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WATER RESOURCES DIVISION
P.O. BOX 365 - LAPWAI, IDAHO - (208) 843-7368 - FAX (208) 843-7371

APPLICATION TO REQUEST A HEARING

1. Matter being protested: Application for Permit Transfer Amendment of Permit

No. _____ In the Name of _____

OR Other _____

2. Protestant's Name _____

3. Protestant's Mailing Address _____ State ____ Zip _____

4. Protestant's Representative (if different than protestant) _____

5. Representative's Mailing Address _____ State ____ Zip _____

6. Basis of protest (including statement of facts and law upon which the protest is based)

7. What would resolve your protest? _____

I hereby acknowledge that if I, or my designated representative, fails to appear at any regularly scheduled conference or hearing in the matter of which I have been notified at the address above, the department may issue a notice of proposed default against me in this matter for failure to appear.

Signed this ____ day of _____, 20____.

Protestant _____

Representative _____

FOR ADMINISTRATIVE USE	
Received By:	
Date:	Time:
Fee: \$	Hearing Deadline:

Fee Received: Yes No