

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 95-08138

Priority: September 25, 1981

Maximum Diversion Rate:

0.50 CFS

Maximum Diversion Volume:

240.0 AF

This is to certify, that CARLIN BAY SERVICES CORP
C/O MIRNA-MAR VANDERHEYDEN
609 W APPLE DR
DELTA CO 81416

has complied with the terms and conditions
of the permit, issued pursuant to Application for Permit dated September 25, 1981; and
has submitted Proof of Beneficial Use on October 22, 1990. An examination indicates
that the works have a diversion capacity of .500 cfs of water from:

COEUR D ALENE LAKE

tributary to SPOKANE RIVER

source, and a water right has been established as follows:

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>RATE OF DIVERSION</u>	<u>ANNUAL VOLUME</u>
DOMESTIC	01/01 to 12/31	0.50 CFS	240.0 AF

LOCATION OF POINT(S) OF DIVERSION:

SWSE , Sec. 31, Township 49N, Range 03W
KOOTENAI County

PLACE OF USE: DOMESTIC
TWN RGE SEC

49N 03W 31	NENE	SENE	NESE
Lot 3(NWSE)	Lot 4(SWSE)	Lot 4(SESE)	

CONDITIONS/REMARKS:

1. The maximum diversion volume is defined as the maximum allowable volume of water that may be diverted annually from the source under this right. The use of water confirmed by this right is limited to the amount which can actually be beneficially used. The maximum diversion volume may be adjusted to more accurately describe the beneficial use or to implement accepted standards of diversion and use efficiency.
2. This water right is appurtenant to the described place of use.
3. This right is subject to all prior water rights and may be forfeited by five years of non-use.
4. Modifications to or variance from this license must be made within the limits of Section 42-222, Idaho Code, or the applicable Idaho law.
5. The issuance of this right in no way grants any right-of-way or easement across the land of another.
6. Domestic use is for 400 homes.

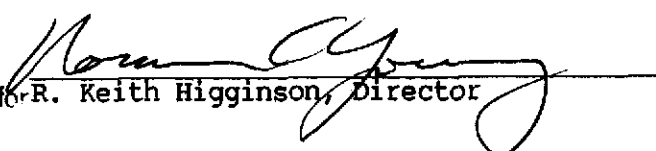
MICROFILMED
SEP 17 1992

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 95-08138

This license is issued pursuant to the provisions of Section 42-219, Idaho Code.
Witness the seal and signature of the Director, affixed at Boise, this 10TH
day of July, 1992.

Acting for  R. Keith Higginson, Director

SEP 17 1992

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

For Office Use Only
\$15 FEE Received by if
Date 10-9-86
Receipt 39295

REQUEST FOR EXTENSION OF TIME

To provide additional time in which to submit proof
of beneficial use for a water right permit

RECEIVED
OCT 6 1986

Department of Water Resources

The Idaho Department of Water Resources will consider this form as a request that the permit holder(s) be granted an additional period of time in which to complete development of a water right under the provisions of Section 42-204, Idaho Code.

Permit No. 95-8138

Name(s) of Permit Holder: CARLIN BAY SERVICES CORPORATION

Post Office Address: Route 2, Box 163, Harrison, Idaho, 83833

Telephone No. 208-689-3834

Date Proof is Due: November 1, 1986

Describe what work has been completed toward the development of this water right:
(This must be filled out! If no work has been completed, show "none".)

The following has been constructed and/or installed: Two pumps in lake;
Three 30,000 gallon reservoirs; filter plant; 124 lots have water service
to the lot lines and 9 lots have been hooked-up and are presently being
serviced.

Costing \$ 300,000+

The permit holder(s) has been unable to complete the remainder of the work for the following reasons:

There are 199 lots in the project, 124 of which have been developed and
water has been brought to their lines. The remaining 75 lots are in the
process of being developed, but have not yet been completed. This
extension of time is needed in order to complete development of these 75
lots which will also be serviced by this water system.

Permit holder(s) request an extension to November 1, 1991 By: CARLIN BAY SERVICES CORP.
(1 yr. minimum) Pres..

FEE: \$15.00

IF OTHER THAN PERMIT HOLDER,
POWER OF ATTORNEY MUST BE SUPPLIED.

ACTION OF THE DEPARTMENT OF WATER RESOURCES

IT IS HEREBY ORDERED that the above request for extension of time be APPROVED and the time within
which to submit proof of beneficial use is extended to November 1, 1990.

Signed this 21st day of October, 19 86.

A. Glen Saxton
Chief, Operations Bureau

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR PERMIT APPROVED

To appropriate the public waters of the State of Idaho

1. Name of applicant Carlin Bay Services Corporation Phone (208)689-3670
Post office address Route 2, Box 163, Harrison, Idaho 83833
2. Source of water supply Lake Coeur d'Alene which is a tributary of _____
3. Location of point of diversion is SW $\frac{1}{4}$ of SE $\frac{1}{4}$ of Section 31 Township 49N
Range 3W B.M. Kootenai County, additional points of diversion if any: None

4. Water will be used for the following purposes:

Amount 0.25 cfs for Domestic purposes from Jan 1 to Dec 31 (both dates inclusive)
(cfs or acre-feet per annum) Lawn
Amount 0.25 cfs for Irrigation purposes from Apr 15 to Oct 15 (both dates inclusive)
(cfs or acre-feet per annum)
Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)
Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)

5. Total quantity to be appropriated:

a. 0.50 cubic feet per second and/or b. _____ acre-feet per annum.

