REQUEST FOR WITHDRAWAL OF CLAIM WITH FILING FEES APPLIED TO APPLICATION FOR PERMIT

Name of Claimant: ____________________________________________________________

Mailing Address: ____________________________________________________________

Amount: _________________________  Receipt No.: ________________________________

Claim No(s): ________________________________________________________________

I/We wish to withdraw the Notice(s) of Claim to a Water Right which number(s) appear above
and for which I/We previously paid a filing fee to the Idaho Department of Water Resources. I
request the filing fee I/We paid on the receipt referenced above be applied to filing an Application
for Permit.

For Individuals:

____________________________________________  ____________________________
(Signature of Claimant)                          (Date)

____________________________________________  ____________________________
(Signature of Claimant)                          (Date)

For Organizations:

____________________________________________  ____________________________
(Signature of Authorized Agent)                   (Date)

____________________________________________  ____________________________
(Title)                                           (Name of Organization)

Return to:  Idaho Dept. of Water Resources  or  Idaho Dept. of Water Resources
            7600 N. Mineral Dr. Suite 100            Adjudication Section
            Coeur d’Alene, ID 83815                      P.O. Box 83720
                                                   Boise, ID 83720-0098

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For IDWR Use

Initials  Date

Region Approval  ___________________  ___________________
State Office Data Entry  ___________________  ___________________
Data Entry  ___________________  ___________________

Form 25a(1)(NIA) - 11/10/2021