



IDAHO DEPARTMENT OF
WATER RESOURCES

322 E Front Street, Suite 648, Boise ID 83702 • PO Box 83720, Boise ID 83720-0098
Phone: 208-287-4800 • Fax: 208-287-6700 • Email: idwrinfo@idwr.idaho.gov • Website: idwr.idaho.gov

Governor Brad Little

Director Mathew Weaver

December 07, 2023

SUSEN FAY
PO BOX 25
KOOTENAI ID 83840

PROOF ACKNOWLEDGEMENT LETTER

RE: Permit No. 96-9723

Dear Permit Holder(s):

The Department acknowledges receipt of the proof of beneficial use form submitted for the above referenced permit. The next step in the process of developing a water right is for the Department to conduct a field examination to determine and confirm the use being made of the water.

Please be advised that Section 42-248, Idaho Code, requires you or the owner of this water right to maintain current ownership and address records on file with the Department. Forms to file a change of ownership of a water right and/or a change in the address of the water right owner are available from any Department office or at the Department's website at www.idwr.idaho.gov.

If you have any questions concerning the field examination, please contact the Northern Region Office of the Department located in Coeur d'Alene at (208) 334-2190.

Sincerely,

Amanda Veibell
Technical Records Specialist

Enclosure(s)

RECEIVED

OCT 27 2023

DEPARTMENT OF
WATER RESOURCESSTATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
STATEMENT OF COMPLETION
FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY

Amt. of Fee \$ 50.00
Receipt No. C117240
Received By KM
Date Received 10.27.23

The Idaho Department of Water Resources (Department) considers this form a statement that the permit holder(s) applied water to beneficial use and completed development of a water right to the extent described below. **This form must be accompanied by an examination fee, when necessary, or by a completed Beneficial Use Field Report prepared by a certified water right examiner (CWRE).** Please refer to the instructions and fee schedule for this form. If ownership of the permit has changed, complete a Notice of Change in Water Right Ownership form. If you wish to relinquish your permit because you have not established the authorized water use and are not applying for an extension, please notify the Department in writing.

- Permit No. 96-9723 Name of Permit Holder(s) SUSEN FAY
Telephone No. 208-304-3303 Email tothepoint45@gmail.com
Mailing Address P.O. BOX 25 City KOOTENAI State ID Zip 83840
- Source of Water GROUND If Ground Water (well), Date Drilled mo. _____ / yr. _____
Drilling Permit/Tag No. _____ Drilling Company's Name _____
- Extent of use(s) completed as authorized by the water right permit:
Domestic (No. households) _____ Irrigation (No. acres) _____ Stockwater (No. and stock type) _____
Other IRRIGATION STORAGE WILDLIFE STORAGE RECREATION STORAGE FIRE PROTECTION and
ASTHETIC STORAGE
- Total diversion rate or volume (storage only) for which proof is submitted _____ cfs OR 5.8 at _____
If the total developed water use is 5 acres of irrigation or less, is stockwater storage of 14.6 acre-feet or less, or has a diversion rate of less than 0.24 cfs, attach a map of the place of use and point of diversion and photographs showing beneficial use.
- Describe the diversion and delivery system from the water source to the use (pump, lift, irrigation method, etc.)
FROM GROUND
- Permit condition compliance. Refer to the permit approval conditions and check all the items required, then check "Yes" or "No" to indicate whether the required items were established, submitted, and/or installed:
Required? Yes No (If "Yes", attach required data, evidence of compliance, or evidence of installation)

☐	☒	Ground water level data, pumping information, or other diversion data
☐	☒	Mitigation plan
☐	☒	Lockable controlling works
☐	☒	Measuring device
☐	☒	Fish screen
☐	☒	Other requirements of the water right permit _____
☐	☒	Reasonably Anticipated Future Needs ("RAFN") Municipal use

If RAFN Municipal use, additional increment of beneficial use developed? ☐ Yes (attach CWRE report) ☐ No
- Fee Enclosed \$ 50.00 or ☐ CWRE field report attached or ☐ No fee required
See fee schedule on page 3 of the instructions. Proof statements filed without an appropriate fee are incomplete.

8. Person to contact to accompany a Department representative during the field examination of the water system:

Name: SUSEN FAY Telephone No. 208-304-3303 Email tothepoint45@gmail.com
Mailing Address P.O. BOX 25 City KOOTENAI State ID Zip 83840

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 and applied to beneficial use. I understand that any undeveloped portion of the permit is relinquished to the State of Idaho.

Susen D. Fay
SIGNATURE OF PERMIT HOLDER*

SUSEN FAY
PRINTED NAME AND TITLE

OCTOBER 24, 2023
DATE

*Attach power of attorney if completing on behalf of permit holder.

RECEIVED

OCT 23 2023

DEPARTMENT OF
WATER RESOURCESSTATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
STATEMENT OF COMPLETION
FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY

Amt. of Fee \$ _____

Receipt No. _____

Received By _____

Date Received _____

The Idaho Department of Water Resources (Department) considers this form a statement that the permit holder(s) applied water to beneficial use and completed development of a water right to the extent described below. **This form must be accompanied by an examination fee, when necessary, or by a completed Beneficial Use Field Report prepared by a certified water right examiner (CWRE).** Please refer to the instructions and fee schedule for this form. If ownership of the permit has changed, complete a Notice of Change in Water Right Ownership form. If you wish to relinquish your permit because you have not established the authorized water use and are not applying for an extension, please notify the Department in writing.

1. Permit No. 96-09376 Name of Permit Holder(s) SUSEN FAY
Telephone No. 208-304-3303 Email tothepoint45@gmail.com
Mailing Address P.O. BOX 25 City KOOTENAI State ID Zip 83840

2. Source of Water _____ If Ground Water (well), Date Drilled mo. 5 / yr. 2007
Drilling Permit/Tag No. D0053641 Drilling Company's Name BOB PITTS and SONS

3. Extent of use(s) completed as authorized by the water right permit:

Domestic (No. households) 1 HOME Irrigation (No. acres) 5 Stockwater (No. and stock type) 3 HORSES
Other IRRIGATION LAWN LANDSCAPE GARDEN

4. Total diversion rate or volume (storage only) for which proof is submitted 0.19 cfs OR _____ af
If the total developed water use is 5 acres of irrigation or less, is stockwater storage of 14.6 acre-feet or less, or has a diversion rate of less than 0.24 cfs, attach a map of the place of use and point of diversion and photographs showing beneficial use.

5. Describe the diversion and delivery system from the water source to the use (pump, lift, irrigation method, etc.)
SPRINKLER SYSTEMS

6. Permit condition compliance. Refer to the permit approval conditions and check all the items required, then check "Yes" or "No" to indicate whether the required items were established, submitted, and/or installed:

Required? Yes No (If "Yes", attach required data, evidence of compliance, or evidence of installation)

- | | | | |
|--------------------------|--------------------------|-------------------------------------|---|
| ☐ | ☐ | ☒ | Ground water level data, pumping information, or other diversion data |
| ☐ | ☐ | ☒ | Mitigation plan |
| ☐ | ☐ | ☒ | Lockable controlling works |
| ☐ | ☐ | ☒ | Measuring device |
| ☐ | ☐ | ☒ | Fish screen |
| ☐ | ☐ | ☒ | Other requirements of the water right permit _____ |
| ☐ | ☐ | ☐ | Reasonably Anticipated Future Needs ("RAFN") Municipal use |

If RAFN Municipal use, additional increment of beneficial use developed? ☐ Yes (attach CWRE report) ☐ No

7. Fee Enclosed \$ _____ or ☐ CWRE field report attached or ☒ No fee required

See fee schedule on page 3 of the instructions. Proof statements filed without an appropriate fee are incomplete.

8. Person to contact to accompany a Department representative during the field examination of the water system:

Name: SUSEN FAY Telephone No. 208-304-3303 Email tothepoint45@gmail.com
Mailing Address P.O. BOX 25 City KOOTENAI State ID Zip 83840

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 and applied to beneficial use. I understand that any undeveloped portion of the permit is relinquished to the State of Idaho.

Susen Fay
SIGNATURE OF PERMIT HOLDER*

SUSEN FAY
PRINTED NAME AND TITLE

SEPT 10, 2023
DATE

*Attach power of attorney if completing on behalf of permit holder.

RECEIVED

MAR 16 2018

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
STATEMENT OF COMPLETION
FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY
Amt. of Fee \$: 50.00
Receipt No. C104796
Receipt By: TK
Date Received: 3-16-18

DEPARTMENT OF
Idaho Department of Water Resources

The Idaho Department of Water Resources considers this form a statement by the permit holder(s) that development of a water right has been completed and that water has been applied to beneficial use to the extent described below. **This form must be accompanied by an examination fee, when necessary, or by a completed Beneficial Use Field Report prepared by a certified water right examiner.** Please refer to the instructions and fee schedule for this form. If ownership of the permit has changed, please contact any Department office or visit the Department's website at: www.idwr.idaho.gov for an Assignment of Permit form. If you wish to relinquish your permit because you have not established the authorized use of the water and are not applying for an extension, please notify the Department in writing.

1. Permit No.: 96-09376 Telephone No.: 208-304-3303

2. Name of Permit Holder(s): SUSEN FAY

3. Mailing Address: P.O. BOX 25 City: KOOTENAI

State: ID Zip: 83840 Email: susendfay@gmail.com

4. Source of Water: _____ If **GROUND WATER** (well), Date Drilled: mo. 5 / yr. 2007

Well Driller: BOB PITTS and SONS Drilling Permit Number: D0053641

5. Extent of use(s) completed (as authorized by the water right permit):

Domestic (No. of households): 1 HOME Stockwater (No. and type of stock): 3 HORSES

Irrigation (No. of acres): 5 Other: _____

6. Total rate of diversion or storage volume for which proof is submitted: 0.19 cfs OR _____ acre-feet.

7. Compliance with a measuring device requirement, lockable controlling device requirement, and/or other conditions of permit: **Refer to the approval conditions on your permit and respond accordingly. The Department will not issue a license if permit conditions are not met.**

Measuring Device: Is a measuring device required?

Yes ☐ No ☒

If yes, has the measuring device been installed?

Yes ☐ No ☐

Lockable Controlling Device: Is a lockable device required to control the diversion?

Yes ☐ No ☒

If yes, has the lockable device been installed?

Yes ☐ No ☐

Other Conditions of Permit: Do the approval conditions on your permit require you to submit additional information in connection with your proof of beneficial use? If yes, list the conditions below and attach documents with the required information.

Completed? Yes ☐ No ☒

8. Fee Enclosed: \$ 50 See fee schedule on back of the instructions for filing proof of beneficial use. Proofs filed without an appropriate fee, will be considered incomplete.

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

Name: SUSEN FAY Telephone Number: 208-304-3303

Mailing Address: P.O. BOX 25 City: KOOTENAI

State: ID Zip: 83840 Email: susendfay@gmail.com

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 and applied to a beneficial use. I understand that any undeveloped portion of the permit is relinquished to the State of Idaho.

Signature of permit holder:

Susan D. Fay
(Include your title, if on behalf of company or organization)

Date: 3-12-18

Mail to: Idaho Department of Water Resources, PO Box 83720, Boise, ID 83720-0098



State of Idaho

DEPARTMENT OF WATER RESOURCES

Northern Region • 7600 N. Mineral Drive, Suite 100 • Coeur d'Alene, Idaho 83815-7763
Phone: (208) 762-2800 • Fax: (208) 762-2819 • Website: www.idwr.idaho.gov

C.L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Director

September 27, 2018

SUSEN FAY
PO BOX 25
KOOTENAI, ID 83840

Application For Permit No. 96-9723

Dear Applicant:

The Department of Water Resources has received your water right application. Please refer to the number referenced above in all future correspondence regarding this application.

A legal notice of the application has been prepared and is scheduled for publication in the BONNER COUNTY DAILY BEE on 10/4/2018 and 10/11/2018. Protests to this application may be submitted for a period ending ten (10) days after the second publication.

If the application is protested, you will be sent a copy of each protest. All protests must be resolved before the application can be considered for approval. If the protest(s) cannot be resolved voluntarily, the Department will conduct a conference and/or hearing on the matter.

If the application is not protested, the Department will process your application and notify you of any action taken on the application. If your application is approved, the Department will send you a copy of the permit.

Please contact this office if you have any questions regarding the application.

Sincerely,

Tammy Alleman
Administrative Assistant

Idaho Department of Water Resources Receipt

Receipt ID: C104796

Payment Amount \$50.00

Date Received 3/16/2018 11:17 AM

Region STATE

Payment Type Check

Check Number 2784

Payer FAY, SUSEN D

Comments STATEMENT OF COMPLETION FOR SUBMITTING PROOF OF BENEFICIAL USE PERMIT # 98-9376

Fee Details

Amount	Description	PCA	Fund	Fund Detail	Subsidiary	Object
\$50.00	BENEFICIAL USE	56104	0229	21		1155



Signature Line (Department Representative)



State of Idaho

DEPARTMENT OF WATER RESOURCES

322 East Front Street • P.O. Box 83720 • Boise, Idaho 83720-0098

Phone: (208) 287-4800 • Fax: (208) 287-6700 • Website: www.idwr.idaho.gov

C.L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Director

March 22, 2018

SUSEN FAY
PO BOX 25
KOOTENAI ID 83840

PROOF ACKNOWLEDGEMENT LETTER

RE: Permit No. 96-9376

Dear Permit Holder(s):

The Department acknowledges receipt of the proof of beneficial use form submitted for the above referenced permit. The next step in the process of developing a water right is for the Department to conduct a field examination to determine and confirm the use being made of the water.

Please be advised that Section 42-248, Idaho Code, requires you or the owner of this water right to maintain current ownership and address records on file with the Department. Forms to file a change of ownership of a water right and/or a change in the address of the water right owner are available from any Department office or at the Department's website at www.idwr.idaho.gov.

If you have any questions concerning the field examination, please contact the Northern Region Office of the Department located in Coeur d'Alene at (208) 762-2800.

Sincerely,

Darla Block
Technical Records Specialist

Enclosure(s)

Idaho Department of Water Resources Receipt

Receipt ID: N041123

Payment Amount	\$54.00	Date Received	9/12/2022	Region	NORTHERN
Payment Type	Check	Check Number	3400		
Payer	FAY, SUSEN				
Comments	NOTICE OF CLAIM TO A WATER RIGHT FOR SUSEN FAY. 98-9376				

Fee Details

Amount	Description	PCA	Fund	Fund Detail	Subsidiary	Object
\$54.00	NORTHERN ID ADJUDICATION FILING FEE	75503	0337	1		1155



Signature Line (Department Representative)