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Water Resources

Add or Modify Claimant Information

Please add claimant name as you would like it to appear on your claim.

* Indicate required fields.

Logged in as: shadowyjoe
IDWR Home
History
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Contact Us
Claim ID: 92-07220
☒ Getting Started
☒ Claimant Information
☒ Source & Point of Diversion
☒ Purpose of Use
☐ Place of Use
☐ Priority Date
☐ Quantity
☐ Season of Use
☐ Finalize and Submit
Claimant Information Help

☒ First Name of Claimant *	Last Name of Claimant *
- OR -	
☐ Organization name (use only if the Organization is the claimant) *	
Mailing Address *	
Note: This will be the address used to contact you throughout the adjudication process. If your property address and mailing address differ, please use your mailing address.	
City *	Country *
	UNITED STATES
State/Province *	Zip *
IDAHO	
Preferred Phone:	Other Phone:
Home	Home
Email Address:	
Why do you need my email address?	
Add Claimant to Claim	

Below are the names that will appear on your claim.

Edit or delete entries as necessary.

	Name	Address	Preferred Phone	E-mail
Delete Edit	FEE FAMILY TRUST	1756 SHEPHERD ROAD, ST MARIES, ID 83861	(208) 245-5444	SHADOWYJOE@HUGHES.NET

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