

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 95-15814Date Received: 6-3-10Receipt No: NO24743Received By: MM

RECEIVED

JUN 03 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/NORTHERN

1. Name of Claimant(s) RICHARD VAN KLAVEREN Phone (208) 772 9313Mailing Address 699 ROUND UP CIRCLE HAIDEN ID Zip 83835
Street or Box City State2. Date of Priority: (Only one per claim) 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 RIVER4. Location of Point of Diversion is: Township 48N, Range 3W, Section 6,
NE 1/4 of NW 1/4, or Govt. Lot 3 BM. County of KOOTENAI;Parcel (PIN) no. 07700 00000 80

Additional points of diversion if any: _____

If available, GPS coordinates: _____

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 ON PROPERTY WHICH PUMPS DIRECTLY FROM
LAKE.

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

For DOMESTIC USE purposes from 3-15 to 11-15 amount .02
Month/Day Month/Day cfs () or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed .02 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 HOMESCANNED
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9. Location of Place of Use is: Township 48N, Range 3W, Section 6,
NE 1/4 of NW 1/4, Govt. Lot 3 BM. Parcel (PIN) no. _____

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:

OWNERS ARE JAMES + SUSAN LAUGHTLAND,
RICHARD + RANDALYN VAN KLAVEREN + CHUCK + SANDRA REHER

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: _____

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) Richard Van Klaveren Date: 6/3/2010

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 _____ Date _____

Title and Organization _____

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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Photo No.

REAL PROPERTY VALUATION SUMMARY

3-12-73

Joe King
408 N. Sacramento St.
Orange, Calif. 92667

360

Date 2-12-71

4-01 Bk. 244

Pg. 243 Rev. Stamps.

REMARKS

STOTT'S SUBDIVISION

Lot 8

1

DISTRICTS:

Water

Sch

274

Hwy

City

Fire

BUILDING &
OR TYPE

1965
1975

(X)
INDEX

1971
1972

1973
1974

NUMBER
&
CLASS

ACRES

FULL
CASH
VALUE

ASSESSED VALUES, RATIO & YEAR
1.4% 14.1% 15% 15.5%

RURAL LAND

URBAN LAND

TOTAL

Waste

14 - 14 - 43 Res. & Eas.

13 - 13 - 42 S. Timb.

11 - 12 - 41 Sub Tr.

10 - 10 - 39 Min L.

8 - 9 - 38 T. Ld.

7 - 8 - 37 S. L. G.

6 - 7 - 36 D. G.

5 - 6 - 35 N/A (DA)

4 - 5 - 34 L. G.

3 - 4 - 33 S. L. A.

1 - 3 - 32 I. A.

TOTAL

Waste

14 - 14 - 43 Res. & Eas.

13 - 13 - 42 S. Timb.

11 - 12 - 41 Sub Tr.

10 - 10 - 39 Min L.

8 - 9 - 38 T. Ld.

7 - 8 - 37 S. L. G.

6 - 7 - 36 D. G.

5 - 6 - 35 N/A (DA)

4 - 5 - 34 L. G.

3 - 4 - 33 S. L. A.

1 - 3 - 32 I. A.

NUMBER
&
CLASS

NO.

FULL
CASH
VALUE

ASSESSED VALUES, RATIO & YEAR
% % % %

15 - 15 - 44 Bus. Lot

15 - 16 - 45 Acreage

16 - 17 - 46 Res. Lot

16 - 18 - 47 Acreage

16A - 19 - 48 Rec. Lands

TOTAL

TOTAL FULL CASH VALUE

RATIO

ASSESSED VALUE

3-12-73
Date 2-12-71
Pg. 243 Rev. Stamps.

3-12-73
Date 2-12-71
Pg. 243 Rev. Stamps.

MOBILE HOME APPRAISAL RECORD

Owner Joe KingCode Area 46-1408

Decal No. _____

Address 4

Rent per Mo: Dwelling \$ _____

Lot \$ _____

Resident _____ Military non-resident _____

Assessed Value
19 _____ 19 _____ 19 _____ 19 _____ 19 _____Location / Legal Des. State Subdivision

