

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

Claim ID: 97-9339

Date Received: 6-16-2022

Receipt No: N040079

Claim Fee: 25.00 By: JB

RECEIVED

JUN 16 2022

NOTICE OF CLAIM TO A WATER RIGHT

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes

Where Daily Use is less than 13,000 gallons per day

IDWR / NORTH

Please type or print clearly

- Name of claimant(s) RICHARD J. & Mary V. GUMMER Phone (509) 951-7402
Mailing address 151 Pettit Lane Priest Lake ID Zip 83856
Street or Box City State
Email address (optional) rfgm913@gmail.com
- Date of priority: (Only one per claim) 1963 (Explain priority date selected in Remarks)
Month/Day/Year (YYYY)
- Source of water supply (Check one) Ground Water ☒ or Other () (a) Well
which is tributary to (b) _____
- Location of point of diversion is: Township 59, Range 4, Section 5,
1/4 of _____ 1/4, or Govt. Lot _____ BM, County of _____;
Parcel no. RP59N04W053820A
Additional points of diversion, if any: Legal description reads = 5-59N-4W T4R35QURS
If available, GPS coordinates: N/A
- Description of diverting works (wells, pumps, spring boxes, pipelines, etc.) including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well.
Well, 2" line, don't know depth of well, As a rule, water is fairly close to the surface in this area.
- Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)
For Domestic purposes from 1/1 to 12/31 amount .02 cfs ☒ or AFY ()
For _____ purposes from _____ to _____ amount _____ cfs ☐ or AFY ()
- Total quantity claimed .02 cfs ☒ or AFY ()
- Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind)
Domestic for one (1) home

9. Location of place of use is: Township 59, Range 4, Section 5,
_____ 1/4 of _____ 1/4, Govt. Lot _____ BM, Parcel no. RP59N04W053820A
If different than shown in Item 4

for (check one) Domestic ☒ Stock () Domestic and Stock ()

Additional places of use, if any Legal description of property reads = 5-59N-4W T4S R35E CPW125

10. In which county(ies) are lands listed above as place of use located? BONNER

11. Do you own the property listed above as place of use? Yes ☒ No ()

If the answer is No, describe in Remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.

N/A or None ()

13. Remarks (include an explanation of the priority date selected):

When home was built

14. Basis of claim (check one) Beneficial Use ☒ Posted Notice () License () Permit () Decree ()

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number _____

15. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notices in the Clark Fork-Pend Oreille River Basin Water System 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: 1

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) Richard & Gurnee

Date: 6/14/2022

Mary V. Gurnee

Date: 6/14/2022

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am, and that I have signed the foregoing document in the space below as the

_____ of _____,
Agent's title (Please print) Name of organization (Please print)

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

Signature of Authorized Agent _____ Date _____

Printed Name of Authorized Agent _____

16. Notice of Appearance:

Notice is hereby given that I, (please print) _____, will be acting as attorney at law of behalf on the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____ Date _____

Address _____

Name of claimant(s) _____ Claim ID _____



MAKE CHECK PAYABLE TO:
BONNER COUNTY TREASURER
& TAX COLLECTOR
1500 Hwy 2 Suite 304
Sandpoint, ID 83864-1793

Phone: (208) 265-1433

IMPORTANT TAX DOCUMENT

3031*8**G50**0.788**1/2*****AUTO5-DIGIT 83864
GUMAER RICHARD J & MARY V
151 PETTIT LN
PRIEST LAKE ID 83856-9675



md
6/4/2022



eNoticesOnline.com
Go Paperless

AUTHORIZATION CODE
BON-7HUT4NXK

Property Location: 151 PETTIT LN 83856
Legal Description: 5-59N-4W
TAX 35
CPWRS

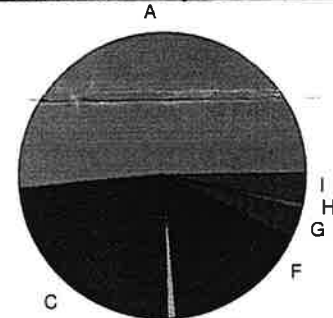
2nd HALF

BONNER COUNTY TAX YEAR 2021

Bill #: 47301
Tax Code Area: 19-0000
Parcel #: RP59N04W053820A

1st Half Due 12/20/2021	2nd Half Due 6/20/2022	Full 2021 Amount Due
Tax \$ 695.51	Tax \$ 695.51	Tax \$ 1,391.02
Late	Late	Late
Interest	Interest	Interest
Costs	Costs	Costs
Total	Total	Total
Assessed Value		
	2021	2020
LAND	76,250	
IMPRVMT	143,100	
TOT MKT	219,350	211,160
TOT TAX	1,391.02	1,392.46
TOT ACRES	.510	

Distribution of your 2021 Tax



Description	D	E Rate	Amount
A = COUNTY		.002691419	\$590.36
B = W BONNER BOND			\$0.00
C = W BONNER SUPL		.001248772	\$273.92
D = W BONNER OTHER		.000054345	\$11.92
E = CO RD/BRIDGE		.000575609	\$126.26
F = AMBULANCE DIST		.000270461	\$59.32
G = PRIEST LK LIBRA		.000177887	\$39.02
H = W BONNER CEM		.000034653	\$7.60
I = WEST PR LK FIRE		.000175005	\$38.38
J = OUTLET W/S		.000000000	\$0.00
DISTRICT TOTAL		.005228151	\$1,146.78
TRANSLATOR			\$15.00
FOREST ASSESSMENT			\$43.48
FOREST PRACTICES ACT			\$0.76
SOLID WASTE			\$185.00
AMOUNT DUE			\$1,391.02

★★★ IMPORTANT ★★★
PLEASE READ BOTH FRONT AND BACK
★★★ MONTHLY PAYMENTS ARE ACCEPTED ★★★

For information on Bonds visit:
WWW.BONNERCOUNTYID.GOV/TREASURER

TO AVOID LATE CHARGES, PAYMENTS MUST BE
RECEIVED OR POSTMARKED BY THE DUE DATE



PAY ONLINE AT: www.bonnercountyid.gov
\$1.00 ACH or 2.5% CARD FEE

Please fold on perforation BEFORE tearing