

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 CLARK FORK-PEND OREILLE RIVER
BASIN WATER SYSTEM

CIVIL CASE NUMBER: 69576

Ident. Number: 96-2198
Date Received: 9/30/2021
Receipt No: N037544
Claim Fee: \$51.00
Received By: JD

RECEIVED

SEP 30 2021

**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

IDWR / NORTH

1. Name of Claimant(s)

GORDON CLAR REMBOWSKI & LYNNETTE ALLENE REMBOWSKI
REVOCABLE INTER VIVOS TRUST
PO BOX 113
LACLEDE ID 83841-0113

Phone: (208) 263-4298

2. Date of Priority: 1/2/1952

3. Source:

PEND OREILLE RIVER

Trib. to:

COLUMBIA RIVER

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
57N	02W	35	SW SW		BONNER	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A
DOMESTIC	01/01	12/31	0.02		
IRRIGATION	04/01	10/31	0.02		

7. Total Quantity Appropriated is:

0.02 C.F.S. and/or A.F.A.

8. Non-irrigation uses:

9. Place of use:

DOMESTIC within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
57N	02W	2	NW		NW	4	

IRRIGATION within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
56N	02W	2	NW		NW		1

Total Acres = 1

10. Do you own the property listed above as place of use? Yes

If your answer is no, describe in remarks below the authority you have to claim this water right.

11. Other Water Rights Used:

12. Remarks:

Priority Date Explanation:

13. Basis of Claim: License

14. 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 CLARK FORK-PEND OREILLE River Basin Adjudication." (b.) I/We do _____ do not X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: _____

For Organizations:

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

Trustee of Gordon C & Lynnette A Lombowski
Title Organization
Levada Lake Inter vivos Trust

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

____ of _____
Title Organization

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

Signature of Authorized Agent Lynnette A Lombowski Date 9-30-21

Title and Organization _____