

10/05/2018
RECEIVED
NOV 21 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: 95-14004

DAVID W ST AMAND
1909 E SUNDANCE DR
POST FALLS ID 83854
Telephone Number: 2087732848

LYNNETTE M EVENSON ST AMAND
1909 E SUNDANCE DR
POST FALLS ID 83854
Telephone Number: 2087732848

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: 14 Nov. 2018 SIGNATURE: David W St Amand
Please print your name: David W. St Amand

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