

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 95-12623
Date Received: 5/27/2010
Receipt No: NO24526
Received By: *641*

**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

1. Name of Claimant(s)

JEFF AGER Phone: 509-448-2129
4712 E 40TH
SPOKANE WA USA 99223

OR

LEANNE AGER Phone: 509-448-2129
4712 E 40TH
SPOKANE WA USA 99223

2. Date of Priority: 12/31/1950

3. Source: COEUR D ALENE LAKE Trib. to: SPOKANE RIVER

4. Point of Diversion:
Township Range Section 1/4 of 1/4 of 1/4 Lot County Type
48N 04W 16 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.
FIRE PROTECTION 01/01 12/31 0.04

7. Total Quantity Appropriated is:
0.04 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:
Township Range Section 1/4 of 1/4 Lot Use Acres
48N 04W 16 NE NW FIRE PROTECTION
SE NW 3 FIRE PROTECTION

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: NONE

14. Remarks:

15. Basis of Claim: Beneficial Use

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 ~~X~~ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 1

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): Jeffrey D. Agar Date: 5/27/10

Date: _____

Parcel No. D-4020-000-013-0 Code Area 138045 GEA 5142

Name/Address _____

Legal Description _____

Property Address _____

IDAHO RESIDENTIAL PROPERTY RECORD

Sheet No. 01

MISCELLANEOUS DATA

Class 3717
 Use Code 37
 Units 1
 Market Grade 1050
 Year Built 1994
 Year Remodeled 30
 Effective Age 10.56
 Effective Year A
 Shape Code A
 Date Occupied _____

YES NO

Prebuilt _____
 Building Permit _____
 Under Construct. _____

Phone No. _____

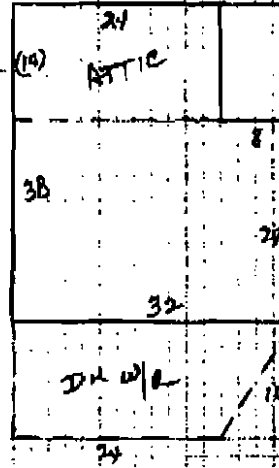
VALUES SUMMARY

YEAR 1997 YEAR _____
 Residence \$ _____ \$ _____
 Garage \$ _____ \$ _____
 Carport \$ _____ \$ _____
 Other \$ _____ \$ _____
 Total Improv. \$ _____ \$ _____
 Land \$ _____ \$ _____
 Total Value \$ _____ \$ _____

PURCHASE INFORMATION

Price _____ Date _____
 Price _____ Date _____
 Asking _____ Date _____
 Rent _____ Per _____ Date _____

Inspected By _____ Date 1/4/05 Rep Yr 37
 Computed By _____ Date _____ Rep Yr _____
 Certified Appraiser _____ Date _____ Rep Yr _____
 Assessor _____ Date _____ Rep Yr _____
 Remarpection _____ Date _____ Rep Yr _____



LAND INFORMATION

01 NEIGHBORHOOD				02 OFF-SITE IMPROVEMENTS				03 TOPOGRAPHY				04 WATER FRONT PROPERTY				05 ON-SITE UTILITIES																					
01 Urban	06 Stable	01 Street	04 Asphalt/Conc	01 Low	01 Lake	6 Beach	01 Electricity	06 Public Water	02 Suburban	07 Improving	01 None	05 Gravel/Dirt	02 Level	02 River/Creek	None P F A G E	02 Gas	06 Private Well	03 Rural	08 Decking	02 Public Access	06 Sidewalks	03 Moderate Slope	03 Accretion	7 Grade	03 Underground Elec/Telephone	07 Public Sewer	04 Recreational	03 Private Access	07 Curb/Cutters	04 Steep Slope	04 Bluff Land	P F A G E	04 Cable TV	08 Septic System	05 Flood Plain	00	05
06 SUBJECT DIMENSIONS				07 SITE INFORMATION				08 REMARKS																													
Frontage				01 Location P F A G E																																	
Depth				02 Amenities P F A G E																																	
Other				03 Landscaping P F A G E																																	
				04 View P F A G E																																	
				05 Detriments Few Many None																																	
06 COMPOSITE ADJUSTMENT				09 SITE ADJUSTMENTS																																	
CAT	LOC	CLASS	TYPE	UNIT	QTY	COST	BASE VALUE	01 Location	10 Access	20 View	30 Topography	40 Width	TOTAL	EXT																							
								80 Depth	60 Postage	70 Beach	80 Corner	90	FACTOR	VALUE																							
								%	%	%	%	%	%	%																							
								%	%	%	%	%	%	%																							
								%	%	%	%	%	%	%																							
APPRAISER: _____ APPRAISAL DATE: _____ REVIEW YR: _____								LAND VALUE \$ _____																													
REINSPECTED APPR. _____ DATE: _____ REVIEW YR: _____																																					