## STATE OF IDAHO DEPARTMENT OF WATER RESOURCES

## **RESUMPTION OF BENEFICIAL USE**

The Idaho Department of Water Resources will consider this form as a statement that the water right holder(s) has/have resumed the use of water for the water right identified below. This form **must** be returned to the department or the water right will revert to the state of Idaho.

Water Right Number	er(s)		
Name of Water Rig	ht Holder(s)	<del></del>	
Mailing Address			
			Telephone Number
Source of Water (G	roundwater/Surface) _		
Extent of Use:	Domestic		(number of households)
	Stockwater		(number and type of stock)
	Irrigation	<del></del>	(number of acres irrigated)
	Other/Remarks	<del> </del>	
Total rate and/or vo	olume of use	cfs	acre feet
Show the date water	er use was resumed un	der this water r	ight
Person to contact to	o accompany the Depa	rtment represe	ntative if a field examination is conducted:
Name			Telephone No.
Address			
The above informativater right has bee		nt of the extent	to which diversion and use of the above-described
Date	Signatu	ıre	