

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
NOTICE OF CHANGE IN WATER RIGHT OWNERSHIP

RECEIVED

SEP 27 2004

WATER RESOURCES
WESTERN REGION

Please print or type. Attach pages with additional information. Instructions are included at the end of this form.
 Incomplete forms will be returned.

1. Please list the water right number(s) and/or adjudication claim number(s) (if any) for each water right to be changed. List just the adjudication claim number if there is no corresponding water right record on file with the department. Indicate, by checking in the space provided (under the "split" heading), if the change in ownership is limited to a portion of a water right in which case division of the existing water right or adjudication claim record will be required.

Water Right No(s).	Adjudication Claim No(s).	Split	Water Right No(s).	Adjudication Claim No(s).	Split
63-5234					

2. The following **REQUIRED** information must be submitted with this form:

- A. The appropriate **FILING FEE**. See instructions for fee amounts. *waived*
- B. A copy of the most recent **DEED, TITLE POLICY, CONTRACT OF SALE** or other legal document indicating your ownership of the property and water right(s) or claim(s) in question, **WITH ATTACHED LEGAL DESCRIPTION**.
- C. Either of the following (if necessary to clarify division of water rights or other complex property descriptions):
PLAT OF PROPERTY or **SURVEY MAP** clearly showing the location of the point(s) of diversion and place of use of your water right(s) and/or adjudication claim(s) (these are usually attached to your deed or on file with the county).
OR

If your water right(s) and/or adjudication claim(s) is for ten or more acres of irrigation, you must submit a USDA Farm Service Agency **AERIAL PHOTO** with the irrigated acres outlined and point(s) of diversion clearly marked. The **AERIAL PHOTO** should be submitted in place of the **PLAT OF PROPERTY** or **SURVEY MAP**.

3. Name and Address of Former
Owner/Claimant(s)

J. KINDALL STROPE (deceased)
3800 HILL ROAD

4. New Owner/Claimant(s)

CAROL M. STROPE

Name Connector (Check one): ☐ and, ☐ or, ☐ and/or

~~New~~ Mailing Address

3800 HILL ROAD

City, State and ZIP Code

BOISE, IDAHO 83703

~~New~~ Telephone Number

208 1-344-6162

5. Date you acquired the property

9/22/01 (after court filing 3/07/02)

6. If the change in ownership affects the entire water right for each water right or adjudication claim number listed in item 1, THEN SKIP THIS ITEM AND GO TO ITEM 7. If the change in ownership divides the water right(s) among multiple owners, you must describe, in detail, your portion of each water right after the change. Fill in the appropriate spaces in the box(es) below to describe your water right(s) after the change (one water right per box, you may copy this page as necessary). If your quantity of water is greater than a proportionate split, you must attach documentation to show justification for a larger amount. If you are not sure how to identify your portion of the original water right or adjudication claim records, please contact the nearest IDWR office for assistance.

DESCRIPTION OF YOUR PORTION OF WATER RIGHT (If the right(s) will not be split, skip this area and proceed to item 7)		
Water Right and/or Adjudication Claim Number _____		
Water Use	Diversion Rate or Volume (cubic feet per second or acre-feet per annum)	Description (acres, number and type of stock, homes, etc)
Irrigation	_____	_____
Stock	_____	_____
Domestic	_____	_____
Other _____	_____	_____
Total	_____	_____

DESCRIPTION OF YOUR PORTION OF WATER RIGHT (If the right(s) will not be split, skip this area and proceed to item 7)		
Water Right and/or Adjudication Claim Number _____		
Water Use	Diversion Rate or Volume (cubic feet per second or acre-feet per annum)	Description (acres, number and type of stock, homes, etc)
Irrigation	_____	_____
Stock	_____	_____
Domestic	_____	_____
Other _____	_____	_____
Total	_____	_____

7.

Signature of New Owner(s) or Claimant(s)
(include title if applicable)

Carol M. Strope

For Snake River Basin Adjudication Claims: Please attach a Notice of Appearance completed by your attorney, if you wish IDWR to correspond with him/her for all matters related to your claims.

For Office Use Only

Received by _____ Date _____ Fee _____
 Receipted by _____ Date _____ Receipt No. _____
 Processed by _____ AJ Date _____ WR _____ Date _____



ADA COUNTY ASSESSOR

This certificate indicates you have received a purchase of this property.
The purpose of this letter is to request information regarding that purchase.

PLEASE HAND-DELIVER, MAIL
OR FAX SIGNED COPY TO

Ada County Assessor's Office
200 W. Front St., 2nd Floor, Boise, ID 83702
For more information please contact:
Phone (208) 287-7200 Fax (208) 287-7209
www.adacountyassessor.org

