

RECEIVED

DEC 16 2015

DEPARTMENT OF
WATER RESOURCESSTATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

Notice of Change in Water Right Ownership

1. List the numbers of all water rights and/or adjudication claim records to be changed. If you only acquired a portion of the water right or adjudication claim, check "Yes" in the "Split?" column. If the water right is leased to the Water Supply Bank, check "Yes". If you are not sure if the water right is leased to the Water Supply Bank, see #6 of the instructions.

Water Right/Claim No.	Split?	Leased to Water Supply Bank?	Water Right/Claim No.	Split?	Leased to Water Supply Bank?
2-7018	Yes ☒	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐

2. Previous Owner's Name: Verlin Gingerich, Fanny Snider
Name of current water right holder/claimant
3. New Owner(s)/Claimant(s): David and Joy Snider
New owner(s) as listed on the conveyance document Name connector ☒ and ☐ or ☐ and/or
- 6425 SW Rio Vista Dr. Mountain Home ID 83647
Mailing address City State ZIP
- (208) 845-2133 blazinh@b@hotmail.com
Telephone Email
4. If the water rights and/or adjudication claims were split, how did the division occur?
☐ The water rights or claims were divided as specifically identified in a deed, contract, or other conveyance document.
☒ The water rights or claims were divided proportionately based on the portion of their place(s) of use acquired by the new owner.
5. Date you acquired the water rights and/or claims listed above: 1994
6. If the water right is leased to the Water Supply Bank changing ownership of a water right will reassign to the new owner any Water Supply Bank leases associated with the water right. Payment of revenue generated from any rental of a leased water right requires a completed IRS Form W-9 for payment to be issued to an owner. A new owner for a water right under lease shall supply a W-9. Water rights with multiple owners must specify a designated lessor, using a completed Lessor Designation form. Beginning in the calendar year following an acknowledged change in water right ownership, compensation for any rental will go to the new owner(s).
7. This form must be signed and submitted with the following **REQUIRED** items:
☒ A copy of the conveyance document – warranty deed, quitclaim deed, court decree, contract of sale, etc. The conveyance document must include a legal description of the property or description of the water right(s) if no land is conveyed.
☒ Plat map, survey map or aerial photograph which clearly shows the place of use and point of diversion for each water right and/or claim listed above (if necessary to clarify division of water rights or complex property descriptions).
☒ Filing fee (see instructions for further explanation):
 ☐ \$25 per *undivided* water right.
 ☐ \$100 per *split* water right.
 ☐ No fee is required for pending adjudication claims.
☐ If water right(s) are leased to the Water Supply Bank AND there are multiple owners, a Lessor Designation form is required.
☐ If water right(s) are leased to the Water Supply Bank, the individual owner or designated lessor must complete, sign and submit an IRS Form W-9.

8. Signature: David Snider David Snider 12-15-15
Signature of new owner/claimant Title, if applicable Date

Signature: Joy Snider Joy Snider 12-15-15
Signature of new owner/claimant Title, if applicable Date

For IDWR Office Use Only:

Received by di Date 12-16-15 Receipt No. 0101301 Receipt Amt. \$100.00

Active in the Water Supply Bank? Yes ☐ No ☐ If yes, forward to the State Office for processing W-9 received? Yes ☐ No ☐

Name on W-9 _____ Approved by _____ Processed by gmh Date 12-16-15

Date: 4/16/2015 [illegible]

2-7018

0.72 cfs

4/16/2015

Summary:

Snider

(8.0 ac & 0.14 cfs)

Gingerich

(32.0 ac & 0.58 cfs)

2-7018

(40.0 ac & 0.72 cfs)

[illegible]

QUITCLAIM DEED

For Value Received, I FANNIE M. SNIDER, a widow, do
hereby convey, release, remise and forever quit claim
unto DAVID SNIDER AND JOY SNIDER, husband and wife, whose address is: HC 85, Box 27, Mountain Home, Idaho
83647, the following premises to-wit:

That certain parcel of property located in Elmore County, Idaho, a particular description of which is attached
and a part hereof

Commencing at the center of the North boundary line of Section 32, and running thence
East along the North boundary line of Section 32 a distance of 330 feet to a point; thence South to the point
where this line intersects the North boundary line of the C. J. Strike Hydroelectric Development and Reservoir
Project, which is the southeast corner of the excepted parcel and the TRUE POINT OF BEGINNING; thence
North along the East property line to a point 1,570 feet South of the North boundary line of Section 32, which is
the Northeast corner of the excepted parcel; thence North 51 degrees 45 minutes 57 seconds west a distance of
560.16 feet along the North property line to a point, which is the Northwest corner of the excepted parcel; thence
South to the point where this line intersects the North boundary line of the C. J. Strike Hydroelectric Development
and Reservoir Project, which is the Southwest corner of the excepted parcel; thence South 75 degrees 39 minutes
East a distance of 454.2 feet along the North boundary line of the C. J. Strike Hydroelectric Development and
Reservoir Project to the TRUE POINT OF BEGINNING.

But saving and reserving unto the said grantor the right to the use and occupy the described premises throughout
her natural life.

Together with their appurtenances.

Dated this 18 day of November, 1994.

Fannie M. Snider

STATE OF IDAHO, COUNTY OF ELMORE

On this 18 day of Nov, 1994,
before me, a notary public in and for said State, personally
appeared FANNIE M. SNIDER, a widow,

known to me to be the person whose name is subscribed
to the within instrument, and acknowledged to me that
she executed the same.

