

PROGRESS SHEET - APPLICATION FOR WATER RIGHT

SURFACE WATER GROUND WATER

NAME: **Mr. Todd Cramer**
2044 Sceyne Way
Boise, Idaho 83712-8527
H: 208-344-7420 W: 208-396-3373

Property:
2283 Clugston-Onion Creek Rd
Colville, WA

ASSIGNED (SEE BACK OF PAGE)

STEVENS COUNTY

WRIA

61

WRTS No. G3-30500

ID No. 4264756

APPLICATION NO.: **G3-30500**

PRIORITY DATE: **November 7, 2005**

Date App rec'd: November 7, 2005 Date fee rec'd: October 6, 2005 Amount \$50.00 Check No.: 2039

Statement of additional exam. fee: \$ _____ Sent: _____ Rec'd: _____

Returned for completion or correction: _____ Rcvd: _____

PUBLICATION:

SPOTTED

Newspaper(s): **Chewelah Independent or The Statesman Examiner**

OK'd by: **K.A. Yerbich**

Date Notice Sent **3-16-2006**

Date Affidavit rec'd: **4-10-2006**

Time expires: **5-6-2006**

Checked by: **K.A. Yerbich**

Date: **4-11-2006**

Protests: _____

Fee rec'd: _____

INTERESTED PARTIES:

WDFW State DOH County DOH Tribe USBR W²FO EphrataFO _____

WDFW COMMENT: YES NO Note: _____

FISH SCREEN: YES NO LOW FLOW PROVISIO: YES NO

OTHER COMMENT(S): _____

FIELD EXAMINATION REQUIRED: YES NO

EXAMINATION DATE	ROE ISSUED	SUP. ROE ISSUED	PERMIT ISSUED	SUP. PERMIT ISSUED

DEVELOPMENT SCHEDULE:

BC due: _____ EXT to: _____ BC filed: _____

WELL LOG(S) RECEIVED: YES NO Note: _____

CC due: _____ EXT to: _____ CC filed: _____

PA due: _____ EXT to: _____ PA filed: _____

METER INSTALLED: YES NO Meter ID No.: _____

FISH SCREEN INSTALLED: YES NO Note: _____

PA FIELD EXAMINATION REQUIRED: YES NO

Date examination made: _____ By: _____

APPROVED FOR CERTIFICATE: YES NO

Cert. fee: \$ _____ Date letter sent: _____ Fee rec'd: _____ Check No.: _____

Date Certificate issued: _____

ASSIGNMENT INFO:

SUBJECT TO REAL ESTATE EXISE TAX

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Submitted to Department of Revenue
Date: _____
Initial: _____

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Submitted to Department of Revenue
Date: _____
Initial: _____

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Submitted to Department of Revenue
Date: _____
Initial: _____

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Submitted to Department of Revenue
Date: _____
Initial: _____

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Submitted to Department of Revenue
Date: _____
Initial: _____

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Submitted to Department of Revenue
Date: _____
Initial: _____

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Submitted to Department of Revenue
Date: _____
Initial: _____