

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

W.R. # 95-10595

APPLICATION ID # 75625

ENT. 5/29 BCA 6/26/09 OK to Publish 6/25/09

APPLICANT: Douglas & Michelle Albert BY: KD DATE: 5/29/2009

ITEM REQUIRED INFORMATION

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

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

ADDITIONAL INFORMATION

(Yes)(No)
☒ Shape File Created Date 5/29 By: KD
☐ Field check: by _____
☐ Field report attached
☐ Analysis Supp. attached (>5cfs/500af)
☐ Water delivered by water master? Water District # _____

PROCESSING

(Yes)(No) PRIORITY DATE: 5/21/2009

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

ADVERTISE IN:

Keotenai County
 Newspaper: ODA
 Dates scheduled for publication 7/2 + 9/09
 Affidavit of Publication received: 7/16/09
 Dates actually published: 7/2 + 9/09
 Application published correctly. Yes ☒ No ☐
 If not, action taken: _____

Final Date for Protest: 7/20/09
 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 # <u>00040889</u>	Type: <u>Dom.</u> ☒ Non-Dom. ☐	Fees Paid \$ <u>125.00</u>	Receipt No. <u>N280665</u>	Upgrade Needed? <u>Y</u> ☒ N () ☐ <u>paid</u>
		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. Final order response date: ____/____/____
☒ Further information required from applicant _____

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

Approval Recommended by: Beth Franklin Date: 8/7/2009 Sr. Agent initial KD