Francis H. Hicks

Notary Public

Residing at Mountain Home
Comm. Expires 4-19-94

, Idaho

I hereby certify that this instrument was filed for
record at the request of

this _____ day of _____
19____, in my office, and duly recorded in Book
of Deeds at page _____

Ex-Officio Recorder

By _____ Deputy.

Fees \$
Mail to:

CORRECTION QUITCLAIM DEED

For Value Received, I FANNIE M. SNIDER, a widow, do hereby convey, release, remise and forever quit claim unto DAVID SNIDER and JOY SNIDER, husband and wife, whose address is: HC 85, Box 27, Mountain Home, Idaho 83647, the following premises to-wit:

That certain parcel of property located in Section 32, Township 5 South, Range 6 East, Boise Meridian, Elmore County, Idaho,

Commencing at the center of the North boundary line of Section 32, and running thence East along the North boundary line of Section 32 a distance of 330 feet to a point; thence South to the point where this line intersects the North boundary line of the C. J. Strike Hydroelectric Development and Reservoir Project, which is the southeast corner of the excepted parcel and the TRUE POINT OF BEGINNING; thence North along the East property line to a point 1,570 feet South of the North boundary line of Section 32, which is the Northeast corner of the excepted parcel; thence North 51 degrees 45 minutes 57 seconds west a distance of 560.16 feet along the North property line to a point, which is the Northwest corner of the excepted parcel; thence South to the point where this line intersects the North boundary line of the C. J. Strike Hydroelectric development and Reservoir Project, which is the Southwest corner of the excepted parcel; thence South 75 degrees 39 minutes East a distance of 454.2 feet along the North boundary line of the C. J. Strike Hydroelectric Development and Reservoir Project to the TRUE POINT OF BEGINNING.

~~But saving and reserving unto said grantor the right to mine and to use any and all the described premises throughout her natural life.~~

Together with their appurtenances.

This deed is given to correct that certain deed dated November 18, 1994, and filed as Instrument No. 284042, records of Elmore County, Idaho, wherein the subject property was erroneously described.

Dated this 13 day of December, 1994.

Fannie M. Snider

284637

STATE OF IDAHO, COUNTY OF ELMORE

On this 13th day of December, 1994, before me, a notary public in and for said State, personally appeared FANNIE M. SNIDER, a widow,

known to me to be the person whose name is subscribed to the within instrument, and acknowledged to me that she executed the same.

Residing at Mountain Home
Comm. Expires 7/2/98

Notary Public
Idaho

ELMORE COUNTY

I hereby certify that this instrument was filed for record at the request of

this 27 day of December
19 94, in my office, and duly recorded in Book
of Deeds at page at 4:21 PM

Ex-Officio Recorder

DOLORES ROBISON

By M. L. Robison
Fees \$ 3.00 Deputy.
Mail to:

STATE OF IDAHO
CERTIFICATION OF VITAL RECORD

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

CERTIFICATE OF DEATH

Date Filed DECEMBER 28, 2009

State File No. 2009-10548

DECEDENT - LEGAL NAME FANNIE M SNIDER			
SEX FEMALE	SOCIAL SECURITY NUMBER [REDACTED]	AGE 90 YEARS	DATE OF BIRTH DECEMBER 05, 1919
BIRTHPLACE BRUTUS, MICHIGAN		PLACE OF RESIDENCE MOUNTAIN HOME, IDAHO	
MARITAL STATUS AT TIME OF DEATH WIDOWED		NAME OF SURVIVING SPOUSE (If wife, maiden name)	WAS DECEDENT EVER IN U.S. ARMED FORCES? NO
FATHER - NAME ELIAS GREGORY			BIRTHPLACE MICHIGAN
MOTHER - MAIDEN NAME SUSANNA GEHMAN			BIRTHPLACE MICHIGAN
METHOD OF DISPOSITION CREMATION		FUNERAL SERVICE LICENSEE JERRY L. ROST	
NAME AND ADDRESS OF FUNERAL FACILITY ROST FUNERAL HOME, MOUNTAIN HOME, IDAHO			
DATE OF DEATH DEC. 23, 2009	TIME OF DEATH 2:26 P.M.	CITY, TOWN OR LOCATION OF DEATH BOISE, IDAHO	COUNTY OF DEATH ADA
CAUSE OF DEATH (underlying cause last) a. RESPIRATORY FAILURE DUE TO MAIN WEAKNESS			Approximate Interval Between Onset and Death 1 YEAR
DUE TO (or as a consequence of): b. MUSCLE WEAKNESS MULTIPLE INFARCTS			1-2 YEARS
DUE TO (or as a consequence of): c. HYPERVISCOSITY SYNDROME			1-2 YEARS
DUE TO (or as a consequence of): d. MULTIPLE MYELOMA MONOCLONAL GAMMOPATHY			4-5 YEARS
OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not resulting in the underlying cause given above NONE STATED			WAS AN AUTOPSY PERFORMED? NO
MANNER OF DEATH NATURAL	NAME OF CERTIFIER ALLAN JEFFERY, D.O.		TITLE PHYSICIAN
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.

DECEMBER 28, 2009

DATE ISSUED: _____

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

Jane S. Smith

JANE S. SMITH
STATE REGISTRAR

