

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 95-8482  
Date Received: 10/1/2010  
Receipt No: NO 25881  
Received By: *MA*

**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)

CATHERINE SCHINI Phone: (208)665-5689  
6453 E OCTAVIA CT  
POST FALLS ID USA 83854  
OR  
TODD SCHINI Phone: (208)665-5689  
6453 E OCTAVIA CT  
POST FALLS ID USA 83854

**RECEIVED  
OCT - 1 2010  
IDWR/North**

2. Date of Priority: 06/27/1985

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  
49N 04W 24 SE NE 2 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 01/01 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  
49N 04W 24 SE NE 2 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: NONE

14. Remarks:

Domestic use is for 1 home.

Place of use is also known as Lot 7, Block 1, Driftwood Point 4th Addition.

The issuance of this right does not grant any right-of-way or easement across the land of another.

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 ~~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): Catherine M. Gulik

Date: 10/1/10

Date: \_\_\_\_\_