

08/07/2024

RECEIVED

SEP 04 2024

NOTICE OF ERROR
REPLY

Please type or print clearly, fill out this form completely and mail.

DEPT. OF WATER RESOURCES

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS: 10/4/2024

Water right number: 97-9035

BOND FAMILY TRUST

C/O ROBERT & GEORGENE BOND

2441 EVENING STAR DR

SALT LAKE CTY UT 84124-1818

Telephone Number: (801) 739-3378

address change

*765 S.E. Heron Drive
College Place, WA 99324*

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

2. Describe the changes you wish to make in the proposed recommendation:

3. Give a brief explanation as to why you disagree with these portions:

☒ I AGREE with this proposed recommendation: no changes need to be made.

DATE: 8-30-24 SIGNATURE: Robert Bond

Please print your name: Robert Bond

IDWR Regional Office, 7600 N MINERAL DR STE 100, COEUR D ALENE, ID 83815-7763, (208) 762-2800