6. Proposed diverting works:

a. Description of ditches, flumes, pumps, headgates, etc. Submersible Lake Pumps

b. Height of storage dam N/A feet, active reservoir capacity _____ acre-feet; total reservoir capacity _____ acre-feet, materials used in storage dam: _____

Period of year when water will be diverted to storage _____ to _____ inclusive.
(Month/Day) (Month/Day)

c. Proposed well diameter is N/A inches; proposed depth of well is _____ feet.

7. Time required for the completion of the works and application of the water to the proposed beneficial

use is 5 years (minimum 1 year — maximum 5 years).

8. Description of proposed uses:

E $\frac{1}{2}$ NE $\frac{1}{4}$ 31-49-3 NW $\frac{1}{4}$ 32-49-3
E $\frac{1}{2}$ SE $\frac{1}{4}$ 30-49-3 SE $\frac{1}{4}$ 31-49-3

a. If water is not for irrigation:

(1) Give the place of use of water: SW $\frac{1}{4}$ of _____ $\frac{1}{4}$ of Section 29 Township 49N

Range 3W B.M.

(2) Amount of power to be generated: N/A horsepower under _____ feet of head.

(3) List number of each kind of livestock to be watered N/A

(4) Name of municipality to be served N/A, or number of families to be supplied with domestic water 400.

(5) If water is to be used for other purposes describe: _____

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b. If water is for irrigation, indicate acreage in each subdivision in the tabulation below:

TWP	RANGE	SEC.	NE¼				NW¼				SW¼				SE¼				TOTALS
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	
49	3W	29									40	40	40	40					160
49	3W	30													10			40	50
49	3W	31	40			40									40	30	10	40	200
49	3W	32		40			40	40	5	35									160

Total number of acres to be irrigated 570

c. Describe any other water rights used for the same purposes as described above. N/A

9. a. Who owns the property at the point of diversion Lands West, Inc.

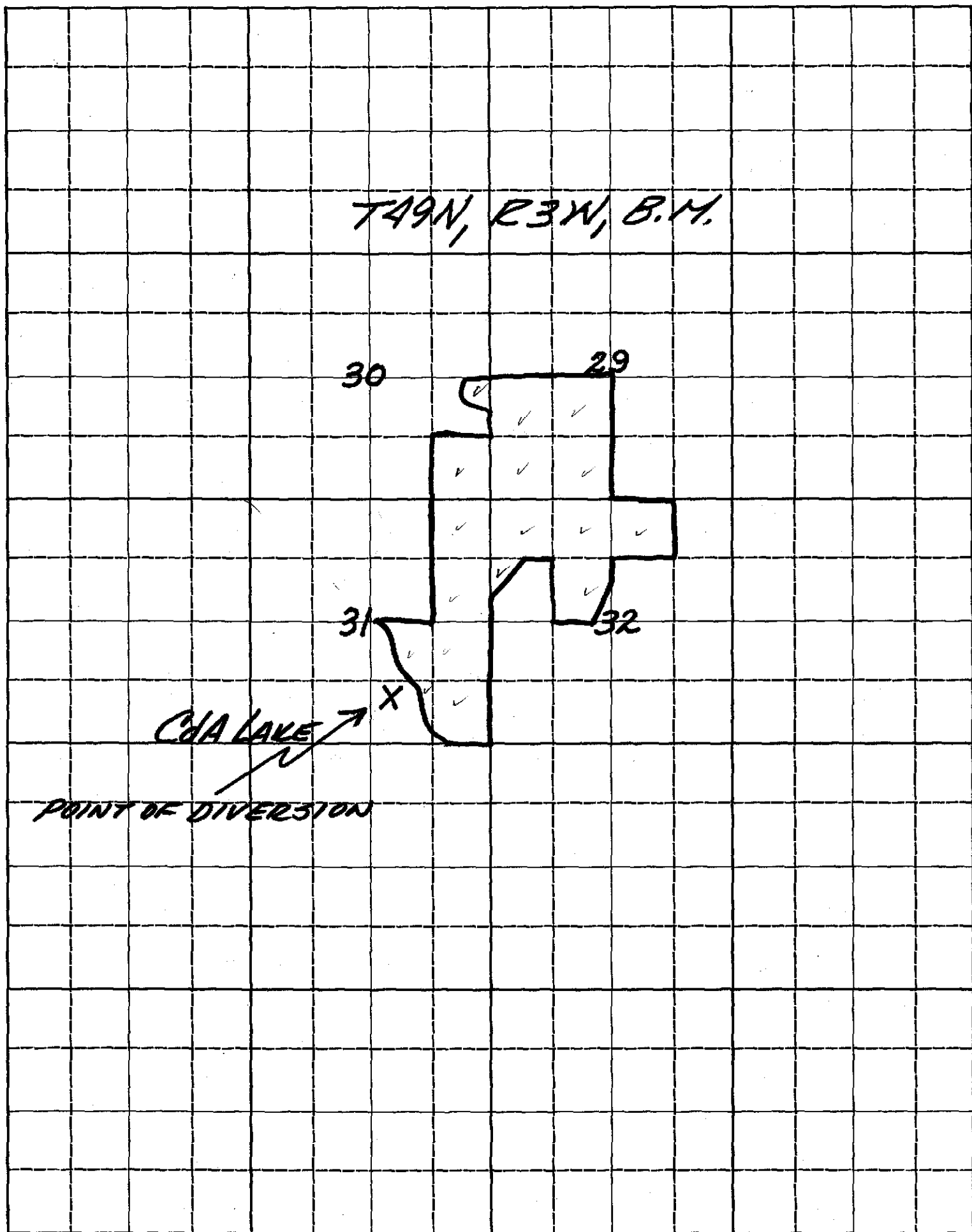
b. Who owns the land to be irrigated or place of use Lands West, Inc.

c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing Same Ownership

10. Remarks

RECORDED

11. Map of proposed project: show clearly the proposed point of diversion, place of use, section number, township and range number.



