

RECEIVED

JAN 09 2015

Department of Water Resources
Eastern RegionSTATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

ID No.

TP-75-103

RECEIVED

APPLICATION FOR TEMPORARY APPROVAL OF WATER APPROPRIATION

(For a use not intended to become an established water right, not to exceed a total diverted volume of five (5) acre feet and not to exceed one (1) year duration in accordance with Section 42-202A, Idaho Code.)

Name of applicant: Lemhi County Road and Bridge Phone: 208-756-2861Mailing address: 206 Courthouse Drive City: SalmonState Idaho ZIP 83467 Email: jdavis@custertel.net1. Source of water: various location through out county tributary to Salmon River

2. Location of point(s) of diversion:

TWP	RGE	SEC	GOVT LOT	1/4	1/4	1/4	County	Source	Local name or tag #

3. Location of place of use:

TWP	RGE	SEC	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	

4. Describe proposed use of water: Lemhi County maintains gravel roads throughout the county, water is used during maintenance and construction activities. water is needed to properly grade and maintain public R.O.W.

5. Amount of water:

Maximum rate of diversion _____ cfs or _____ gpm.

Maximum daily volume .09 AF; total volume 5 AF.6. Duration of diversion: from March 1 (day-month) to November 15 (day-month).7. Describe proposed diverting works: 2 inch hose & pump attached to water truck8. a. Who owns the property at the requested point of diversion? Lemhi Countyb. Who owns the land to be irrigated or place of use? Lemhi County

c. If the property is owned by a person other than the applicant, describe the arrangement allowing access to the water:

9. Additional remarks: This is a county wide permit application, as we have 295 plus miles of gravel rds from both ends of Lemhi County. There is a short season of use when natural moisture is used, however when it is dry we need to supplement this with addition water

I hereby acknowledge that I assume all risk if the diversion and use of the water under this approval injures other water rights. I certify this is a temporary use and that I am not seeking a continuing right to use water.

Signature of applicant: [Signature] Date: 1-7-15Received by: SC Date: 1/9/15 Time: _____\$50.00 fee receipted by: SC # E040548 Date: _____

Watermaster comments received? _____ Date: _____

ACTION OF THE DIRECTOR, DEPARTMENT OF WATER RESOURCES

This is to certify that the department has examined this application for temporary approval to use water under the provisions of Section 42-202A, Idaho Code, and has determined that:

☐ A. The application for temporary approval should be denied.

☒ B. The application for temporary approval should be approved, since

1. The temporary approval can be properly administered.
2. Other water sources are not readily available.
3. The approval is in the public interest.
4. The approval will not injure known public values associated with the water source or any known water rights.

This application is therefore hereby:

☐ A. DENIED

☒ B. APPROVED, subject to the following conditions:

1. Diversion and use of water under this approval is subject to all valid existing water rights.
2. The applicant assumes all risk the use of the water under this approval may injure other water rights.
3. This approval authorizes a maximum diversion of 5.0 AF and a maximum rate of diversion of _____ cfs.
4. This approval does not grant a right-of-way across the land of another, does not create a continuing right to use the water and may not be used in connection with a use which requires a continuing water supply.
5. The department may cancel this approval at any time if the department identifies injury to other water rights.
6. This approval does not create a continuing right to use water.
7. The holder of this temporary permit shall not divert at a rate or in a manner that will significantly reduce the flow in the water source or otherwise adversely affect fish, wildlife or other public values.
8. Other: _____

9. This approval expires on _____.

Signed this 15th day of Jan, 2015.

Lyle Swank
For the Director



State of Idaho

DEPARTMENT OF WATER RESOURCES

900 N Skyline Dr., Ste A, Idaho Falls, Idaho 83402-1718

Phone: (208) 525-7161 FAX: (208) 525-7177 www.idwr.idaho.gov

C.L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Director

January 15, 2015

Lemhi County Road & Bridge
206 Courthouse Dr
Salmon ID 83467

Applicant:

Enclosed is your approved copy of Temporary Permit TP-75-103. Please take note of the effective dates on line 6 and the conditions on the back.

Sincerely,

A handwritten signature in blue ink, appearing to read "Sharla Cox", is written over a faint circular stamp.

Sharla Cox
Water Resource Administrative Assistant

Enclosure