

07/07/2015

RECEIVED

SEP 21 2015

DEPARTMENT OF
WATER RESOURCES

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 30, 2015

Water right number: 94-8346

CHRIS STUECKER
PO BOX 1275
WALLACE ID 83873
Telephone Number: (208) 752-4941

MONIKA CORVIN
PO BOX 1275
WALLACE ID 83873
Telephone Number: (208) 752-4941

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:

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

DATE: 9-15-15 SIGNATURE: Monika Corvin, C Stuecker
Please print your name: Monika Corvin, Chris Stuecker

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