

RECEIVED

10/05/2018

NOV 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: November 16, 2018

Water right number: 95-15563

DAVID L CHAPMAN *Living TRUST*

PO BOX 7100

COEUR D ALENE ID 83816

Telephone Number: ~~208-665-7777~~ *(208) 691-7177*

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:

- *Change Name to David L Chapman Living TRUST TO match Name on parcel Deed.*
- *Change Phone Number*

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: *10/30/18*

SIGNATURE: *[Signature]*

Please print your name: *David Chapman*

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