

Block, Darla

From: Block, Darla
Sent: Tuesday, December 13, 2016 10:14 AM
To: 'Philip Stanaland'
Subject: RE: new doc 12

MR. Stanaland,

Just the original signed form in the mail with a \$100.00 license examination fee, and I will then be able to move forward with processing your proof form. I am unable to accept a copy via email or fax.

Sincerely,

Darla Block
Technical Records Specialist
Water Allocation Bureau
Ph. #(208) 287-4945
Darla.Block@idwr.Idaho.gov

-----Original Message-----

From: Philip Stanaland [<mailto:philip@wishfarms.com>]
Sent: Tuesday, December 13, 2016 7:37 AM
To: Block, Darla
Subject: new doc 12

Hi Darla, attached is the proof of beneficial use.
Let me know if anything else is required.
Thanks Philip

COPY

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

FOR OFFICE USE ONLY	
Amt. of Fee \$	Receipt No.
Received By	Date Received

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 dwr.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. 96-09605 Telephone No. 813-323-4374
 2. Name of Permit Holder(s) S+N of Sarasota LLC
 3. Mailing Address 1945 LINCOLN DR City SARASOTA
 State FL Zip 34236 Email philip@wishfarms.com
 4. Source of Water Hoodoo Creek If GROUND WATER (well), Date Drilled mo. ____ / yr. ____
 Well Driller N/A Drilling Permit Number N/A

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) 40 Other ____

6. Total rate of diversion or storage volume for which proof is submitted .80 cfs OR 3.0 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 \$ ____ 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 Philip Stansland Telephone Number 813-323-4374
 Mailing Address 1945 LINCOLN DR City SARASOTA
 State FL Zip 34236 Email philip@wishfarms.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 Philip Stansland Manager Date 12-12-16
 (Include your title, if on behalf of company or organization)

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