PLEASE PRINT OR TYPE IN BLACK INK ONLY

DESC: LOT 3 EXC S 165' &
LOT 4 EXC S 150' BLK 2
GINZELS 1ST SUB
#0100-C #0120-C
#REQ990127

STROPE CAROL JEAN
3800 W HILL RD
BOISE, ID 837030000

LOCATION: 3800 W HILL RD

ZONING: R-1C

3/4/2002

PARCEL # R3142000115

- Type of property purchased: ☐ Bare land only ☐ Residence ☐ Commercial
☐ Manufactured Home ☐ Multi-family Dwelling ☐ Farm
- If your purchase was a Manufactured Home, was land included in the purchase? ☐ Yes ☐ No
- TOTAL PURCHASE PRICE of this property \$ _____
- Date property was purchased (Mo/Day/Yr) ____/____/____
- Date property was occupied (Mo/Day/Yr) ____/____/____
- Was this sale ☐ a typical home purchase ☐ to refinance property
☐ a transfer between relatives ☐ forced sale (e.g., in lieu of foreclosure, by a court order, etc.)
☒ a transfer of convenience (i.e., Quit Claim deed, create a life estate, name change, etc.)
- If any furnishings, machinery or other personal property was included in the sales price, please describe and state the value of such items. _____
- Are you the first occupant of this dwelling? ☐ Yes ☐ No
- Is there more than 1 person in title on this property, other than spouse? ☐ Yes ☐ No
If yes, Affidavit of Possessory & Security Interests may be required to obtain full exemption.
- Is this property held in title by a Trust? ☐ Yes ☐ No
If yes, Affidavit Regarding Residence of Trust is required to obtain exemption.
- Comments Am ^{now} sole owner of property due to the death of my husband

To qualify for a **HOMEOWNER'S EXEMPTION** (Idaho Code §63-302G), this property must serve as your primary dwelling.
To receive the Homeowner's Exemption for the current year, you must have been occupying the dwelling before April 15.

To qualify for an **OCCUPANCY TAX EXEMPTION** (Idaho Code §§63-317, 63-602Z), you must return this form within
30 days of the date of this notification. Failure to file in a timely manner may result in denial of this exemption.

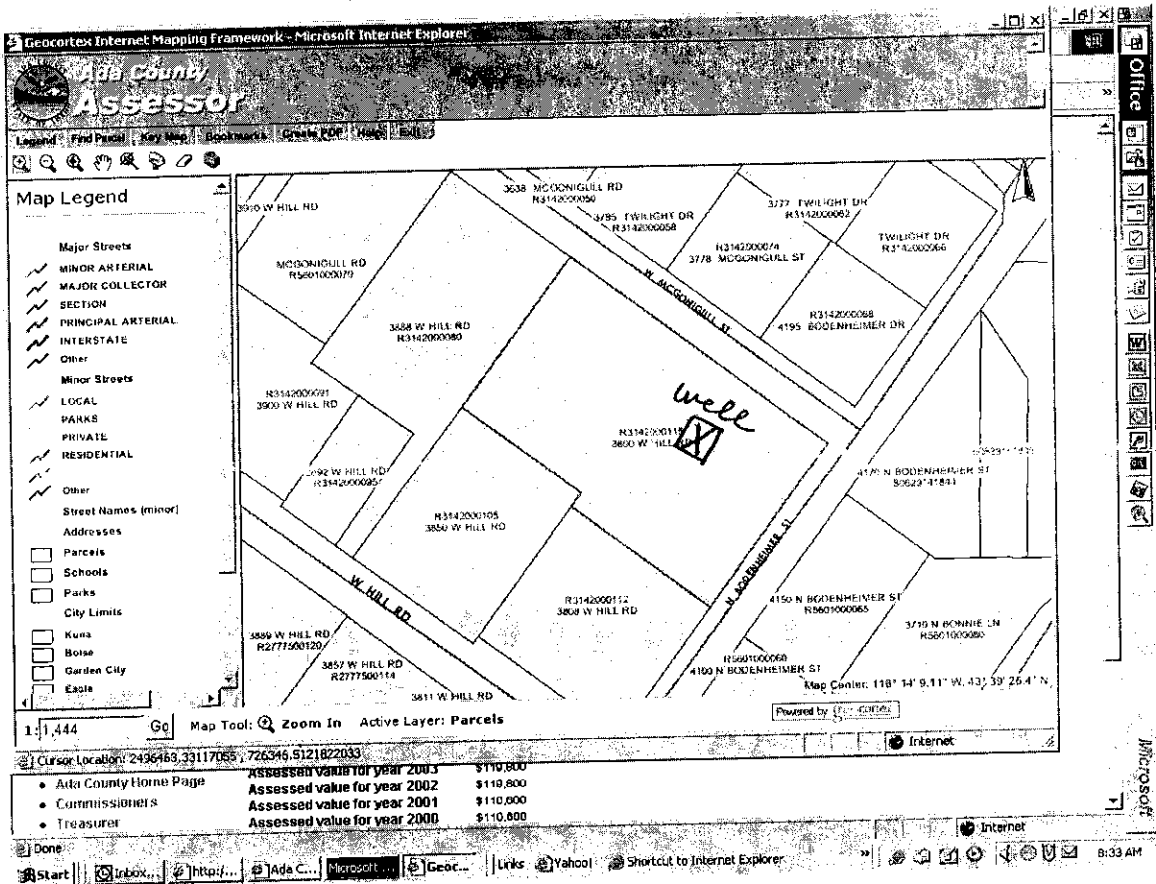
12. Previous Address _____
13. Previous City _____ 14. Previous State _____

I certify that I am the owner, or am purchasing under contract, and that I occupy as my primary dwelling place the property herein described, and that to the best of my knowledge and belief, and under the penalty of perjury, the information I have provided herein is true and correct.

ALL OWNERS CLAIMING THE EXEMPTION MUST SIGN!

Carol Jean Strobe 03/07/2002
Owner's Signature Date
Work Phone 322-3713 Home Phone 344-6162

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