Scale: 2 inches equal 1 mile.

BE IT KNOWN that the undersigned hereby makes application for permit to appropriate the public waters of the State of Idaho as herein set forth.

MICROFILMED

[Signature]
(Applicant)

Proposed Priority 9/25/1981

Received by ms Date 9/25/81 Time 1:00 PM
Preliminary check by TK Fee \$ 45.00
Receipted by ms Date 10/15/81 (18369)
Publication prepared by ms Date 10/15/81
Published in Coeur d'Alene Press
Publication dates 10/22-29/81
Publication approved ms Date 11/3/81
Protests filed by: none

Copies of protests forwarded by _____
Hearing held by _____ Date _____
Recommended for approval denial by RC

ACTION OF THE DIRECTOR, DEPARTMENT OF WATER RESOURCES

This is to certify that I have examined Application for Permit to appropriate the public waters of the State of Idaho No. 95-8138 , and said application is hereby APPROVED .

1. Approval of said application is subject to the following limitations and conditions:

- a. SUBJECT TO ALL PRIOR WATER RIGHTS.
- b. Proof of construction of works and application of water to beneficial use shall be submitted on or before November 1 , 19 86 .
- c. The rate of diversion, if water is to be used for irrigation under this permit, when combined with all other water rights for the same land shall not exceed 0.02 cubic feet per second for each acre of land.
- d. Other: The issuance of this permit in no way grants any right-of-way or easement across the land of another.

Witness my hand this 20th day of November , 19 81

L. Glen Saxton
Chief, Operations Bureau

RECORDED

LICENSE REVIEW CHECKLIST

Permit # 95-08138

Date 05-08-92 21

	Yes	No	
NAME	☐	☒	Address Change?
PRIORITY DATE	☐	☒	Advance? _____
	☐	☒	Memo to Advance
	☐	☒	Order to Reinstate Needed?
TOTAL CFS	☐	☒	Incorrect Fee for rate recommended?
	☐	☒	Disagree with Actual Measurement? <u>(Not clear where taken)</u>
	☒	☐	App. 80 Allowable for 400 DOM / .50 cfs (per permit + capacity)
	☐	☒	Disagree with Theoretical? <u>$(30 \times 8.8 \times .7 = 496)$</u>
	☐	☒	Limited by Capacity? <u>.50 cfs $280' + (2.31 \times 40)$</u>
TOTAL VOLUME			Rate/ac _____ AFA Irr. Season _____
			Standard Irr. Season _____
			Season Recommended _____
	☒	☐	Disagree with Examiner's Calculations?
		☒	<u>$400 \times .6 = 240$ AFA (DOM)</u>
		☒	Limited by Flow? <u>.50 $\times 365 \times 1.9835 = 362,240$</u>
SOURCE	☐	☒	Changes? Clarification of <u>Originally</u>
	☐	☒	<u>Intended</u> source
	☐	☒	Notice of Intent to Void.
P/D			Verify with Map
	☐	☒	Amendment Needed? <u>No Lets</u>
	☐	☒	Is Overlap Analysis a Consideration?
P/U			Verify with Map
	☐	☒	Amendment Needed? <u>Drop all except Sec 31</u>
	☐	☒	Is Overlap Analysis a Consideration?
USES	☐	☒	Change(s) in Nature of Use? <u>Drop IRR</u>
	☐	☒	Amendment Needed? _____
REMARKS	☐	☒	Multiple P/Ds in 1/4 1/4? _____
	☒	☐	Non-Irr. Uses <u>DOM / 400 Homes</u>
	☐	☒	Special Overlap Condition _____
	☐	☒	Other _____
CONDITIONS	☐	☒	Measuring Device
	☐	☒	W/Master Control
	☐	☒	Overlap
	☐	☒	Water Quality
			DATES/MISC
		☒	Water Dist.
		☒	App Rec'd
		☒	Exam Made

COMMENTS/MEMOS NEEDED: Can allow up to .50 (capacity + Permit) for 400 DOM
Used 30hp (2-15 h.p. pumps) + 40 psi (low end DOM 40-60)
Reduce P/U

License ☐ 10-Day ☒ 15-Day ☐ Special Correspondence _____

MEMORANDUM

TO: FILE #95-08138

FROM: PAM SKAGGS *CS*

RE: DIVERSION RATE FOR DOMESTIC

DATE: 11-MAY-1992

=====

I calculated the horsepower equation using 30 h.p. (2-15 h.p. pumps) and used 40 psi as a reasonable assumption.

$$\frac{30 \times 8.8 \times .7}{280' + (2.31 \times 40)} = 0.496 = 0.50 \text{ cfs}$$

The capacity of the system equaled the total diversion approved by the permit. The field examiner found no irrigation and stated that irrigation is not allowed. The permit was approved for 0.50 cfs for irrigation and domestic use, but only domestic use was found. The maximum allowable for 400 homes is approximately 0.80 cfs. I recommend the entire 0.50 cfs for domestic use.

