

07/07/2015
RECEIVED
AUG 12 2015

NOTICE OF ERROR
REPLY

DEPT. OF WATER RESOURCES

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 30, 2015

Water right number: 94-7460

RANDY WILSON
31612 S HWY 3 *24447 SOUTH WHALEN RD*
SAINT MARIES ID 83861
Telephone Number: (208)689-3508

PATRICIA WILSON
31612 S HWY 3 *24447 SOUTH WHALEN RD*
SAINT MARIES ID 83861 *208 689-3508*

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

- Address change

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:

- See Change in Address of Notice of Claim Form

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

DATE: 8-12-15 SIGNATURE: *Patricia G. Wilson / Randy L. Wilson*
Please print your name: *Patricia G. Wilson / RANDY L. Wilson*

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

SCANNED
AUG 13 2015