

NOTICE OF ERROR
REPLY

07/07/2015
RECEIVED
AUG 27 2015
IDWR / NORTH

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: 94-2209

FLOYD KLEIN
14683 S KLEINS MEDICINE TRAIL
MEDIMONT ID 83842
Telephone Number: (208)689-3431

BEVERLY KLEIN
14683 S KLEINS MEDICINE TRAIL
MEDIMONT ID 83842
Telephone Number: (208)689-3431

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

Acceage irrigated

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

claim should be recommended for 38 acres as was originally license.

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

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

DATE: 8/27/15

SIGNATURE: Beverly Klein

Please print your name: Beverly Klein

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

SCANNED
SEP - 2 2015