

STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES  
**APPLICATION FOR PERMIT**  
To appropriate the public waters of the State of Idaho

1. Name of applicant(s) Remington Water District Phone 208 683-5054  
 Name connector (check one):  and  or  and/or  
 Mailing address Box 468 City Athol  
 State ID Zip 83801 Email bob@integritywater.net

2. Source of water supply Ground Water which is a tributary of \_\_\_\_\_

3. Location of point(s) of diversion:

TWP	RGE	SEC	Govt Lot	¼	¼	¼	County	Source	Local name or tag #
								See Attached	

4. Water will be used for the following purposes:

Amount 32.0cfs for Municipal purposes from 1-1 to 12-31 (both dates inclusive)  
 (cfs or acre-feet per year)  
 Amount \_\_\_\_\_ for \_\_\_\_\_ purposes from \_\_\_\_\_ to \_\_\_\_\_ (both dates inclusive)  
 (cfs or acre-feet per year)  
 Amount \_\_\_\_\_ for \_\_\_\_\_ purposes from \_\_\_\_\_ to \_\_\_\_\_ (both dates inclusive)  
 (cfs or acre-feet per year)  
 Amount \_\_\_\_\_ for \_\_\_\_\_ purposes from \_\_\_\_\_ to \_\_\_\_\_ (both dates inclusive)  
 (cfs or acre-feet per year)

5. Total quantity to be appropriated is (a) 32.0 cubic feet per second (cfs) and/or (b) \_\_\_\_\_ acre feet per year (af).

6. Proposed diverting works:

- a. Describe type and size of devices used to divert water from the source. Wells & Pumps of Various Sizes

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- b. Height of storage dam \_\_\_\_\_ feet; active reservoir capacity \_\_\_\_\_ acre-feet; total reservoir capacity \_\_\_\_\_ acre-feet. If the reservoir will be filled more than once each year, describe the refill plan in item 11. For dams 10 feet or more in height OR reservoirs with a total storage capacity of 50 acre-feet or more, submit a separate Application for Construction or Enlargement of a New or Existing Dam. Application required?  Yes  No
- c. Proposed well diameter is 18-24 inches; proposed depth of well is \_\_\_\_\_ feet.
- d. Is ground water with a temperature of greater than 85°F being sought?  Yes  No
- e. If well is already drilled, when? \_\_\_\_\_; drilling firm \_\_\_\_\_; well was drilled for (well owner) \_\_\_\_\_; Drilling Permit No. \_\_\_\_\_.

7. Description of proposed uses (if irrigation only, go to item 8):

- a. Hydropower; show total feet of head and proposed capacity in kW. \_\_\_\_\_
- b. Stockwatering; list number and kind of livestock. \_\_\_\_\_
- c. Municipal; complete and attach the [Municipal Water Right Application Checklist](#).
- d. Domestic; show number of households \_\_\_\_\_
- e. Other; describe fully. \_\_\_\_\_

8. Description of place of use:

- a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- b. If water is used for other purposes, place a symbol of the use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

TWP	RGE	SEC	NE				NW				SW				SE				TOTALS	
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE		

Total number of acres to be irrigated: \_\_\_\_\_

9. Describe any other water rights used for the same purposes as described above. Include water delivered by a municipality, canal company, or irrigation district. If this application is for domestic purposes, do you intend to use this water, water from another source, or both, to irrigate your lawn, garden, and/or landscaping?

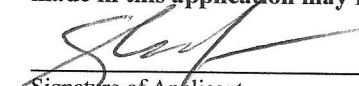
- 10. a. Who owns the property at the point of diversion? Various
- b. Who owns the land to be irrigated or place of use? Patrons of the Remington Water District
- c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing:

11. Describe your proposal in narrative form, and provide additional explanation for any of the items above. Attach additional pages if necessary.  
See Attached.

12. Time required for completion of works and application of water to proposed beneficial use is 5 years (minimum 1 year).

13. **MAP OF PROPOSED PROJECT REQUIRED** - Attach an 8½" x 11" map clearly identifying the proposed point of diversion, place of use, section #, township & range. A photocopy of a USGS 7.5 minute topographic quadrangle map is preferred.

**The information contained in this application is true to the best of my knowledge. I understand that any willful misrepresentations made in this application may result in rejection of the application or cancellation of an approval.**

  
 Signature of Applicant  
Shawn Mosqueda, Chairman  
 Print Name (and title, if applicable)

\_\_\_\_\_  
 Signature of Applicant  
 \_\_\_\_\_  
 Print Name (and title, if applicable)

**For Department Use:**

Received by \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_ Preliminary check by \_\_\_\_\_  
 Fee \$ \_\_\_\_\_ Received by \_\_\_\_\_ Receipt No. \_\_\_\_\_ Date \_\_\_\_\_

3. Location of Points of Diversion for Remington Water District RAFN Application

<b>TWP</b>	<b>RGE</b>	<b>SEC</b>	<b>G. L.</b>	<b>1/4</b>	<b>1/4</b>	<b>1/4/</b>	
53N	3W	18	2	SW	SW	NW	
53N	3W	18	3	SW	NW	SW	
53N	4W	13			SE	NE	
53N	4W	9			NE	SW	3 Points
52N	4W	10			SE	NW	3 Points
53N	4W	21			SE	SE	3 Points