

**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
PALOUSE RIVER BASIN WATER
SYSTEM
NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

CIVIL CASE NUMBER: 59576

Ident. Number: 87-10097

Date Received: 8-20-2018

Receipt No.: N033701

1. Name of Claimant(s):

Name	Address	City	State	Country	Postal Code
STEVEN ULLRICH	1133 PARADISE RIDGE ROAD	MOSCOW	ID	USA	83843

2. Date of Priority:

Date	Explanation
10/15/1997	This is the date the water line was established in our new house construction. Little water was used until we moved into the new house on 24 January 1998.

3. Source:

Source	Tributary	Type
GROUND WATER	TRIBUTARY NOT NEEDED	

4. Point Of Diversion:

Township	Range	Section	Gov Lot	QQ	Q	County
39N	05W	29		NE	SE	LATAH

5. Water is used for the following purpose(s):

Water Use	Number Of Homes	Stock	Description
DOMESTIC	1	-	daily home living with some outside plant watering during the growing season. Now that vegetation is established, we only water flower planters.

6. Season(s) of Use:

Water Use	From Month/Day	To Month/Day
DOMESTIC	1 / 1	12 / 31

7. Quantity:

Water Use	CFS	AF	KW
DOMESTIC	0.010	0.00	0.0

Totals:

CFS	AF	KW
0.010	0.00	

8. Place of Use:

Water Use	Township	Range	Section	QQ	Q	County	Gov Lot	Acreage
DOMESTIC	39N	05W	29			LATAH	-	-
DOMESTIC	39N	05W	29	SE		LATAH	-	-

9. Basis of Claim:

Basis
Beneficial Use

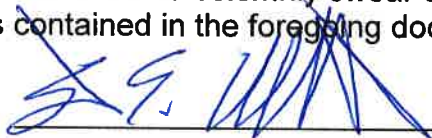
10. Signature(s):

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the Palouse 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)
):



Date:
e:

08/17/2018

Mary H. Ullrich

Date: Aug. 17, 2018

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am

Title of _____
Organization

that I have signed the foregoing document in the space below as

Title of _____
Organization

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____

Date _____

Title and Organization _____

Please print name

Print Claim Stub

Thank you for submitting your claim to IDWR.
If paying in person, please print this page and bring it with you.
If paying by mail, make sure to enclose a copy of this page with your payment.

If you experience printing problems or do not have a printer, copy this information and include it with your payment.
Please type or write clearly. Please include the claim number shown below on any supporting documents you submit to IDWR.

Print This Page

Claim Number:	87-10097
Claim Fee:	\$25.00
Claimant(s):	STEVEN ULLRICH
	1133 PARADISE RIDGE ROAD
	MOSCOW , ID
	83843
Claimed Purpose(s) of Use:	DOMESTIC

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Office address and phone number:
IDAHO DEPARTMENT OF WATER RESOURCES
7600 N MINERAL DR STE 100
COEUR D ALENE ID 83815-7763
(208) 762-2800