON-REFUNDABLE \$150 FILING FEE.
Pursuant to A.R.S. § 37-321, unless permission is granted by the Department, the applicant shall not be entitled to reimbursement for permanent improvements. Temporary improvements are not reimbursable, and must be removed by the lessee/permittee at the termination of the lease or permit. Applicant hereby makes application to place improvement(s) on State lands in accordance with the laws of the State of Arizona and State Land Department rules. Lessee/permittee must adhere to the terms and conditions of said lease/permit.

1. STATE LESSEE OR PERMITTEE:

2. INVENTORY NUMBERS: (SLD use only)

Name(s) _____

a. _____ b. _____

c. _____ d. _____

e. _____ f. _____

g. _____ h. _____

Mailing Address _____

City _____ State _____ Zip _____ Phone No _____

Contact Person _____

Phone No _____

Email Address (optional) _____

3. A. DESCRIPTION OF PROPOSED IMPROVEMENT: _____

B. IS THE PROPOSED IMPROVEMENT: _____ Permanent? _____ Temporary?

4. LEGAL DESCRIPTION/LOCATION OF PROPOSED IMPROVEMENT: (If needed, separate list can be attached)

TWN.	RNG.	SEC.	LOCATION OF IMPROVEMENT WITHIN SECTION	Start Date	Completion Date	Estimated Cost
_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	\$ _____

5. QUESTIONNAIRES: (All applicants must also complete the Environmental Disclosure Questionnaire)

Commercial Lessee/Permittee: Complete questionnaire on Page 3 and map on Page 6.
 Grazing Lessee/Permittee: Complete questionnaire on Page 4 and map on Page 6.
 Agricultural Lessee/Permittee: Complete questionnaire on Page 5 and map on Page 6.

6. SIGNATURE: I hereby certify under penalty of perjury, that the information and statements contained herein, together with all exhibits and attachments are true correct and complete and that I/we have authority to sign this document.

 (Name of Corporation, Partnership, etc.) Date

 Signature of Lessee/Permittee (Individual) Date

 Signature Title

 Signature of Lessee/Permittee (Individual) Date

DEPARTMENTAL USE ONLY

- ___ 1. Application to Place Improvement is APPROVED.
- ___ 2. Application to Place Improvement is APPROVED FOR TEMPORARY NON-REIMBURSABLE IMPROVEMENT.
- ___ 3. Additional conditions attached and made a part of this permission.
- ___ 4. Improvement must be completed by this date: _____
- ___ 5. Applicant must submit a **REPORT OF IMPROVEMENT WITH PRIOR APPROVAL** form to the Arizona State Land Department within thirty (30) days following the installation or completion of the improvement.

**STATE OF ARIZONA
ARIZONA STATE LAND COMMISSIONER**

(SEAL)

By: _____
Date

=====
Application is REJECTED as:

- ___ Improvement placed prior to receiving permission from the State Land Commissioner.
- ___ Improvement is inconsistent with the lease or permit purpose.
- ___ Improvement is allowed under your lease without filing this application, provided all necessary permits have been obtained.
- ___ Directed by Commissioner's Decision & Order No. _____ dated _____
- ___ Other _____

Date: _____

COMMERCIAL LESSEE/PERMITTEE ONLY

COMPLETE the following and indicate the location of the proposed improvement on Page 6. (Another suitable map may be substituted for the map on Page 6.)

1. Is the proposed improvement allowed and within the scope of your commercial lease or permit?
 Yes No

2. Do you consider this proposed improvement to be: Temporary Permanent

3. Does the proposed improvement comply with all local jurisdiction requirements? Yes No
If yes, attach a copy of any permit required.

If no, please explain: _____

4. What is the source and type of utilities, if required: _____

Note: It is the responsibility of the Applicant to obtain utility service and any necessary rights-of-way for such service.

5. Is there any landscaping proposed in this project? Yes No

If yes, describe: _____

6. Illustrate the location of the proposed improvement on the map on page 6 or attach a site development plan.

Note: The Department may require submission of more detailed site plans and specifications, including but not limited to grading, construction and landscape plans.

GRAZING LESSEE/PERMITTEE ONLY

COMPLETE the following and indicate the location of the proposed improvement on Page 6. (Another suitable map may be substituted for the map on Page 6.)

1. Will the placement of this range improvement and the associated activity require any ground disturbance?
 ____ Yes ____ No If yes, describe the type of disturbance and type of equipment to be used.

2. Is this improvement water related? ____ Yes ____ No If yes, provide the following information:

A. Source: _____

If source is an existing groundwater well, provide Well Registration Number: 55-_____. If available, please provide GPS coordinates for an existing or proposed well: x _____ y _____ datum referenced _____.

(If more than one source or additional uses, please copy this page and attach completed information to the back of this application.)

