

12/08/2005

**NOTICE OF ERROR
REPLY**

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS:

Water right number: 21-12889

FREMONT COUNTY DISTRICT 4 PARKER CEMETARY

PO BOX 195

PARKER ID 83438

Telephone Number: (208) 356-7500 *message day time*

(208) 624-3908 *office-main # evening*

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

2. Describe the changes you wish to make in the proposed recommendation:

3. Give a brief explanation as to why you disagree with these portions:

☒ I AGREE with this proposed recommendation: no changes need to be made.

DATE: 12/21/05

SIGNATURE: *W. L. Hammond*

Please print your name: W. L. Hammond

IDWR Regional Office, 900 N Skyline Dr Ste A, Idaho Falls, ID 83402, 2085257161