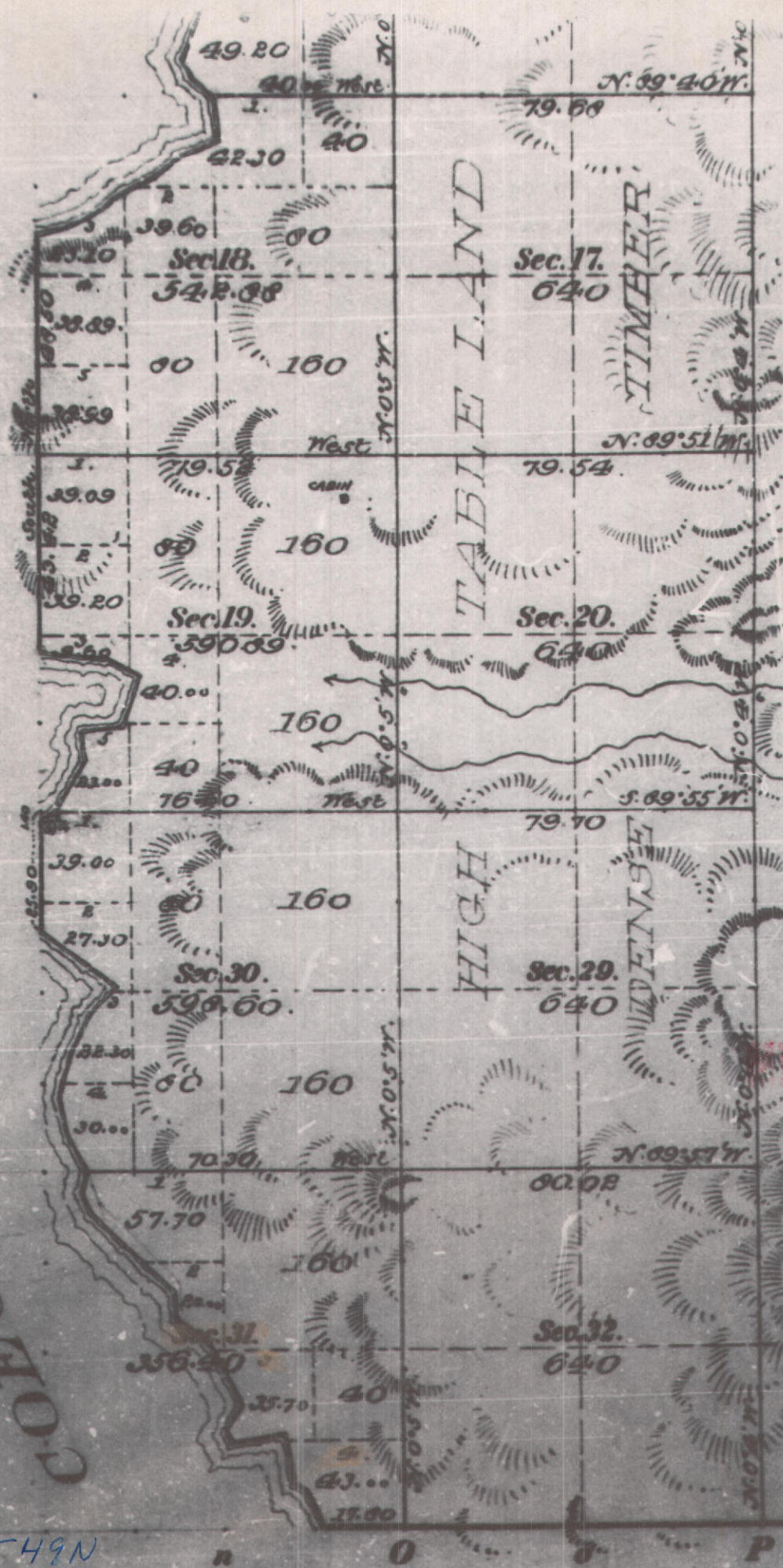
APPROVED

SEP 17 1992

DAKOTA

COEUR

T49N
R03W



Sec. 16.

Sec. 21.

Sec. 28.

RECORDED
SEP 17 1892

Total number of Ac

Survey Designated	By Whom Surveyed	Date of Interest	Amount of Survey M. Ch. L.	When Surveyed
Con 133		June 10th 1891	2 47 66	Nov. 7-9-11

STATE OF IDAHO
DEPATRMANT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT SUPPLEMENT
INITIAL CHECK LIST

STATUS
Y/N

- N Non-Standard Approval Conditions (If yes attach copy of conditions)
N Measuring Device required
Y Report labled and Quad sheet attached
N Aerial Photo requested: date _____ by _____
N Aerial Photo attached
_____ Subdivision or Ownership Plat attached
Y Government Lot Plat attached
N Additional Information from microfische attached
Y Possible Overlap found, Abstract attached
Y Well log numbered and attached
Y Well inspection form numbered and attached
Y Plotted on exam maps
_____ Ready For Field Examination

Person to contact for Appointment: PARKER HANSON
Phone _____ Address Box 63
HARRISON, ID. 83833

Remarks: 9:00AM

16 mi From FREEN 2.5 past TURNER Bay
LEFT BLACK FIRE PLACE - 3 CEDAR House
YELLOW & CREAM GMC

