State of Idaho Department of Water Resources

APPLICATION FOR CERTIFICATION AS A WATER RIGHT EXAMINER

1.	Name		Phone No.
	Firm Name, if applicable		
2.	Mailing Address		
	Email		
3.	I hold a valid license in Idaho as an: Engineer and/or Geologist (check all that apply)		
4.	Idaho registration number(s) (PE and/or PG):		
5.	Summarize your experience in the measurement of the flow of water and list the types of measuring equipment or devices you have used. Also, summarize appurtenant education and course work to show you know the principles of fluid flow and hydrology. (Attach additional pages if necessary, or provide a copy of your resume if it includes the required information.)		
6.	Describe how you have become familiar with the requirements of Chapters 1 & 2, Title 42, Idaho Code and with the requirements of the Beneficial Use Examination Rules adopted on July 1, 1993 (the Department may require you to complete a written or oral exam to confirm your familiarity with these requirements).		
l h	ereby certify that the information give	en on this form is true and corre	ect.
Siç	gnature and Seal		Date
	Mail application an	nd fee to: IDWR, P.O. Box 83720,	Boise, ID 83720-0098
		DO NOT WRITE BELOW THIS L	INE
\$20	00.00 FEE Receipted by:	Date:	Receipt No