

RECEIVED

MAR 30 2018

02/09/2018

1/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: 95-16291

PATRICK MC MAHON
PO BOX 37
ATHOL ID 83801
Telephone Number: 2088710915

SUSAN MC MAHON
PO BOX 37
ATHOL ID 83801

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

Quantity

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

Quantity: 0.070 CFS

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

I would like an increase in CFS quantity for irrigation.

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

DATE: 3/29/18 SIGNATURE: 

Please print your name: Susan McMahon

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