LEPARD & FRAME
RC WORST - GEORGE 5128-30
1/0 122 2400

6,000 2/11 2650
8900

PERMIT NUMBER

SEP 17 1992

95-8/38





95-8138





RECEIVED
JUN 24 1991

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

Department of Water Resources

A. GENERAL INFORMATION

Permit No. 95-08138
Phone No. 415-478-1050 DAY
415-898-8493 NIGHT

1. Owner: CARLIN BAY SERVICES CORP.
Current Address: BOX 1674 COEUR D'ALENE, ID. 83814

2. Accompanied by: PARKER HANSON EXAM. DATE: 4/12/91
Address: BOX 63 HARRISON, ID. 83833 Phone No. 689-3670

Relationship to Permit Holder: _____

3. Source: COEUR D'ALENE L. tributary to SPOKANE R.

B. OVERLAP REVIEW

1. Other water rights with same place of use: NONE

☐ Copies Attach

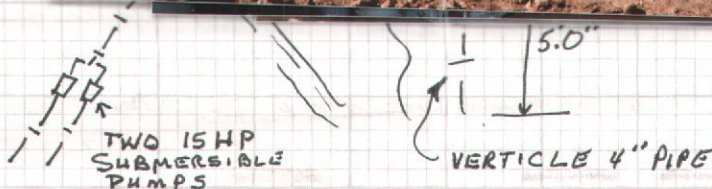
2. Other water rights with same point of diversion: NONE

☐ Copies Attached

☐ Copies of Field

C. SYSTEM DESCRIPTION

1. Dive
size.



Scale: 1" = NTS

2. ☒ Copy of U.S.G.S. Quadrangle Attached
Showing location(s) of point(s) of diversion and
place(s) of use (required).

☒ Photo of Diversion and System Attached
(required for all but single household domestic groundwater, and stockwater.

☐ Aerial Photo Attached
(required for irrigation of 10 acres or more)

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RECEIVED
JUN 24 1991

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

Department of Water Resources

A. GENE

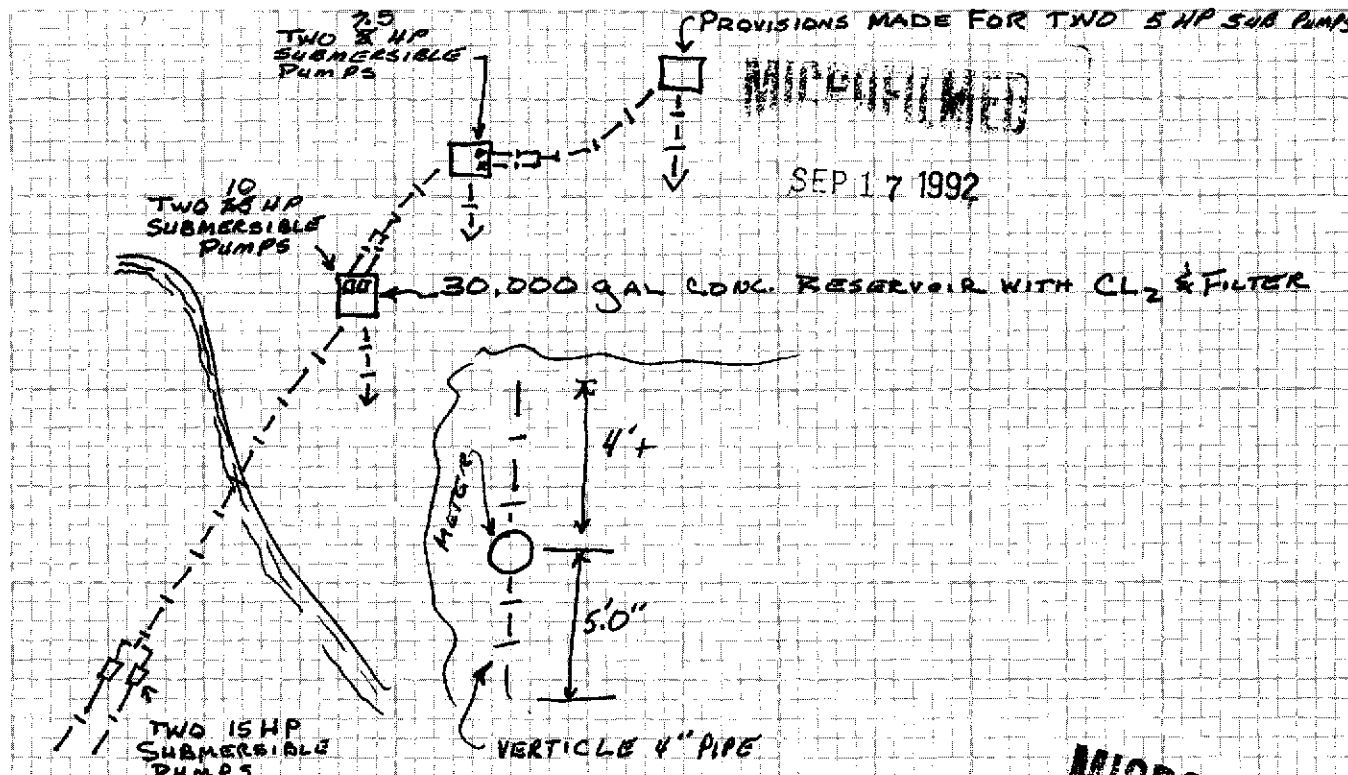
1. Ow
Cur
2. Acc
Add
Ri
3. Sou

B. OVER

1. Othc
—
2. Othc
—

C. SYSTE

1. **Diversion System Diagram:** Indicate all major components and distances between components. Indicate weir size/ditch size/pipe i.d. as applicable. ☐ Alternative diagram attached



