

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE COEUR D'ALENE-SPOKANE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 49576

Ident. Number 95-8150
Date Received: 12/17/2009
Receipt No: 1023165
Received By: A.Y.

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day

1. Name of Claimant(s)

TIMBER RIDGE LLC
4547 W SELTICE WAY
COEUR D ALENE ID USA 83814

Phone: (208)755-0564

2. Date of Priority: 01/08/1982

3. Source: HAYDEN LAKE Trib. to: SINKS

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
51N	03W	17	SE NW 3	KOOTENAI	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
DOMESTIC	1/01	12/31	0.04	1.2

7. Total Quantity Appropriated is:
0.04 C.F.S. and/or 1.2 A.F.A.

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:

Township	Range	Section	1/4 of 1/4 Lot	Use	Acres
51N	03W	17	SE NW 3	DOMESTIC	

11. Place of use in counties: KOOTENAI

12. Do you own the property listed above as place of use? Yes

13. Other Water Rights Used:

14. Remarks:

Use of water under this water right will be regulated by the watermaster of State Water District No. &DISTRICT.

15. Basis of Claim: License

16. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the COEUR D'ALENE-SPOKANE River Basin Adjudication." (b.) I/We do _____ do not ☒ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 0

For Organizations:

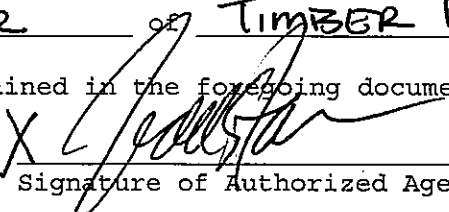
I do solemnly swear or affirm under penalty of perjury that I am

MANAGING MEMBER of TIMBER RIDGE, LLC
Title Organization

that I have signed the foregoing document in the space below as

MANAGING MEMBER of TIMBER RIDGE, LLC

and that the statements contained in the foregoing document are true and correct.

X 
Signature of Authorized Agent

MANAGING MEMBER, TIMBER RIDGE, LLC
Title and Organization

12/22/09
Date