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

In Re SRBA	)	**A. Subcase** _____ (Insert water right number)
	)	
Case No. 39576	)	**STANDARD FORM 1**
	)	**OBJECTION**
_____	)	

Please fill in the following information:

B. NAME AND ADDRESS OF PERSON OBJECTING

Name: _____

Address: _____

_____

Daytime Phone: _____

Name & Address of Attorney, if any:

_____

_____

_____

C. CLAIMANT OF WATER RIGHT AS LISTED IN DIRECTOR'S REPORT

Name: _____

Address: _____

_____

D. I object to the following elements as recommended in the Director's Report. (Please check the appropriate box(es)).

1. ☐ **Name and Address**
   Should be: _____

2. ☐ **Source**
   Should be: _____

3. ☐ **Quantity**
   Should be: _____

4. ☐ **Priority Date**
   Should be: _____

5. ☐ **Point of Diversion**
   Should be: _____

6. ☐ **Instream Flow Beginning and Ending Point**
   Should be: _____

7. ☐ **Purpose(s) of Use**
   Should be: _____

8. ☐ **Period of Year**
   Should be: _____

9. ☐ **Place of Use**
   Should be: _____

10. ☐ **I object because**
    - ☐ This water right should not exist.
    - ☐ This water right was not recommended, but should be recommended with the elements described above.

E. REASONS SUPPORTING OBJECTION(S): _____

_____

_____

_____

F. **VERIFICATION** (must be completed)

State of _____)

)ss.

County of _____)

_____, duly sworn, upon oath, deposes and says:

(Name of Person filing objection)

That I am the party/claimant filing this objection, as defined by I.C. §§ 42-1401A(1) and (6) or that I am the attorney for the party/claimant objecting and that I have read this objection, know its contents and believe that the statements are true to the best of my knowledge.

_____

(Signature of person filing objection)

_____

(Attorney signing in representative capacity)

Subscribed and sworn to before me on: _____

_____

Notary Public for _____

Residing at: _____

My Commission Expires: _____

INSTRUCTIONS FOR MAILING

You must mail the Objection to the Clerk of the court. **FAX filings will not be accepted**. You must also send a copy to all the parties listed below in the Certificate of Mailing.

G. CERTIFICATE OF MAILING

I certify that on _____, 20___, I mailed the original and copies of this objection, including all attachments, to the following persons:

1. Original to:

   Clerk of the District Court
   Snake River Basin Adjudication
   253 Third Avenue North
   PO Box 2707
   Twin Falls, ID 83303-2707

2. One copy to the claimant of the water right at the following address:

   Name: _____
   Address: _____
   _____

3. Copies to:

   IDWR Document Depository
   PO Box 83720
   Boise, ID 83720-0098

   United States Department of Justice
   Environment & Nat'l Resources Div
   PO Box 7611
   Ben Franklin Station
   Washington, D.C. 20044-7611

   Chief, Natural Resources Division
   Office of the Attorney General
   State of Idaho
   PO Box 83720
   Boise, ID 83720-0010

_____
Signature of Objector or attorney
mailing on Objector's behalf