



State of Idaho

DEPARTMENT OF WATER RESOURCES

900 N. SKYLINE DR., SUITE A, IDAHO FALLS, ID 83402-1718

PHONE: (208) 525-7161 FAX: (208) 525-7177 WEB SITE: www.idwr.state.id.us

EASTERN REGION

DIRK KEMPTHORNE
Governor

KARL J. DREHER
Director

February 7, 2006

DAVID L BAILEY
31 AIRPORT RD
SALMON, ID 83467

RE: Application for Permit

Dear Applicant(s):

The Department of Water Resources has received your water right application. Preliminary review of the application indicates that it is incomplete and cannot be accepted for processing. We are returning your application to allow you to complete the necessary items. The required information is described below.

1. The Ownership of point of diversion and the place of use is in question. You have listed a lien holder on page 2. We need a letter from the lien holder state authority is given to file this application.
2. The Point of Diversion is incomplete, such as, Township 21 is it 21N or 21S? Range, 22E?.
3. The Address is not completed, we need city state and zip on the application.
4. You listed the applicant as David L "AND" Tamara L. Bailey. This means you both have to sign the application. If you would have listed it as "AND/OR" or just "OR", then only one of you would be able to sign this application. Please have Tamara L Bailey sign the application.

Please feel free to contact this office if you have any questions.

Sincerely,

Sharla Cox
Administrative Assistant

Enclosures