

09/08/2014

NOTICE OF ERROR
REPLY

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS: November 21, 2014

Water right number: 91-7671

SHOSHONE COUNTY PUBLIC WORKS

700 BANK ST STE 35

WALLACE ID 83873

Telephone Number: (208) 753-5475

RECEIVED
SEP 29 2014
DEPARTMENT OF
WATER RESOURCES

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

2. Describe the changes you wish to make in the proposed recommendation:

3. Give a brief explanation as to why you disagree with these portions:

X I AGREE with this proposed recommendation: no changes need to be made.

DATE: 9/25/14 SIGNATURE: CAROL L. YOUNG
Please print your name: CAROL L. YOUNG

IDWR Regional Office, 7600 Mineral Drive, Suite 100, Coeur D' Alene, ID 83815, (208) 762-2800