

**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: 95-16637
Date Received: 09/06/2013 *dm*
Receipt No.: 20130109

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

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
STEPHEN D KOEHLER	7217 E GREYRIDGE RD	ATHOL	ID	USA	83801
LINDA F KOEHLER	7217 E GREYRIDGE RD	ATHOL	ID	USA	83801

2. Date of Priority:

Date	Explanation
9/3/2013	SHARED WELL 96-96-N-152 COMPLETED 5.30.1997 AND CONNECTED TO THIS HOME SEP 2013. CERTIFICATE OF OCCUPANCY DATED 9.3.2013.

3. Source:

Source	Tributary	Type
GROUND WATER	TRIBUTARY NOT NEEDED	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
53N	03W	22		NW	SE	KOOTENAI

5. Water is used for the following purpose(s):

Water Use	Number Of Homes	Stock	Description
DOMESTIC	1	-	ONE HOME

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
DOMESTIC	1 / 1	12 / 31

7. Quantity:

Water Use	CFS	AF	KW

DOMESTIC	0.040	0.00	0.0
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Totals:

CFS	AF	KW
0.040	0.00	

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
DOMESTIC	53N	03W	22	NW	SE	KOOTENAI	-	-

9. Basis of Claim:

Basis
Beneficial Use

10. 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: 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): *[Signature]* Date: 9/6/13
[Signature] Date: 9/6/13

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 _____

Please print name

Certificate of Occupancy

Kootenai County Community Development

This Certificate is issued pursuant to the requirements of the Kootenai County Building Ordinance and all relevant Codes adopted at the time of the Building Permit application. At the time of issuance of this Certificate, this structure was in compliance with the ordinances of Kootenai County Community Development which regulate building construction or use, for the following:

Building Permit No	RES13-0016	Load	
Occupancy Group	One Family	Sprinkler Required	No
Use Classification	SFR	Construction Type	V-B
Owner of Building	STEPHEN D KOEHLER		
Building Address	7217 E GREYRIDGE RD, ATHOL, ID 83801		
Special	Habitable 4586sf, Garage 1024sf and 460sf decks		
Conditions/Stipulations			

Authorized Signature:



Date: 9/3/2013

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 or workmanship related to the structure it is called upon to inspect in the course of carrying out its government duties.