

RECEIVED

MAR 12 2021

DEPARTMENT OF
WATER RESOURCESSTATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
STATEMENT OF COMPLETION
FOR SUBMITTING PROOF OF BENEFICIAL USE

NO 36832
3/26/2021
50.00

FOR OFFICE USE ONLY
Amt. of Fee \$ 50.00
Receipt No. C110031 - returned
Received By [Signature]
Date Received 3/12/2021

The Idaho Department of Water Resources considers this form a statement by the permit holder(s) that development of a water right has been **completed** and that water has been applied to beneficial use to the extent described below. **This form must be accompanied by an examination fee, when necessary, or by a completed Beneficial Use Field Report prepared by a certified water right examiner.** Please refer to the instructions and fee schedule for this form. If ownership of the permit has changed, contact any Department office or visit the Department's website at idwr.idaho.gov for an *Assignment of Permit* form. If you wish to relinquish your permit because you have not established the authorized use of the water and are not applying for an extension, please notify the Department in writing.

1. Permit No. 96-19606 Telephone No. (760)481-5838
2. Name of Permit Holder(s) ROBERT CROUSORE AND/OR MELIA CROUSORE
3. Mailing Address 7343 BOLERO ST. City CARLSBAD
State CA Zip 92009 Email ROBERT@CROUSORE.COM
4. Source of Water SPRING If **GROUND WATER** (well), Date Drilled mo. ____ / yr. ____
Well Driller _____ Drilling Permit Number _____

5. Extent of use(s) completed **as authorized by the water right permit:**

Domestic (No. of households) _____ Stockwater (No. and type of stock) _____
Irrigation (No. of acres) _____ Other Multiple Storage use Pond (Fire Protection, Recreation, Wildlife)

6. Total rate of diversion or storage volume for which proof is submitted _____ cfs OR 2.4 acre-feet.

7. Compliance with a measuring device requirement, lockable controlling device requirement, and/or other conditions of permit:
Refer to the approval conditions on your permit and respond accordingly.

The Department will not issue a license if permit conditions are not met.

Measuring Device	Is a measuring device required?	Yes ☐	No ☒
	If yes, has the measuring device been installed?	Yes ☐	No ☐
Lockable Controlling Device	Is a lockable device required to control the diversion?	Yes ☐	No ☒
	If yes, has the lockable device been installed?	Yes ☐	No ☐
Fish Screen	Is a fish screen required?	Yes ☐	No ☒
	If yes, has the fish screen been installed?	Yes ☐	No ☐

Other Conditions of Permit

Do the approval conditions on your permit require you to submit additional information in connection with your proof of beneficial use? If yes, list the conditions below and attach documents with the required information.

Completed? Yes ☐ No ☒

8. Fee Enclosed \$ 50.00 or not applicable ☐. See fee schedule on page 2 of the instructions.
Proof statements filed without an appropriate fee, will be considered incomplete.
9. Person to contact to accompany the Department representative during field examination of the water system.

Name TERRY CROUSORE Telephone Number (208) 946-9759
Mailing Address 342 FOREVER RANCH RD City ATHOL
State ID Zip 83801 Email terrycroushore@gmail.com

The information given on this form is my true statement of the extent to which the above numbered permit has been developed and water has been diverted and applied to a beneficial use. I understand that any undeveloped portion of the permit is relinquished to the State of Idaho.

Signature of Permit Holder [Signature] Date 3/8/21
(Include your title, if on behalf of company or organization)

Mail to: Idaho Department of Water Resources, PO Box 83720, Boise, ID 83720-0098

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State CA Zip 92009 Email ROBERT@CROUSORE.COM
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The Department will not issue a license if permit conditions are not met.

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Other Conditions of Permit

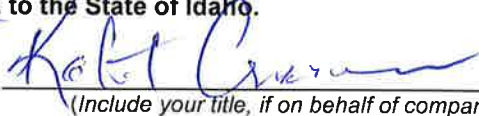
Do the approval conditions on your permit require you to submit additional information in connection with your proof of beneficial use? If yes, list the conditions below and attach documents with the required information.

Completed? Yes ☐ No ☒

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Signature of Permit Holder



(Include your title, if on behalf of company or organization)

Date

3/8/21



BRAD LITTLE
Governor

State of Idaho

DEPARTMENT OF WATER RESOURCES

322 East Front Street • P.O. Box 83720 • Boise, Idaho 83720-0098
Phone: (208) 287-4800 • Fax: (208) 287-6700 • Website: www.idwr.idaho.gov

GARY SPACKMAN
Director

March 17, 2021

ROBERT CROUSORE
MELIA CROUSORE
7343 BOLERO ST
CARLSBAD CA 92009-7103

PROOF ACKNOWLEDGEMENT LETTER

RE: Permit Nos. 96-9606 and 96-9607

Dear Permit Holders:

The Department acknowledges receipt of the proof of beneficial use form submitted for the above referenced permit. The next step in the process of developing a water right is for the Department to conduct a field examination to determine and confirm the use being made of the water.

Please be advised that Idaho Code § 42-248, requires you or the owner of this water right to maintain current ownership and address records on file with the Department. Forms to file a change of ownership of a water right and/or a change in the address of the water right owner are available from any Department office or at the Department's website at www.idwr.idaho.gov.

If you have any questions concerning the field examination, please contact the Northern Region Office of the Department located in Coeur d'Alene at (208) 762-2800.

Sincerely,

Debbi Judd
Technical Records Specialist

Enclosures