Scale: 1" = NTS

2. ☒ Copy of U.S.G.S. Quadrangle Attached
Showing location(s) of point(s) of diversion and
place(s) of use (required).
- ☒ Photo of Diversion and System Attached
(required for all but single household domestic groundwater, and stockwater).
- ☐ Aerial Photo Attached
(required for irrigation of 10 acres or more)

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SEP 17 1992

System Description (continued)

3. Narrative: Description (As operating at time of measurement. Indicate pressure, number of sprinklers, etc.)

TWO 15 H.P. SUBMERSIBLE PUMPS W/ 1" LINE TO 30,000 GAL RESERVOIR
 W/ 6" & FILTERS, A TWO 10 HP PUMPS WHICH DELIVER WATER TO A SECOND
 A SECOND RESERVOIR W/ 6" GRAVITY FLOW PIPELINE TO HOMES &
 TWO 2.5 HP PUMPS WHICH DELIVER WATER TO A THIRD RESERVOIR
 WHICH HAS A 6" GRAVITY FLOW PIPELINE TO
 HOMES AND PROVISIONS FOR TWO 5HP PUMPS FOR FUTURE
 ADDITIONS TO THE SYSTEM

☐ See Remarks on page 4 for continuation

4.

Well or Diversion Identification No.*	Motor Make	Hp	Motor Serial No.	Pump Make	Pump Serial No. or Discharge Size
IN LAKE	SUBMERSIBLE	15	TWO PUMPS		
RES #1	"	10	" "		
" #2	"	1 1/2	" "		

*Code to correspond with No. on map and aerial photo

5. Point(s) of Diversion:

Ident. No.	Gov't. Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County	Method of Determination/Remarks
	4	NW	SW	SE	31	49N	3W	KOOTENAI	MAP

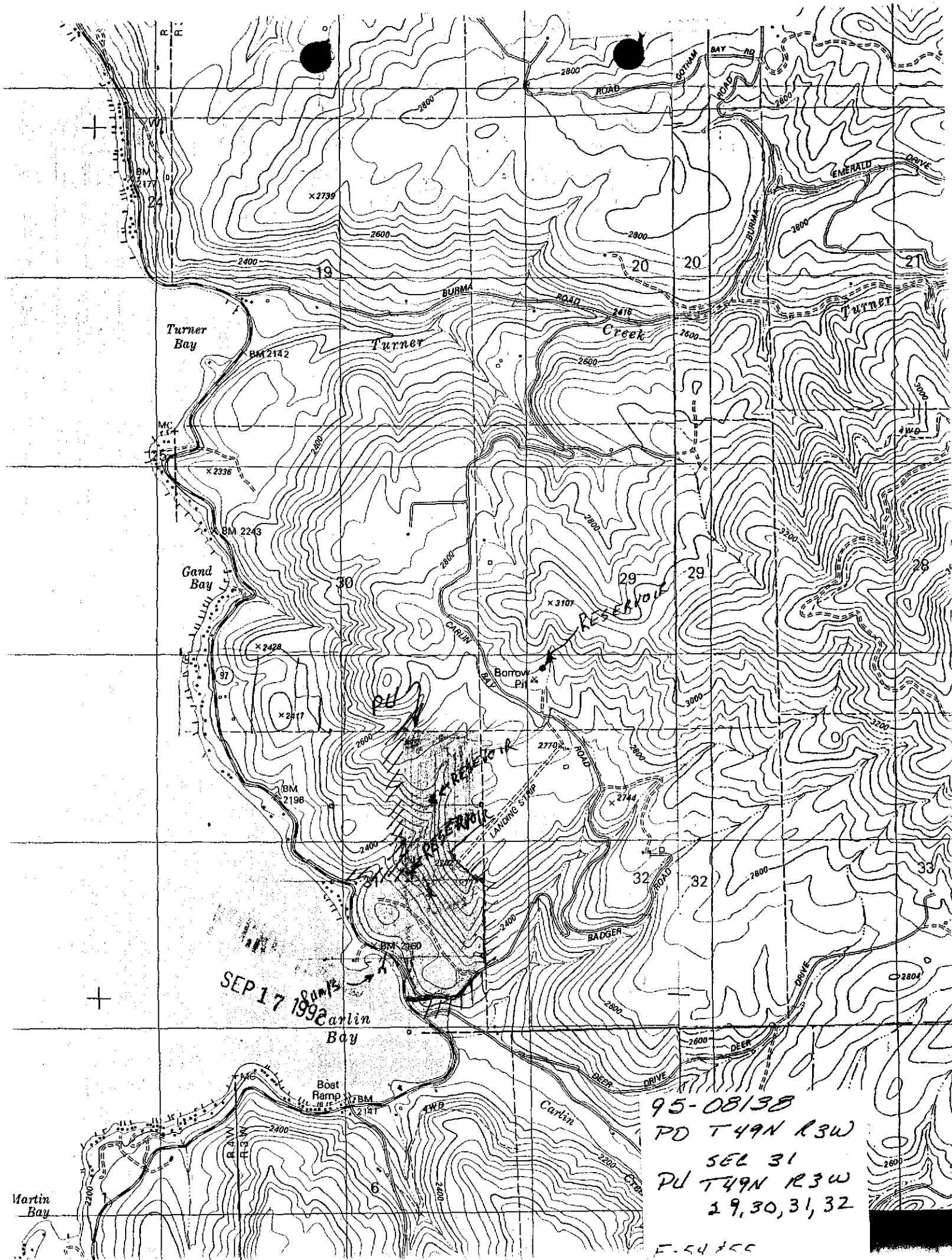
6. Place(s) of Use:

