

State of Idaho
Department of Water Resources

RECOMMENDATION OF WATERMASTER

Transfer No(s): 82030

Applicant's Name Bear Island Water Assn Inc

Watermaster's Recommendation:

- a) ☒ I do not oppose approval of this application.
b) ☐ I do not oppose approval of this application if it is conditioned as follows:

c) ☐ I oppose approval of this application for the following reasons:

d) ☐ Additional Comment:

Dated this 20th day of Dec, 2017.

Water District No: 01

Lyle Swank
Watermaster's Signature