

2/16/2021

Dear Department of Water Resources,

I would like to inform you my husband Matthew Emmet Moran passed away February/8/2019. Accordingly, I would like to request the removal of his name for the following water rights:

37-21228

37-21230

37-21232

37-21234

37-21236

37-21238

RECEIVED

FEB 19 2021

DEPT OF WATER RESOURCES
SOUTHERN REGION

Please see attached Certificate of Death.

Regards,

Veronica D. Moran, Trustee
Moran Trust, dated 7/28/2014
Veronica D. Moran

SUPPORT DATA

IN FILE # 37-21228

Database updated
2/23/2021

DM

STATE OF IDAHO
CERTIFICATION OF VITAL RECORD

RECEIVED
FEB 19 2021
DEPT OF WATER RESOURCES
SOUTHERN REGION

STATE OF IDAHO
IDAHO DEPARTMENT OF HEALTH AND WELFARE
BUREAU OF VITAL RECORDS AND HEALTH STATISTICS
CERTIFICATE OF DEATH

Date Filed **FEBRUARY 21, 2019**

State File No. **2019-01728**

DECEDENT - LEGAL NAME MATTHEW EMMET MORAN			
SEX MALE	SOCIAL SECURITY NUMBER	AGE 49 YEARS	DATE OF BIRTH AUGUST 28, 1969
BIRTHPLACE PHILADELPHIA, PENNSYLVANIA		PLACE OF RESIDENCE BELLEVUE, IDAHO	
MARITAL STATUS AT TIME OF DEATH MARRIED		NAME OF SURVIVING SPOUSE (If wife, maiden name) VERONICA ROJO	WAS DECEDENT EVER IN U.S. ARMED FORCES? NO
FATHER - NAME JAMES AUGUSTON MORAN			BIRTHPLACE PENNSYLVANIA
MOTHER - MAIDEN NAME KATHLEEN DUGAN			BIRTHPLACE NEW JERSEY
METHOD OF DISPOSITION CREMATION		FUNERAL SERVICE LICENSEE RUSSELL D. MIKEL	
NAME AND ADDRESS OF FUNERAL FACILITY WOOD RIVER CHAPEL, HAILEY, IDAHO			
DATE OF DEATH FEB. 08, 2019	TIME OF DEATH 1:40 P.M.	CITY, TOWN OR LOCATION OF DEATH BELLEVUE, IDAHO	COUNTY OF DEATH BLAINE
CAUSE OF DEATH (underlying cause last) PRESUMED SUDDEN CARDIAC DISEASE			Approximate Interval Between Onset and Death MINUTES
a. DUE TO (or as a consequence of): CHEST PAIN AND SHORTNESS OF BREATH			
b. DUE TO (or as a consequence of): 			
c. DUE TO (or as a consequence of): 			
d. DUE TO (or as a consequence of): 			
OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not resulting in the underlying cause given above DIABETES; HYPERTENSION			WAS AN AUTOPSY PERFORMED? NO
MANNER OF DEATH NATURAL	NAME OF CERTIFIER RUSSELL D. MIKEL		TITLE CORONER
CORONER SUBSEQUENT CERTIFICATION IF NECESSARY			
EXTERNAL CAUSES ONLY			
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY	INJURY AT WORK?
LOCATION WHERE INJURY OCCURRED			
DESCRIPTION OF HOW INJURY OCCURRED			

This is a true and correct reproduction of the document officially registered and placed on file with the IDAHO BUREAU OF VITAL RECORDS AND HEALTH STATISTICS.

FEBRUARY 21, 2019

DATE ISSUED:

This copy not valid unless prepared on engraved border displaying state seal and signature of the Registrar.

James B. Aydelotte
JAMES B. AYDELOTTE
STATE REGISTRAR

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE





State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region • 650 ADDISON AVE W STE 500 • TWIN FALLS, ID 83301-5858

Phone: (208)736-3033 • Fax: (208)736-3037 • Website: www.idwr.idaho.gov

Brad Little
Governor

Gary Spackman
Director

February 23, 2021

MORAN TRUST
VERONICA D MORAN, TRUSTEE
14306 S PRAIRIE DAWN LN
HERRIMAN UT 84096-6556

Re: Name Removal on Water Right No(s): 37-21228, 37-21230, 37-21232, 37-21234, 37-21236 &
37-21238

Dear Ms. Moran:

The Department of Water Resources (Department) acknowledges the receipt of correspondence requesting to remove Matthew Emmet Moran from the above referenced water right(s). The Department has modified its records and has enclosed a computer-generated report for you.

Updating the ownership record for a water right does not reconfirm the validity of the right. When processing a Notice of Change in Water Right Ownership, the Department does not review the history of water use to determine if the right has been forfeited or deliberately abandoned through five years or more of non-use. To read more about water right forfeiture, including how to protect a water right from forfeiture, please see Idaho Code §§ 42-222 and 42-223.

Please note, water right owners are required to report any change of water right ownership and any change of mailing address to the Department within 120 days of the change. Reporting forms are available from any office of the Department, or from the Department's website.

If you have any questions concerning the enclosed information, please contact me at (208) 293-9908.

Sincerely,

Denise Maline

Denise Maline
Administrative Assistant 1

Enclosure(s)

c: Water District 37