

FOR OFFICE USE ONLY  
Amt. of Fee \$: 50.00  
Receipt No. CD 79145  
Receipt By: JMC  
Date Received: 9-19-05

STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES

RECEIVED  
SEP 19 2005  
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. 95-9251 Telephone No. 208 777-4486
2. Name of Permit Holder(s): POST FALLS PONDEROSA WATER ASSOCIATION, INC.
3. Mailing Address: 609 WINDSWEEP TRAIL  
City POST FALLS State ID Zip 83854
4. Source of Water: GROUNDWATER If GROUNDWATER (well), Date Drilled: mo. UNKNOWN / yr. UNKNOWN  
Well Driller: UNKNOWN Drilling Permit Number: UNKNOWN
5. Use(s) (as authorized by the water right permit):  
Domestic (No. of households): NINE Stockwater (No. and type of stock): N/A  
Irrigation (No. of acres): 4.5 Other: N/A
6. Total rate of diversion and/or volume for which proof is submitted: 20 cfs OR \_\_\_\_\_ 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? N/A PER Yes ✓ or No ✓  
Has the measuring device been installed? N/A PER 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: R. E. FAUREAU Telephone Number: 208 777-4486  
Address: 609 WINDSWEEP TRAIL, POST FALLS, ID. 83854
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: R. E. Faureau, President PFWA Date: 9/7/05  
(include your title, if on behalf of company or organization)