

RECEIVED

NOV 17 2014

Department of Water Resources
Eastern Region

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

Fee \$250.00

Receipt no E040428

Received by SC

Date 11/21/2014

Request to Reinstate a Permit Lapsed more than Sixty Days

Statements of Completion for Submitting Proof of Beneficial Use submitted more than sixty (60) days after mailing of a lapsed permit notice must be accompanied by a Beneficial Use Field Report prepared by a certified water right examiner as the result of an examination to clearly confirm and establish the extent of the beneficial use of water established in connection with the permit during the time authorized by the permit and any extensions of time previously approved, a statement of reasonable cause for filing late proof of beneficial use, and a reinstatement application fee of \$250 per§ 42-218a(2), Idaho Code.

Statement of reasonable cause for filing a late proof of beneficial use:

When IDWR Permit 15-7079 was approved on September 15, 1981, we thought the IDWR would send us a "Proof of Beneficial Use" Form, after we had installed our irrigation system and used it.

We never did receive the "Proof of Beneficial Use" Form to complete. It was possibly lost or misplaced; as Grant had injuries at his job. He had an eye injury in 1982 and later on broke a vertebra in his back and had 2 surgeries for this injury and was unable to work any more. I (Bernice) went to work in 1985 and still had my 4 children in school at that time.

We thought the IDWR would contact us if they need anything else, so the documentation was over looked. We just assumed if IDWR needed more to prove up on the water rights, they would let us know.

Required items:

- ☐ Statement of Completion for Submitting Proof of Beneficial Use
- ☐ Beneficial Use Field Report
- ☐ Reinstatement application fee of \$250

The information contained in this statement is true to the best of my knowledge. I understand that should the department reinstate my permit that the priority date will be advanced to the day that proof of beneficial use was received.

Grant Weeks
Signature of Permit Holder or Authorized Representative

Grant Weeks
Print Name and Title if applicable

10-09-14
Date

Bernice Weeks
Signature of Permit Holder or Authorized Representative

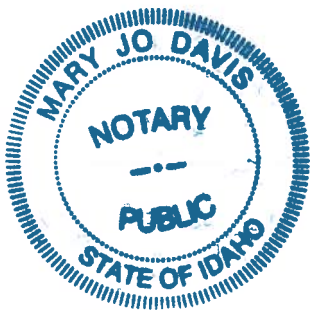
N. Bernice Weeks
Print Name and Title if applicable

10-09-14
Date



State of: ID)
County of: Oneida)ss:

On October 9, 2014, before me the undersigned, a Notary Public, in and for said state, personally appeared Grant Weeks and N. Bernice Weeks, known to me or proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same. IN WITNESS WHEREOF I have set my hand and official seal on the date shown above.



Mary Jo Davis
Notary Public
Residing: malad city
Commission Expiration: 9/26/2014