Form No 217
05/03

FOR OFFICE USE ONLY
Amt. of Fee $: 50.00
Receipt No C084495
Receipt By: AMB TD
Date Receipted: 7/6/07

RECEIVED
JUL 06 2007
DEPARTMENT OF WATER RESOURCES

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

PROOF OF BENEFICIAL USE

*The Idaho Department of Water Resources considers this form 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, when necessary, **or** be accompanied by a completed field examination report prepared by a certified water right examiner.*

1. Permit No 96-09285 Telephone No. (208) 263-9168

2. Name of Permit Holder(s): DOUG & KELLY HARLICKER

3. Mailing Address: 1144 JOHNNY LONG ROAD

City SANDPOINT State ID Zip 83864

4. Source of Water: UNNAMED STREAM **GROUNDWATER** (well), Date Drilled: mo _____ / yr _____

Well Driller: _____ Drilling Permit Number: _____

5. Use(s) (as authorized by the water right permit):

Domestic (No of households): _____ Stockwater (No and type of stock): _____

Irrigation (No. of acres): _____ Other: FIRE PROTECTION & FLOOD CONTROL STORAGE

6. Total rate of diversion and/or volume for which proof is submitted: _____ cfs **OR** 0.1 acre-feet

7. Measuring Device Requirement: **(refer to the approval conditions on your permit and respond accordingly)**
(*This question is **not optional** Please check either yes or no. Proofs returned not checked accordingly, will be considered incomplete)*

Measuring Device: Is a measuring device required? Yes ____ **or** No ✓
Has the measuring device been installed? Yes ____ **or** No ✓

8. Fee Enclosed: $ 50.00 (See Fee Schedule on back of the instructions for filing proof of beneficial use)

9. Person to contact to accompany the Department representative during field examination of the water system

Name: DOUG HARLICKER Telephone Number: (208) 263-9168

Address: 1144 JOHNNY LONG RD., SANDPOINT, ID 83864

10 ***The information given on this form is my true statement of the extent to which the above numbered permit has been developed and water has been diverted. I agree to relinquish any undeveloped portion of the permit to the State of Idaho.***

Signature of permit holder: Kelly Harlicker Date: 7/3/07
(include your title, if on behalf of company or organization)