

RECEIVED

FEB 22 2018

02/09/2018

IDWR / NORTH

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: March 30, 2018

Water right number: 95-7006

PANHANDLE VILLAGE WATER SYSTEM

PO BOX 281

RATHDRUM ID 83858

Telephone Number: ~~208-870517~~

208-412 9115

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

*Diversion Rate*

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

*Should Be 0.23 CFS*

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

*Based on License*

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

DATE:

*2-22-18*

SIGNATURE:

*James Williams*

Please print your name:

*James Williams*

IDWR Regional Office, 7600 N MINERAL DR STE 100, COEUR D ALENE, ID 83815-7763, (208) 762-2800