

04/09/2018

RECEIVED

MAR 05 2018

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: March 30, 2018

Water right number: 95-15612

LELOA HINDBERG

~~ELAINE CRAWFORD~~

PO BOX ~~253~~ *686 83801*

PIERCE ID ~~83546~~

Telephone Number: ~~2086597404~~

ELDEN HINDBERG

C/O ELAINE CRAWFORD

PO BOX ~~257~~

PIERCE ID ~~83546~~

Telephone Number: 2086597404

*owner name & address change was made at your
Office 2/14/18*

Actual

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: 3-2-18

SIGNATURE: Elaine Crawford Leola Hindberg

Please print your name: Elaine Crawford Leola Hindberg

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