	<u>Section</u>	<u>Township N/S</u>	<u>Range E/W</u>	<u>Land Ownership</u>
B. Source Location: _____ (legal description)	_____	_____	_____	_____
_____ 1/4 _____ 1/4 _____ 1/4 10 acre 40 acre 160 acre				
C. Proposed Use: _____ Locations _____ (usually troughs/drinkers _____ associated with source _____ indicated in A & B above) _____	_____ 1/4 _____ 1/4 _____ 1/4 _____ 1/4 _____ 1/4 _____ 1/4	_____	_____	_____

3. From the categories listed below, indicate which best describes your project, and list the dimensions and type of material used:

<u>CATEGORY</u>	<u>QUANTITY</u>	<u>DIMENSIONS</u>	<u>MATERIAL</u>
Pipeline	_____	_____	_____
Trough/drinker	_____	_____	_____
Storage tank	_____	_____	_____
Well	_____	_____	_____
Other	_____	_____	_____
Earthen tank	(Submit a separate diagram showing dimensions of tank, dam and spillway.)		

(Note: The Department will not approve an earthen tank proposed to be impounded by a dam within the jurisdiction of the Arizona Department of Water Resources. Arizona Revised Statutes §45-1201 (1) defines such a dam as any artificial barrier twenty-five feet or more in height or with a capacity of more than fifty acre-feet.)

4. Is this improvement a fence or a corral? Yes No If yes, complete the following:

- A. Type of wire: ____ Barbed ____ Smooth ____ Net ____ Electric
- B. Spacing of wires from ground level to top strand: _____
- C. Braces: Material _____ Height _____ Spacing _____
- D. Posts: Material _____ Height _____ Spacing _____
- E. Stays: Material _____ Height _____ Spacing _____

5. Is this improvement a barn, shed or other building? ____ Yes ____ No If yes, list dimensions and type of material used: _____

6. Is this a cost share project? ____ Yes ____ No
 If yes, with which agency and what type of agreement? _____

AGRICULTURAL LESSEE/PERMITTEE ONLY

COMPLETE the following and indicate the location of the proposed improvements (including any useful information such as length of new ditches and degree of leveling) on Page 6. (Another suitable map may be substituted for the map on Page 6.)

1. Are the proposed improvements being placed to put new/additional acres into production that have not been farmed in the past five years? _____ Yes _____ No If yes, how many additional acres? _____ Identify the location of additional acreage to be put into production using the map on page 6 or substituted map.

2. What type of crops will be planted after the completion of the improvement?

3. Is this a cost share project? _____ Yes _____ No If yes, indicate the agency and type of agreement below?
_____. Please provide a copy of the agreement.

4. Is this improvement water related? _____ Yes _____ No If yes, provide the following information:

A. Source: _____.

If source is an existing groundwater well, provide Well Registration Number: 55- _____.

				<u>Section</u>	<u>Township N/S</u>	<u>Range E/W</u>	<u>Land Ownership</u>
B. Source Location:	_____ 1/4	_____ 1/4	_____ 1/4	_____	_____	_____	_____
(legal description)	10 acre	40 acre	160 acre				

If available, please provide GPS coordinates for an existing or proposed well:

x _____ y _____ datum referenced _____
(If more than one source or additional uses, please copy this page and attach completed information to the back of this application.)

				<u>Section</u>	<u>Township N/S</u>	<u>Range E/W</u>	<u>Land Ownership</u>
C. Proposed Use:	_____ 1/4	_____ 1/4	_____ 1/4	_____	_____	_____	_____
Locations	_____ 1/4	_____ 1/4	_____ 1/4	_____	_____	_____	_____
	_____ 1/4	_____ 1/4	_____ 1/4	_____	_____	_____	_____
	_____ 1/4	_____ 1/4	_____ 1/4	_____	_____	_____	_____

5. From the categories listed below, indicate which best describes your project, and list the dimensions and type of material used:

<u>CATEGORY</u>	<u>QUANTITY</u>	<u>DIMENSIONS</u>	<u>MATERIAL</u>
Ditch	_____	_____	_____
Leveling	_____	_____	_____
Well	_____	_____	_____
Other	_____	_____	_____

Please indicate the location of all proposed improvements below along with the appropriate Section(s), Township(s), and Range(s) or you may provide required information on another suitable map.

ARIZONA STATE LAND DEPARTMENT ENVIRONMENTAL DISCLOSURE QUESTIONNAIRE

These two pages are part of the application - DO NOT DETACH.

The purpose of this questionnaire is to give the Department an opportunity to detect proposed land uses that may have potential environmental impacts and risks, and to consider these impacts and risks in the processing of the application.

If you have questions regarding this questionnaire, please contact the State Land Department, Environmental Section at (602) 542-2119. Other Federal, State, County and local agencies may also need to be contacted regarding environmental regulations.

