



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

April 12, 2024

ALAN ROBINSON
SHARON ROBINSON
914 E ARABIAN LN
SPOKANE WA 99208-6791

PROOF ACKNOWLEDGEMENT & DEFICIENCY LETTER

RE: Permit No. 97-9674

Dear Permit Holder(s):

The Department received the proof of beneficial use (proof) form you submitted for the above referenced permit.

I am returning the form to you because it was not signed by the permit holder(s) or an authorized representative. The Department is not able to accept the proof without a signature. If anyone other than the permit holder signs the form, please include supporting documentation authorizing the representative to sign on behalf of the permit holder when resubmitting the form.

A \$50.00 license examination fee was also submitted with the beneficial use form. This permit authorizes a diversion rate of 0.04 cfs (cubic feet per second) requiring a license examination fee of \$50.00. If an acceptable proof is not received, the entire fee will be returned to you in a separate mailing.

Please submit the completed form at your earliest convenience before the proof due date of **June 01, 2024** to avoid the possibility of your permit lapsing. If you have any questions concerning this matter, please contact me at (208) 287-4945.

Sincerely,

Amanda Veibell

Technical Records Specialist

Enclosure(s)

RECEIVED

APR 11 2024

DEPARTMENT OF
WATER RESOURCES

RETURNED

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

FOR OFFICE USE ONLY

Amt. of Fee \$ 50.00Receipt No. C118131Received By JATDate Received 4-11-24

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. _____ Name of Permit Holder(s) Alan M Robinson
 Telephone No. 509) 998-0508 Email brinkley4us@gmail.com
 Mailing Address 914 E Arabian Lane City Spokane State WA Zip 99208

2. Source of Water Priest Lake ID If Ground Water (well), Date Drilled mo. _____ / yr. _____
 Drilling Permit/Tag No. NA Drilling Company's Name _____

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

Domestic (No. households) 1 house Irrigation (No. acres) _____ Stockwater (No. and stock type) _____

Other _____

4. Total diversion rate or volume (storage only) for which proof is submitted 0.04 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.)

Submersed

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 \$ 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: Alan M. Robinson Telephone No. 509) 998-0508 Email brinkley4us@gmail.com

Mailing Address 914 E. Arabian Lane City Spokane State WA Zip 99208

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.

SIGNATURE OF PERMIT HOLDER*

PRINTED NAME AND TITLE

DATE

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

4/8/24