

10/05/2018
RECEIVED
OCT 29 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: November 16, 2018

Water right number: 95-15837

NORMAN ANDERSON

509 VISTA DR

COEUR D ALENE ID 83815

Telephone Number: ~~2087653324~~ 208-661-3467

SUZANNE ANDERSON

509 VISTA DR

COEUR D ALENE ID 83815

Telephone Number: ~~2087653324~~ 208-755-8319

GARRY RICHARDSON

509 VISTA DR

COEUR D ALENE ID 83815

Telephone Number: ~~2087653324~~ 206-391-7922

DONNA RICHARDSON

509 VISTA DR

COEUR D ALENE ID 83815

Telephone Number: ~~2087653324~~ 206-391-7922

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:

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

DATE: 10/25/18

SIGNATURE:

Norman J. Anderson

Please print your name:

NORMAN J. ANDERSON

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