

06/12/2014

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: September 12, 2014

Water right number: 92-10049

LANE HATHAWAY
PO BOX 55
PRINCETON ID 83857

RECEIVED

OCT 15 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):

Purpose & use - we are a commercial lodge and paid 55⁰⁰ for permit. (see attached.)

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

Add allotment

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

Allocation insufficient for current and future expansion.

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

DATE: 9/16/14

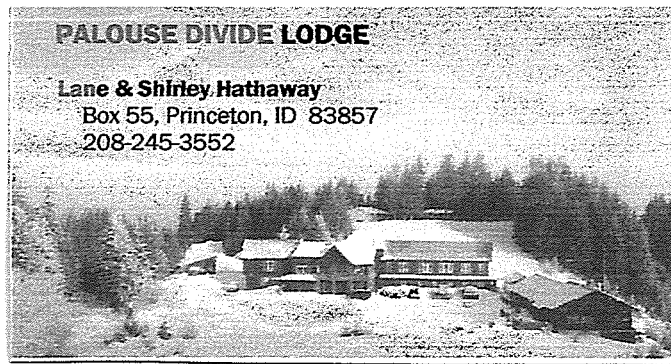
SIGNATURE:

Lane Hathaway

Please print your name:

Lane Hathaway

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



RECEIVED

OCT 15 2014

DEPARTMENT OF
WATER RESOURCES

9/10/14

Please be advised we are a commercial operation and paid a fee of \$25.00 plus and extra fee of \$30.00 as a commercial operation. The "purpose of use" states one home. The quantity of water allocated is not enough for current and expanded operation in Benewah County.

Lane Hathaway

208-245-3552

Idaho Department of Water Resources Receipt

Receipt ID: N020412

Payment Amount	\$30.00	Date Received	4/28/09 11:10	Region	NORTHERN
Payment Type	Check	Check Number	5756		
Payer	HATHAWAY, LANE				

Comments NIA CLAIM BALANCE OF FEE
\$25.00 PD N020092

Fee Details

Amount	Description	Fund	Fund Detail	PCA	Subobject
\$30.00	NORTHERN ID ADJUDICATION FILING FEE	0337	1	75503	1155

cm

Signature Line (Department Representative)

Idaho Department of Water Resources Receipt

Receipt ID: N020092

Payment Amount	\$25.00	Date Received	3/19/09 12:54	Region	NORTHERN
Payment Type	Check	Check Number	5671		
Payer	HATHAWAY, LANE				

Comments NIA CLAIM

Fee Details

Amount	Description	Fund	Fund Detail	PCA	Subobject
\$25.00	NORTHERN ID ADJUDICATION FILING FEE	0337	1	75503	1155



Signature Line (Department Representative)