PLEASE INDICATE BELOW THE TYPE(S) OF POTENTIAL ENVIRONMENTAL IMPACTS FROM YOUR CURRENT OR PROPOSED USE:

<u>YES</u>	<u>NO</u>	<u>WILL YOUR USE INVOLVE:</u>	<u>TYPE OF ENVIRONMENTAL IMPACT</u>
_____	_____	<u>WASTE TIRES</u> The collection of waste tires? If yes, explain: _____	_____
_____	_____	<u>LEAD ACID BATTERIES</u> The sale and disposal of lead acid batteries? If yes, explain: _____	_____
_____	_____	<u>DISCHARGE IMPACTING GROUNDWATER</u> Generating a discharge that may potentially impact groundwater? If yes, explain: _____	_____
_____	_____	<u>PESTICIDES?</u> If yes, explain use: _____	_____
_____	_____	<u>DRY WELLS?</u> If yes, ADEQ Registration #(s): _____	_____
_____	_____	<u>POTABLE WATER (DRINKING WATER) SYSTEMS?</u> If yes, explain: _____	_____
_____	_____	<u>WASTEWATER COLLECTION AND TREATMENT SYSTEMS</u> Wastewater collection and/or treatment? If yes, explain: _____	_____
_____	_____	<u>AIR CONTAMINANTS/AIR POLLUTION CONTROL</u> Air contaminant emissions? If yes, explain: _____	_____
_____	_____	<u>SOLID WASTE - GENERAL</u> Solid waste generation, transportation, treatment, recycling, storage or disposal? If yes, explain: _____	_____
_____	_____	<u>SOLID WASTE - MEDICAL WASTE</u> Medical waste generation, transportation, treatment, recycling, storage or disposal? If yes, explain: _____	_____
_____	_____	<u>SOLID WASTE - SEWAGE SLUDGE/SEPTAGE</u> (Septic Tank Waste) Sewage sludge/septage generation, transportation, treatment, storage, use or disposal? If yes, explain: _____	_____
_____	_____	<u>USED OIL</u> Used oil generation, transportation, storage, recycling, use, disposal, marketing or burning? If yes, explain: _____	_____
_____	_____	<u>RECYCLING ACTIVITIES?</u> If yes, explain: _____	_____
_____	_____	<u>SPECIAL WASTE</u> Special waste (asbestos, motor vehicle shredding waste) generation, transportation, treatment, recycling, storage or disposal? If yes, explain: _____	_____
_____	_____	<u>HAZARDOUS WASTE GENERATOR</u> Generating hazardous waste? If yes, explain: _____	_____
_____	_____	<u>HAZARDOUS WASTE TREATMENT, STORAGE, OR DISPOSAL?</u> If yes, explain: _____	_____

(OVER)

YES NO WILL YOUR USE INVOLVE: TYPE OF ENVIRONMENTAL IMPACT

_____ HAZARDOUS WASTE TRANSPORTATION? If yes, explain: _____

_____ UNDERGROUND STORAGE TANK (UST)? If yes, explain: _____

_____ ABOVEGROUND STORAGE TANK (AST)? If yes, explain: _____

_____ HAZARDOUS SUBSTANCES? If yes, explain: _____

_____ CURRENTLY UNCLASSIFIED WASTE Will your use involve currently unclassified waste containing the following? (A.R.S. §49-854). If yes, check appropriate waste category:

- | | | |
|---|--|---|
| <input type="checkbox"/> Polychlorinated biphenyls (PCBs) | <input type="checkbox"/> Oil and gas exploration drilling muds | <input type="checkbox"/> Petroleum contaminated soil |
| <input type="checkbox"/> Incinerator ash | <input type="checkbox"/> Categorical industrial pretreatment sludge | <input type="checkbox"/> Commercial/industrial septage |
| <input type="checkbox"/> Petroleum refining waste | <input type="checkbox"/> Radioactive waste | <input type="checkbox"/> Used Antifreeze |
| <input type="checkbox"/> Slag and refractory material | <input type="checkbox"/> Uranium ore tailings | <input type="checkbox"/> Contaminated process equipment |
| <input type="checkbox"/> Precious metals recycling | <input type="checkbox"/> Industrial catalysts | <input type="checkbox"/> Industrial Sludges |
| <input type="checkbox"/> Aluminum dross | <input type="checkbox"/> Industrial sands (excluding mining or mineral processing operation) | |

If checked, explain waste generation process: _____

_____ SUPERFUND SITES Is the State Trust land located in a National Priority List (NPL, Federal Superfund) area or in a Water Quality Assurance Revolving Fund (WQARF, State Superfund) study area?
If yes, NPor WQARF area name: _____

_____ LAND DISTURBANCE If land disturbance will occur, will it be on previously undisturbed land? If yes, explain: _____

_____ WATER WELLS Are there open and/or abandoned water wells on the property? If yes, submit a site diagram showing location(s) and use(s).

_____ ADJACENT LAND USES To the best of your knowledge, are adjacent lands subject to any of the above-referenced environmental impacts? If yes, explain: _____

_____ ON-SITE INSPECTION/ENVIRONMENTAL ASSESSMENT To the best of your knowledge, has an on-site inspection and/or an environmental site assessment been performed at this location?
If yes, explain: _____

_____ PREVIOUS ENVIRONMENTAL IMPACT To the best of your knowledge, has any environmental impact been reported previously to ADEQ?
If yes, explain: _____

ADDITIONAL COMMENTS: