

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION OF RIGHTS TO THE USE OF WATER FROM THE COEUR D'ALENE-SPOKANE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 49576

Claim ID: 95-17652

Date Received: 10-1-18

Receipt No: N033795

Claim Fee: 25.00 By: JA

RECEIVED

OCT 01 2018

IDWR / NORTH

NOTICE OF CLAIM TO A WATER RIGHT

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes

Where Daily Use is less than 13,000 gallons per day

Please type or print clearly

1. Name of claimant(s) VERSTEGEN FAMILY TRUST Phone (480) 363-2826

Mailing address 5904 E OAK ST SCOTTSDALE AZ Zip 85257

Street or Box City State Email address (optional) AMYVERSTEGEN@GMAIL.COM

2. Date of priority: (Only one per claim) 12/31/1940 (Explain priority date selected in Remarks) Month/Day/Year (YYYY)

3. Source of water supply (Check one) Ground Water () or Other (✓) (a) COEUR D ALENE LAKE which is tributary to (b) SPOKANE RIVER

4. Location of point of diversion is: Township 47N, Range 04W, Section 11 NE 1/4 of NW 1/4, or Govt. Lot BM, County of KOOTENAI

Parcel no. 012600000060

Additional points of diversion, if any:

If available, GPS coordinates:

5. Description of diverting works (wells, pumps, spring boxes, pipelines, etc.) including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well.

6. Water is claimed for the following: (limited to domestic and/or stockwater uses - see page 1 of the instructions)

For DOMESTIC purposes from 01/01 to 12/31 amount 0.04 cfs (✓) or AFY ()

For purposes from to amount

7. Total quantity claimed 0.04 cfs (✓) or AFY ()

8. Non-irrigation uses. Describe fully. (Domestic: give number of homes; Stockwater: list number and kind) ONE HOME

9. Location of place of use is: Township 47N, Range 04W, Section 11,
NE 1/4 of NW 1/4, Govt. Lot 2 BM, Parcel no. SAME

for (check one) **Domestic** (✓) **Stock** () **Domestic and Stock** ()
If different than shown in Item 4

Additional places of use, if any _____

10. In which county(ies) are lands listed above as place of use located? KOOTENAI

11. Do you own the property listed above as place of use? Yes (✓) No ()
If the answer is No, describe in Remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.
_____ or None (✓)

13. Remarks (include an explanation of the priority date selected):
TAXLOT DATA

14. Basis of claim (check one) **Beneficial Use** (✓) **Posted Notice** () **License** () **Permit** () **Decree** ()
Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number _____

15. Signature(s)

- (a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notices in the Coeur d'Alene-Spokane River Basin Water System Adjudication."
- (b.) I/We do () do not (✓) wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: _____

For Individuals: I/We do solemnly swear or affirm under penalty of perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) _____ Date: _____
_____ Date: _____

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am, and that I have signed the foregoing document in the space below as the

Trustee of Verstegen Family Trust
Agent's title (Please print) Name of organization (Please print)

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent [Signature] Date 10.1.18

