

MAY 17 2024

DEPARTMENT OF
WATER RESOURCES

FOR OFFICE USE ONLY
 Amt. of Fee \$ 50.00
 Receipt No. C118334
 Received By KM
 Date Received 5.17.24

1. Permit No. 96-10862 Telephone No. 808-772-3481

2. Name of Permit Holder(s) Moriarty Trust

3. Mailing Address 2210 Pacific Ave Unit J1 City Costa Mesa
State CA Zip 92627 Email pmoriarty@mac.com

4. Source of Water Lake Pend Oreille If **GROUND WATER** (well), Date Drilled mo. _____ / yr. _____
Well Driller _____ Drilling Permit Number _____

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

Domestic (No. of households) 1 Stockwater (No. and type of stock) _____

Irrigation (No. of acres) 1/2 Other _____

6. Total rate of diversion or storage volume for which proof is submitted 0.04 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 ☐
Fish Screen	Is a fish screen required?	Yes ☒	No ☐
	If yes, has the fish screen been installed?	Yes ☒	No ☐

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.

Not applicable _____ Completed? Yes ☐ No ☐

8. Fee Enclosed \$ 50.00 or not applicable ☐. See fee schedule on page 2 of the instructions.
Proof statements 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 Peter Moriarty Telephone Number (808) 772-3481
Mailing Address 2210 Pacific Ave Unit J1 City Costa Mesa
State CA Zip 92627 Email Pmoriarty@mac.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  Date 5/12/2024
(Include your title, if on behalf of company or organization)

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