

RECEIVED

02/09/2018

MAR 22 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: 95-15944

DONALD BISHOP
1867 BLANCHARD CTF RD
BLANCHARD ID 83804
Telephone Number: 2084372266

CHRISTINE BISHOP
1867 BLANCHARD CTF RD
BLANCHARD ID 83804
Telephone Number: 2084372266

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

We have 2 households using our well -
Trevin & Emily Davidson have a water line from our well to their house

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

Increase water usage

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

See #1

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

DATE: 3/15/2018 SIGNATURE: CV Bishop

Please print your name: _____

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