Printed Name of Authorized Agent Amy Verstegen

16. Notice of Appearance:

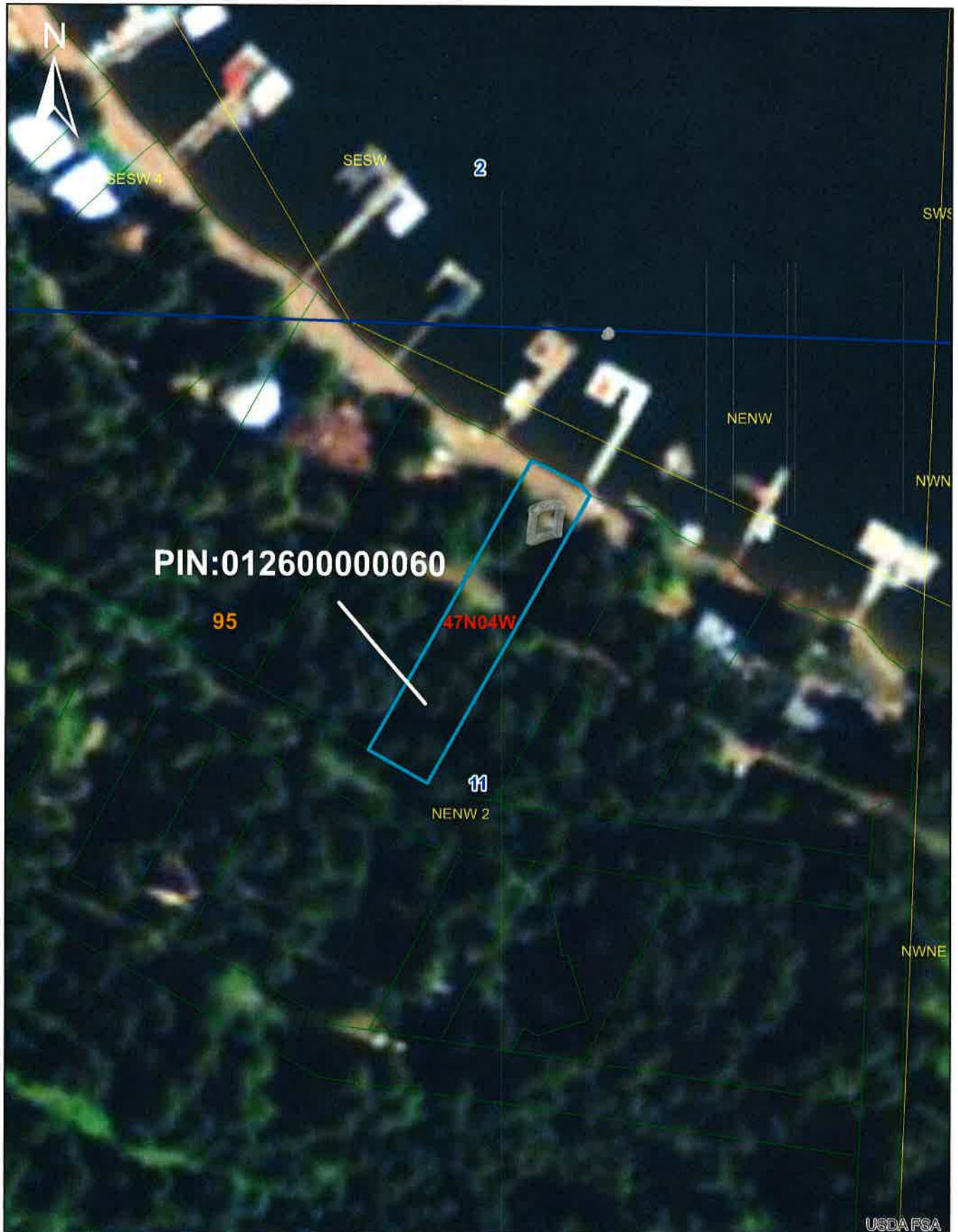
Notice is hereby given that I, (please print) _____, will be acting as attorney at law of behalf on the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____ Date _____

