

12/99

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECOMMENDATION OF WATERMASTER

Application No: TC-34-97

Applicant's Name: LYNN METCALF

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: I spoke with Gary on problem
with page 2 LED answer, both
yes & no boxes were checked, he said
water right to be transferred has not been used.

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

d) ☐ Additional Comment: _____

Dated this 3rd day of July, _____.

Water District No: 34

[Signature]
Watermaster's Signature

Use reverse side of page if you need more space.