

**IDAHO DEPARTMENT OF WATER RESOURCES
APPROPRIATION APPLICATION ANALYSIS SHEET**

W.R. # 95-10454

APPLICATION ID # 75569

ENT. 5/11

BCA 5/13/09

OK to Publish

5/8/09

APPLICANT: CDS Stoneridge Utilities, LLC

BY: KR

DATE: 5/11/2009

ITEM REQUIRED INFORMATION

1. ☒ Name and Address
2. ☒ Source
3. ☒ Point of Diversion & County
4. ☒ Quantity
5. ☒ Nature of Proposed Use
6. ☒ Period of Use
7. ☒ Total Quantity
8. ☒ Description of diverting works
9. ☒ Time required for b/u
10. ☒ Proposed use
11. ☒ Place of use or acres irrigated
12. ☒ Other water Rights
13. ☒ Ownership
14. ☒ Map
15. ☒ Signature
16. ☒ Fee (Amt, receipt, acknowledgement)

*** Send info sheet Y() N()

ADDITIONAL INFORMATION

(Yes)(No)

- ☒ Shape File Created Date 5/1 By: KR
- ☐ Field check: by _____
- ☐ Field report attached
- ☐ Analysis Supp. attached(>5cfs/500af)
- ☐ Water delivered by water master? Water District # _____

PROCESSING

(Yes)(No)

PRIORITY DATE: 4/12/2009

(Include Moratorium Remark)

Statewide Advertising: (Diversion rate greater than 10 cfs or 1,000 af).

ADVERTISE IN:

Bonner County
Newspaper: BCVBC + Press-Review Times
Dates scheduled for publication BC 5/21-28 PRT 5/20-27
Affidavit of Publication received: BCVBC 6/2/09 PRT 6/9/09
Dates actually published: BCVBC 5/21-28/09 PRT 5/20-27/09
Application published correctly. Yes ☒ No ☐
If not, action taken: _____

Final Date for Protest: 6/8/09

Protests Received: Yes _____ No ☒

LETTERS SENT REQUESTING:

- ☐ Dam Information ☐ Fish Information
☐ Power Information ☐ Other: _____

INFORMATION RECEIVED:

- ☐ Dam Information ☐ Fish Information
☐ Power Information ☐ Other: _____

GROUNDWATER SECTION

WD Permit No.'s:

Tag #

Type:

Fees

Receipt No.

Upgrade Needed?

<u>000410131</u>	Dom. ☒ Non-Dom. ☒	Paid \$ _____	_____	Y() N(☒)
_____	Dom. ☐ Non-Dom. ☐	Paid \$ _____	_____	Y() N()
_____	Dom. ☐ Non-Dom. ☐	Paid \$ _____	_____	Y() N()

- ☐ Groundwater management area
- ☐ Critical ground water area
- ☐ Well Drilling Permit required
- ☐ Well Drilling Application and Fees received
- ☐ Well Drilling Application approved?

Remarks: _____

FINAL REGIONAL PROCESSING/REVIEW

(Yes)(No)

- ☐ Notice of pending void order issued.
- ☐ Further information required from applicant _____
- Final order response date: _____/_____/_____

- ☐ Measuring device required
- ☐ Measuring port required
- ☐ Special conditions: _____
- ☐ Special conditions of approval supplement and/or cover letter attached: _____

Approval Recommended by: Eric [Signature]

Date: 6/15/2009 Sr. Agent initial [Signature]