Address _____

Name of claimant(s) VERSTEGEN FAMILY TRUST Claim ID _____

VERGSTEGEN FAMILY TRUST CSRBA WATER RIGHT CLAIM



Parcel No. 2-1242-003-206-0 Code Area B34

Normal Address STADTMUELLER, ABBEY A

S. 3517 JEFFERSON

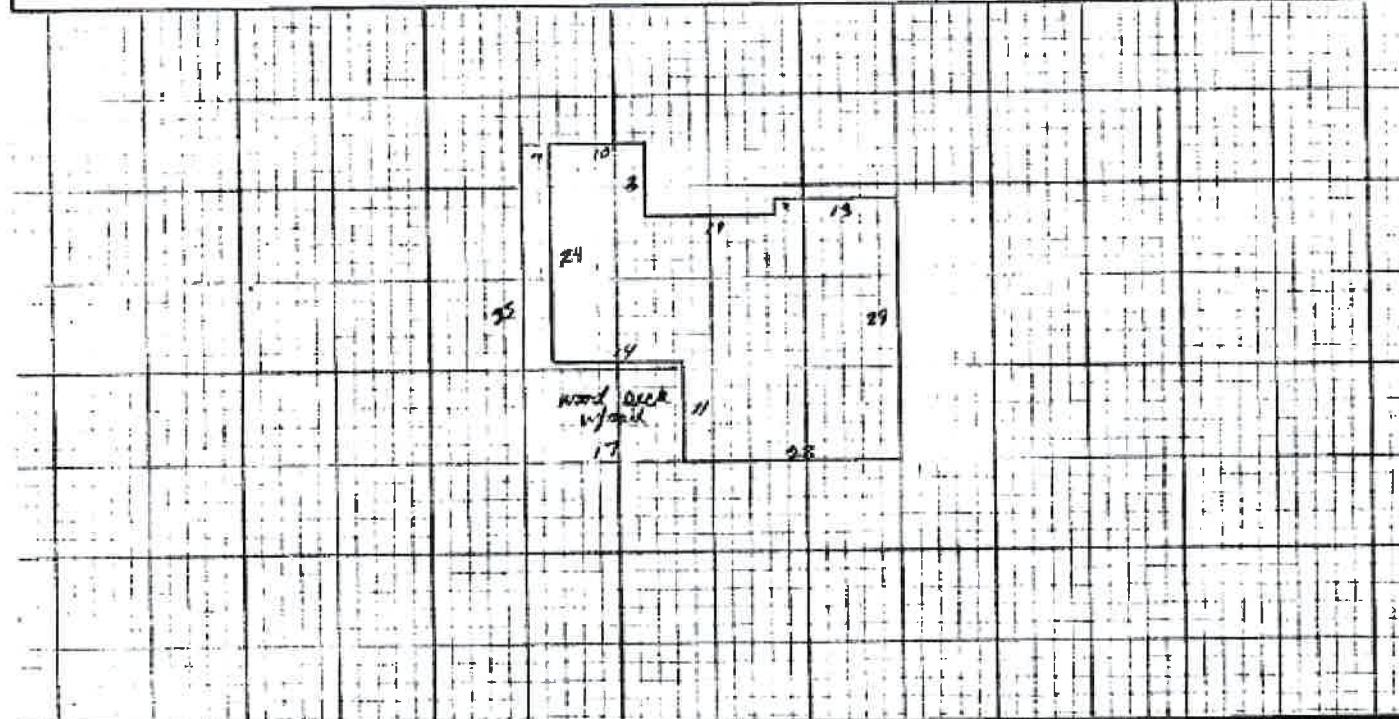
SPokane, WA 99203

Legal Description CLARK GROVE TR. N 6

Property Address _____

Inspected By _____ Date 9/1/97
 Completed By _____ Date 9/4/97
 Certified Appraiser _____ Date 3/97
 Assessor _____ Date _____
 Reinspection _____ Date _____

IDAHO RESIDENTIAL PROPERTY RECORD		Sheet No. _____								
MISCELLANEOUS DATA		VALUES SUMMARY								
Class <u>14</u>	Use Code <u>312</u>	YEAR <u>1997</u> YEAR _____								
Market Grade <u>3</u>	Shape Code <u>C</u>	Residence \$ <u>19,845</u> \$ _____								
Year Built <u>1977</u>	Year Remodeled _____	Garage \$ _____ \$ _____								
Effective Age <u>35</u>	Zoning Code _____	Carport \$ _____ \$ _____								
Date Occupied _____	Date Occupied _____	Other Improve \$ <u>4,075</u> \$ _____								
Probuilt _____	Building Permit _____	Total Improve \$ <u>23,920</u> \$ _____								
Interior Inspect _____	Under Construct _____	Land \$ _____ \$ _____								
Photo No. _____	Photo No. _____	MARKET VALUE \$ _____ \$ _____								
<table border="1"> <tr> <th>YES</th> <th>NO</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> </table>		YES	NO	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PURCHASE INFORMATION
YES	NO									
<input type="checkbox"/>	<input checked="" type="checkbox"/>									
<input type="checkbox"/>	<input checked="" type="checkbox"/>									
<input type="checkbox"/>	<input checked="" type="checkbox"/>									
Price _____ Date _____		Price _____ Date _____								
Price _____ Date _____		Price _____ Date _____								
Rent _____ Per _____ Date _____		Rent _____ Per _____ Date _____								



HAND INFORMATION																																					
01 NEIGHBORHOOD		02 OFF-SITE IMPROVEMENTS			03 TOPOGRAPHY		04 WATER FRONT PROPERTY			05 ON-SITE UTILITIES																											
01 Urban	5 Zoned _____	Street _____	04 Asphalt/Concrete	01 Low	01 Lake	5 Beach	01 Electricity	05 Public Water	02 Suburban	06 Stable	01 None	05 Drawl/Dirt	02 Level	02 River/Creek	None P F A G E	02 Gas	06 Private Well	03 Rural	07 Improving	02 Public Access	06 Sidewalks	03 Moderate Slope	03 Accretion	7 Grade:	03 Underground Elec/Telephone	07 Public Sewer	04 Recreational	08 Declining	03 Private Access	07 Curb/Gutters	04 Steep Slope	04 Built Land	P F A G E	04 Cable TV	08 Septic System	93	90
06 SUBJECT DIMENSIONS				07 SITE INFORMATION				08 REMARKS																													
EH Frontage _____		Depth _____		1 Location	F A G																																
Other _____				2 Amenities	F A G																																
				3 Landscaping	F A G																																
				4 Deckments	None Many None																																
09 COMPOSITE ADJUSTMENT						10 SITE ADJUSTMENTS																															
CAT	LOG	CLASS	TYPE	UNIT	QTY	COST	BASE VALUE	01 Location	10 Access	20 View	30 Topography	40 Width	TOTAL	EXT.																							
								50 Depth	60 Protrage	70 Beach	80 Corner	90	FACTOR	VALUE																							
APPRaiser _____ APPRAISAL DATE _____																																					
LAND VALUE \$ _____																																					