Indicate Method of Determination MAP

Twp.	Rge.	Sec.	NE¼				NW¼				SW¼				SE¼				Totals	
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼		
49N	3W	31	D			D										0	0 ³	0 ⁴	0 ⁷	
																	</			

SEP 17 1992

Do not use this space



SEP 17 1992

95-08138
PD T49N R3W
SEC 31
PU T49N R3W
19, 30, 31, 32

F-54 & C-55

Do not use this space

D. FLOW MEASUREMENTS

☐ Additional Data Sheets Attached

1.

Measurement Equipment	Type	Make	Model No.	Serial No.	Size	Calib. Date
MICROMETER			73-4-354M		4"	

2. Measurements:

100 gal/min

E. FLOW CALCULATIONS

☐ Additional Computation Sheets Attached

1. Measured Method: $\frac{100}{448.8} = 0.22 \text{ cfs}$

2. Alternate Method for Checking Purposes:

$\frac{8.8(10) \pi}{280} = 0.40 \text{ cfs}$

F. PUMP EFFICIENCY DATA (Optional)

Discharge Pressure: _____ psi x 2.31 = _____ ft (1); Dynamic pumping level: _____ ft (2)

Total Head: (1) + (2) = _____ (3); Flow rate: _____ cfs (4)

Water HP: (3) x (4) ÷ 8.8 = _____ (5)

Meter Input KW: 3.6 x _____ KH x _____ CTR or _____ MULT x _____ PTR x _____ N/ _____ T = _____ (6)

Meter Input HP: (6) x 1.34 = _____ (7)

Panel Input KW: _____ Ave PF x _____ Ave Volts x _____ Ave Ampsx .001732 = _____ (6)

Panel Input HP: (6) x 1.34 = _____ (7) Efficiency: (5)/(7) x 100 = _____ %

G. VOLUME CALCULATIONS

1. Volume Calculations for Irrigation:

$V_{I.R.} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) =$ _____

$V_{D.R.} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation Season}) \times 1.9835 =$ _____

$V = \text{Smaller of } V_{I.R.} \text{ and } V_{D.R.} =$ _____

2. Volume Calculations for Other Uses:

$400 \left(\frac{6}{12}\right) = 240 \text{ AF}$
 $.22(365)1.9835 = 159.3$

SEP 12 1973

H. REMARKS AND OVERLAP REVIEW ANALYSIS

MR. HANSON SAID IRRIGATION IS NOT ALLOWED

I. RECOMMENDATIONS

1. Recommended Amounts

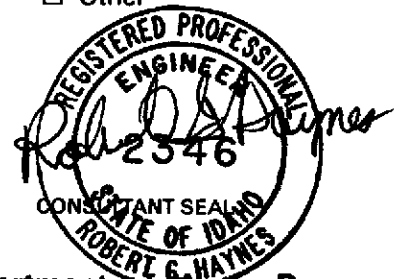
Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
~~DOMESTIC~~ (400)	1-1	12-31	.22	~~1.9835~~ 159.3
Totals:			.22	159.3

2. Recommended Amendments

- ☐ Change P.D. as reflected above ☐ Add P.D. as reflected above ☐ None
☐ Change P.U. as reflected above ☐ Add P.U. as reflected above ☐ Other

J. AUTHENTICATION

Field Examiner's Name Tom D. King
Signature [Signature]
Certification Date _____
Field Report Preparation Date 4/25/91



K. Licensing recommendation shall be prepared by an Idaho Department of Water Resources employee on a computer printout attached hereto.

SEP 17 1992

ANALYSIS SHEET
for
PROOF OF BENEFICIAL USE

Permit No. 95-8138

Date 12-14-90

GENERAL CONSIDERATIONS

Y Name same as permit?
Y Address change? If yes, prepare data entry form.
Y Proof timely received? If no, complete priority advancement below.

SOURCE OF WATER

✓ Surface water source
✓ Ground water source
✓ Drill permit req'd? ✓ Copy in file?
✓ Well log in file?
✓ Amt paid for drilling permit? ✓ Correct?

LICENSE EXAMINATION FEE

Y Required?
100 Amount submitted?
Y Correct amount?

MEASURING DEVICE

N Measuring device or access port required?
✓ Installed?
✓ Waiver requested or needed?

DEFICIENCIES OR ACTION ITEMS

- address change
- proof acceptable

PRIORITY CALCULATION

Date proof received
Date proof due -
No. of days late =
Priority date +
NEW PRIORITY DATE =

For Office Use Only
Amt. of Fee \$ 100.00
Date 10/22/90
Receipt No. 1018462
Received by J. Jackson

RECEIVED

OCT 22 1990

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

Department of Water Resources

PROOF OF BENEFICIAL USE

The Idaho Department of Water Resources will consider this form as a statement that the permit holder(s) has/have completed all development that will occur under this permit and that water has been applied according to the provisions of the permit for the beneficial use(s) described below. This form must be accompanied by a license examination fee or a completed field examination report prepared by a certified water right examiner who has been appointed by the department.