Mfgd by _____ Serial No. _____

Lienholder _____

Trade Name _____ Model _____

Previous Owner _____

Class 1 Sgl 6 Dbl _____ Lgth 17 Width _____

Purchase price \$ _____ New _____ Used _____

Expando size _____ Total Sq Ft _____

Date of Purchase _____

Year Mfgd 1947
(Title)Int inspected: Yes _____ No 3/4 Owner _____ Tenant _____

APPRAISED VALUE SUMMARY

Dwelling — Depr Repl Cost \$ _____

Other Improvements D.R.C. _____

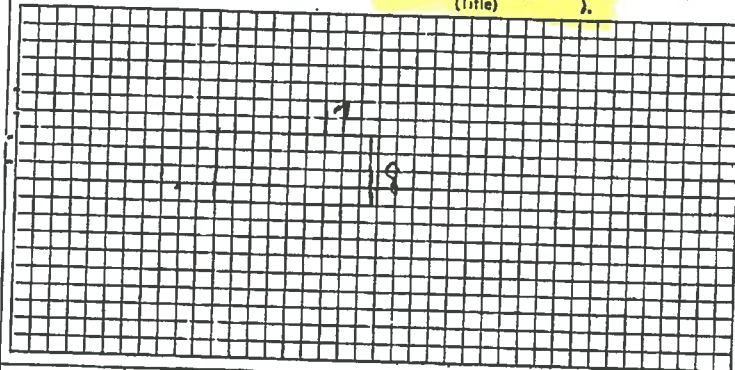
Total Depr Repl Cost _____

Value by GMRM _____

Correlated Value \$ 400

Site Value \$ _____

Total Site & Improvements Value \$ _____



Foundation	Cont	Conc	Blk	Rock	Msry	Wd	Mtl	Pier	Post	Mudsill	Base Cost	+	-	Lump Sums
Skirting	Fr:	Wd	Mtl	FG	Cover:	Wd	Mtl	FG	Comp					
Frame	Channel	I-bm	Tube	Med	Hvy	Towing	Assembly	Axle	Coupler					
Exterior	Fr:	Wd	Mtl	FG	Cover:	Wd	Mtl	FG	Style:	Plain	Avg			
	Elaborate	Storm window	Storm door	Insulated Window	CW	Insulation								
Roof	Flg	Gab	Arch	Fr:	Wd	Mtl	FG	Cover:	Mtl	FG	Shgs:	Wd	Comp	
	Overhang		Gutters								CW	Insulation		
Floor	Sgl	Dbl	Joist	Sealed	Insulation	Cover:	Carpet							
	Hwd	Resilient					CW	Insulation						
Interior	Fr:	Wd	Mtl	Cover:	Pnl	PG	Swd	Hwd	Comp	Pic	Ceiling:	Pnl		
	Doors:	Fair	Avg	Good	Trim:	LR	DR	Kit	Bath	BR	Den			
	Swd	Hwd	Comp	Acoutile				Util						
Interior Components	Bltns:	Simple	Avg	Good	Ex	Kit	Util	Chest	App:	WAS				
	Elec	Range	Dropln	Surf	Bltn oven	Kit hood & fan	Exfan	Gas	Elec	Hd fuel				
	Disp	Dishwasher	Bltn refr	Wet bar	Fireplace:									
Electrical	Quality:	Low cost	Avg	Good	Ex	Quantity:	Few	Avg	Many	DCO				
Plumbing	WC	Tub	Enc	Ssk	Shower	Dr				Laundry Tray				
	WC	w/s	WH	Dsk	T	M	FG	LF	Pic	Clay	Porc			
Heating Cooling	Fao	Fag	Fae	Gas	Oil	Elec	Flr	WI	BB					
	ACongd:	Refr	Evap	Unit	FaDuct									
Ratings	Phys Cond	F A G	Func Utility	E A G	Appearance:	Res F A G	Nbrhd F A G							

Remarks: _____

Dwelling _____ sf x \$ _____ psf = \$ _____

Net Lump Sum Adjustment _____

Total Base Cost _____

19 _____ LCM _____ % x Qual Adjustment _____ % = _____ % Modifier x Base = _____

Depreciation: Physical, Functional and Economic = Percent Good _____ %

Depreciated Replacement Cost (transfer to Value Summary) \$ _____

Appraised 9/18/75 By SLH Computed _____ By _____

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OUTBUILDINGS

County _____

Owner _____ Location _____

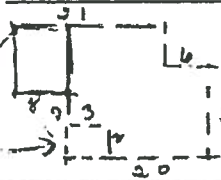
Address _____

City & State _____ Sheet _____ of _____

Type of Building	Year Constr.	Age	Area	Per. 92'
			Gr. Units Cost Total	
Foundation <u>Concrete 10' x 8' c</u>			12 2.00 24	
Exterior Walls <u>2x4 - 6' c</u>			77' 34 26	
<u>7 1/2 - B+B. Used for foundation.</u>			182' 53 91	
Wall Height <u>7</u> ft. & Walls open or abutting _____ ft.				
1st Floor <u>507, 2x4 - 24' c 6H ty 509 dnd</u>			306' 25 153	
2nd Floor _____				
Floor Finish _____				
Int. Wall Constr. % _____				
Ceiling % _____				
Electrical <u>3-116</u>			3 15 45	
Plumbing <u>1 - w c.</u>			1 105	
Heating _____				
Windows _____				
Doors _____				
Roof <u>507, 2x4 - 24' c SH ty. C g i. 507 2x4 - 24' c SH ty R 1/4</u>			306' 25 233	
			Base Rate 306' 19.26 01 165	

Reproduction Cost	
Appraised <u>11-9-71</u> By <u>10'</u> Structure Grade A B C <u>(D)</u>	60% 505
Computed _____ By _____ Area Adjustment Factor _____	%
Reviewed _____ By _____ Depreciation Factor _____	%
Constr. Cost _____ Market Value on _____ 19 _____	

2x4 floor



Type of Building	Year Constr.	Age	Area	Per.
			Gr. Units Cost Total	
Foundation <u>Large</u>				
Exterior Walls _____				
Wall Height _____ ft. & Walls open or abutting _____ ft.				
1st Floor <u>1" deck</u>			160' .80 128	
2nd Floor _____				
Floor Finish _____				
Int. Wall Constr. % _____				
Ceiling % _____				
Electrical _____				
Plumbing _____				
Heating _____				
Windows _____				
Doors _____				
Roof _____				
			Base Rate	

Reproduction Cost	
Appraised <u>11-9-71</u> By <u>10'</u> Structure Grade A B C <u>D</u>	4% 128
Computed _____ By _____ Area Adjustment Factor _____	1% %
Reviewed _____ By _____ Depreciation Factor _____	%
Constr. Cost _____ Market Value on _____ 19 _____	

REMARKS:- _____

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