

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 95-14452

Date Received: 10/19/2009

Receipt No: N022518

Received By: dm

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) FRANK ^{J. and} DOLORES SMITH Phone () 208-777-2482Mailing Address 18946 W HOLLAND Rd Post Falls Id Zip 83854
Street or Box City State2. Date of Priority: (Only one per claim) 03-16-2001
Month/Day/Year (YYYY)3. Source of water supply (Check one) Ground Water (☒) or Other () (a) NA
which is tributary to (b) NA4. Location of Point of Diversion is: Township 50N, Range 6W, Section 13,
NW 1/4 of SE 1/4 1/4, or Govt. Lot 3 BM. County of KOOTENAIParcel (PIN) no. 0-3900-001-001-0Additional points of diversion if any: NAIf available, GPS coordinates: NA

5. Description of diverting works (Wells, Pumps, Spring boxes, Pipelines, Etc.) including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well.

Tag No. D0013990 Well completed 2000
CONNECTED TO HOME 2001 & 500 gal fire storage

6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)

For domestic purposes from 01-01 to 12-31 amount 1.04 cfs () or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed .04 (cfs ()) or AFY ()

8. Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership;

Stockwater and Number of livestock) 1 home

9. Location of Place of Use is: Township 50N, Range 6W, Section 13,
NW 1/4 of SW 1/4, Govt. Lot 3 BM. Parcel (PIN) no. KOOTENAI ⁽²⁰⁾
for (Check One) Domestic (☒) Stock () Domestic and Stock ()
If different than shown in Item 4

Additional places of use, if any NA

10. In which county (ies) are lands listed above as place of use located? KOOTENAI

11. Do you own the property listed above as place of use? Yes (☒) No ()

If the answer is No, describe in Remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.

_____ or None (☒)

13. Remarks: Well log incorrect for quarter-quarter legal description.

14. Basis of Claim (Check One) Beneficial Use (☒) Posted Notice () License () Permit () Decree ()

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number _____

15. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notices 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: 3

For Individuals: I/We do solemnly swear or affirm under penalty of perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) Dalores E. Smith Date: 10/19/09

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

_____ of _____,
Title Organization

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

_____ of _____,
Title Organization

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

Signature of Authorized Agent _____ Date _____

Title and Organization _____

16. Notice of Appearance:

Notice is hereby given that I, _____, will be acting as attorney at law of behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____

Address _____

Date _____

Last Name _____ Identification No. _____

WELL DRILLER'S REPORT

Inspected by _____
Twp _____ Rge _____ Sec _____
_____ 1/4 _____ 1/4 _____ 1/4
Lat: : : Long: : :

(Sign Once if Firm Official and Operator)
Louie Hanner

Certificate of Occupancy

Department of Building Inspection

Kootenai County

This Certificate is issued pursuant to the requirements of the Kootenai County Building Code Ordinance and the current Uniform Building Code certifying that, at the time of issuance, this structure was in compliance with the various Ordinances of Kootenai County regulating building construction or use for the following:

Building Permit No 32681

Plan No 32681

Occ. Group R3/U1

Occ. Load 8

Use Classification

Single Family Residence

Construction Type VN

Owner of Building

Francis & Delores Smith

Building Address

18906 W. Holland Rd. Post Falls 83854

Building Official

Date March 16, 2001

Fire Marshal N/A

By issuing any permit or certificate, or by conducting any compliance inspection, Kootenai County makes no warranty, implied or otherwise, that any inspected building is constructed wholly in compliance with adopted codes or that it is safe or fit for any particular purpose. Kootenai County expressly disclaims any liability for construction defects in buildings it is called upon to inspect in the course or carrying out its government duties. Owner desiring protection from construction defects should hire their own inspectors who can be present while construction is in progress.

SMITH PIN 0-3900-001-001-0