Permit No. 95-08138 Telephone No. 415-472-1050 (day)
415-898-8483 (nite)

Name(s) of Permit Holder(s): CARLIN BAY SERVICES CORPORATION

Post Office Address: Post Office Box 1674, Coeur d'Alene, Idaho 83814

Source of Water: Surface

If ground water, well driller's name: _____ Date drilled: _____

Extent of Use:

Domestic 200 (No. of households)

Irrigation _____ (No. of acres)

Stockwater _____ (No. and type of stock)

Other _____

Total rate and/or volume for which proof is submitted .25 cfs _____ acre/feet

Show date water was first diverted and beneficially used under this permit: May, 1980

One of the following may be a condition of approval of your permit:

Measuring device: Required? Yes ☒ No Installed? Yes ☐ No

OR

Flow Measurement Port: Required? Yes ☒ No Installed? Yes ☐ No

Fee Enclosed: \$ 100.00 (See License Examination Fee Schedule)

Person to contact to accompany the Department representative during the field examination:

PARKER A. HANSON

208-689-3670

Name

Telephone No.

Post Office Box 63, Route 2, Harrison, Idaho 83833

Address

The above information is my true statement of the extent to which the above numbered permit has been developed and I relinquish any undeveloped portion of the permit to the state of Idaho.

MICROFILMED

JAN 17 1991

10-10-90

Date

Mirna-Mar Vanderheyden

President

Signature (and title if on behalf of a company or organization)

MIRNA-MAR VANDERHEYDEN, P.O. Box 751543, Petaluma, CA

94975-1543

STAFF REVIEW SHEET - EXTENSION OF TIME

Permit No. 95-8138Reviewed by rfDate 10-21-1986

BASIC INFORMATION

y Date stamp received
y Extension received timely
(not prior to 6 month before proof due date or after reinstatement period)
y Fee received and receipted
y Name and signature same as permit
0 Address change (indicate on coding sheet)

BASIS FOR EXTENSION REQUEST

y Has adequate work been completed to demonstrate due diligence?
3 Has the cost incurred been adequate to demonstrate an intent to complete the project?
NA Has the permit been involved in litigation?
a. Swan Falls _____ Dismissed from Swan Falls _____
Other _____ Identify _____
b. Is supporting documentation needed to complete the file? _____
Requested _____
c. Calculate the period of delay

Date litigation completed _____

Date litigation began _____

Total period of delay = _____

Present proof due date + _____

NEW PROOF DUE DATE = _____

NA Is delay by a government agency?
Is supporting documentation needed to complete the file? _____
Requested? _____

ACTION TAKEN - *Recommend approval based on due diligence for 4 years.*

Special conditions or remarks:

NA Reinstatement Date extension received _____ = _____
Proof due date _____ = -
No. of days late _____ = _____
Priority date _____ = +
ADJUSTED PRIORITY DATE _____ = _____

✓ Prepare coding sheet
- Change rolodex card

State of Idaho
Department of Water Resources

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY: JK

APPLICATION NUMBER: 95-8138

CHECK:

- ☒ Source.
☒ Point of diversion.
☒ County.
☒ Quantity of water and period of use.
☒ Description of diverting works.
☒ Time required for beneficial use of water.
☒ Place of use or acres irrigated.
☒ Map.
☒ Signature.
☒ Fee.
☐ Yes ☒ No Field check required.
☐ Yes ☒ No Critical groundwater area.
☐ Yes ☒ No Request dam safety information. Sent by: _____ Date: _____
☒ Yes ☐ No* In form to receipt.

Field check by: _____

Date: _____

Comments: _____

*REQUEST THE FOLLOWING ADDITIONAL INFORMATION FROM THE APPLICANT: _____

SEND COPIES TO:

- ☒ Idaho State Health Department.
☐ Idaho Fish and Game Department.
☒ Idaho Department of Lands.
☐ U.S. Bureau of Land Management.
☐ U.S. Forest Service.
☐ Other _____

Copies sent by: JK Date: 10/19/81

PROCESSING:

- ☐ Yes ☐ No Platted by: _____ Map No. _____
☐ Yes ☐ No Other rights on same place of use. _____

- ☒ Yes ☐ No* In form for advertising.
Final date for protests: 11/9/81 ✓
☐ Yes ☒ No Protests received. If yes, record information on 4th page of application.

FINAL REGIONAL PROCESSING REVIEW:

- ☒ Affidavit of publication received. Date: 11/2/81 ✓
☒ Application published correctly. If not, record action taken: _____
☒ Fee amount, receipt date & number, recorded on application.
☒ Publication dates and paper, recorded on application.
☒ Protests, dates, withdrawal, etc., recorded on application.
☒ Recommendation & initial, recorded on application.
☐ Yes ☒ No Measuring device required.
☐ Yes ☒ No Access port required.
☐ Yes ☒ No Will water be delivered by watermaster? If yes, what district? _____
☒ 9/25/81 Date of priority recommended.
Special conditions of approval or cover letter. _____

By: JK Date: _____

STATE OFFICE REVIEW:

return receipt w/cover letter

SL w/cond 04

- ☐ See attached sheet for more information.

By: JK Date: 11/18/81