

02/17/2005

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: See cover letter

Water right number: 47-7735

SUSAN E MORRIS
2550 ELIZABETH BLVD
TWIN FALLS ID 83301
Telephone Number: (208) 734-0915 (evening)

208-737-2027 (day)

ROBERT C MORRIS
2550 ELIZABETH BLVD
TWIN FALLS ID 83301
Telephone Number: (208) 734-0915 (evening)

208-308-0565 (day)

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: October 27th 2006 SIGNATURE: Robert C Morris Susan E Morris

Please print your name: Robert C Morris Susan E Morris

IDWR Regional Office, 1341 Fillmore St, Suite 200, Twin Falls, ID 83301, 2087363033