

HEARING

Applications for Permit: 15-7387

Date: April 13, 2015

Presiding Officer: James Cefalo

Assisted by: Sharla Cox

NAME	PHONE NUMBER ADDRESS, CITY, ZIP	EMAIL ADDRESS	REPRESENTING
Daniel Christopher	329 N. 100 W.		Self
Pat Christopher	329 N. 100 W.	PatChris@ATCNet.Net	Self
John Christopher	245 W 400 N Malad	akkrstie@hotmail.com	Self
Jared Simpson	3970 E Hwy 36 Malad Id 83252		Samarie Tr
Mark Tpsen	2710 S 200 E Malad Id 83252		Samarie Tr
Charles Don atherton	1175 180 E Malad Idaho 83252		Self.
Chad Rindlsbacher	870 N 400 W Malad Idaho 83252		Rotation crop growers & Self

If you are the applicant or the protestant, you can sign in and add your phone number. If you are not the protestant or the applicant, please fill in all the address information. PLEASE MAKE SURE TO ALWAYS PUT YOUR PHONE NUMBER AND EMAIL, IF POSSIBLE.
Thank you, IDWR.

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NAME	PHONE NUMBER ADDRESS, CITY, ZIP	EMAIL ADDRESS	REPRESENTING
Lanny Schow	554 So 5400 W Mabui, Id 83252	lannyschow@gmail.com	

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