

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE COEUR D'ALENE-SPOKANE RIVER
BASIN WATER SYSTEM

CIVIL CASE NUMBER: 49576

Ident. Number

95-13485

Date Received:

4-12-10

Receipt No:

N024053

Received By:

cm

RECEIVED

APR 12 2010

NOTICE OF CLAIM TO A WATER RIGHT

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes

Where Daily Use is less than 13,000 gallons per day

IDWR / NORTH

1. Name of Claimant(s)

SIRON, RALPH ETAL TRUST

Phone

408 446-3634

Mailing Address

20064 WHEATON DR. CUPERTINO, CA.

Zip

95014-2340

2. Date of Priority: (Only one per claim)

12/31/1965

Month/Day/Year (YYYY)

3. Source of water supply (Check one)

Ground Water () or Other (✓)

(a)

LAKE COEUR D'ALENE

which is tributary to (b)

SPOKANE RIVER

4. Location of Point of Diversion is: Township

48N

Range

04W

Section

17

SE

1/4 of

NW

1/4, or Govt. Lot

1

BM. County of

KOOTENAI

Parcel (PIN) no.

070400020020

Additional points of diversion if any:

NONE

If available, GPS coordinates:

NA

5. Description of diverting works (Wells, Pumps, Spring boxes, Pipelines, Etc.) including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well.

PUMP IN LAKE WITH LINE TO HOME.

6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)

For

DOMESTIC

purposes from

Month/Day 1/1

to

Month/Day 12/31

amount

cfs (✓) or AFY () 0.04

For

purposes from

to

amount

7. Total Quantity claimed

0.04

cfs (✓) or AFY ()

8. Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership;

Stockwater and Number of livestock)

1 DOMESTIC/HOME USE.

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9. Location of Place of Use is: Township 48N, Range 04W, Section 17,
SE 1/4 of NW 1/4, Govt. Lot 1 BM. Parcel (PIN) no. SAME

for (Check One) Domestic ☒ Stock ☐ Domestic and Stock ☐ If different than shown in Item 4

Additional places of use, if any _____

10. In which county (ies) are lands listed above as place of use located? KOOTENAI

11. Do you own the property listed above as place of use? Yes ☒ No ☐

If the answer is No, describe in Remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.

_____ or None ☒

13. Remarks:

14. Basis of Claim (Check One) Beneficial Use ☒ Posted Notice ☐ License ☐ Permit ☐ Decree ☐

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number _____

15. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notices in the Coeur d'Alene-Spokane River Basin Adjudication." (b.) I/We do ☐ do not ☒ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 0

For Individuals: I/We do solemnly swear or affirm under penalty of perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) _____ Date: _____

_____ Date: _____

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am

_____ of _____,
Title Organization

that I have signed the foregoing document in the space below as

_____ of _____,
Title Organization

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent Ralph J. Siron Date April 07, 2010

Title and Organization TRUSTEE, SIRON, RALP ETAL TRUST

16. Notice of Appearance:

Notice is hereby given that I, _____, will be acting as attorney at law of behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____

Address _____

Date _____

Last Name _____ Identification No. _____

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