

WATER SUPPLY INFORMATION SUMMARY

Section 30-28-133(d), C.R.S. requires that the applicant submit to the County, "Adequate evidence that a water supply that is sufficient in terms of quantity, quality and dependability will be available to ensure an adequate supply of water."

1. NAME OF DEVELOPMENT AS PROPOSED			
Foundation Lutheran Church			
2. LAND USE ACTION <u>New Development</u>			
3. NAME OF EXISTING PARCEL AS RECORDED <u>TR. C PAINT Brush Hills Fil No BA</u>			
SUBMISSION	FILING	BLOCK	LOT
4. TOTAL ACREAGE <u>5.9658</u>	5. NUMBER OF LOTS PROPOSED <u>1</u>	PLAT MAP ENCLOSED <input type="checkbox"/> YES	
6. PARCEL HISTORY - Please attach copies of deeds, plats or other evidence or documentation.			
A. Was parcel recorded with county prior to June 1, 1972? <input type="checkbox"/> YES <input type="checkbox"/> NO			
B. Has the parcel ever been part of a division of land action since June 1, 1972? <input type="checkbox"/> YES <input type="checkbox"/> NO			
If yes, describe the previous action.			
7. LOCATION OF PARCEL - Include a map delineating the project area and tie to a section corner.			
<u>1/4</u> OF <u>1/4</u> SECTION <u>25</u> TOWNSHIP <u>12</u> <input type="checkbox"/> N <input checked="" type="checkbox"/> S RANGE <u>65</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W PRINCIPAL MERIDIAN: <input checked="" type="checkbox"/> 6TH <input type="checkbox"/> N.M. <input type="checkbox"/> UTE <input type="checkbox"/> COSTLA			
8. PLAT - Location of all wells on property must be plotted and permit numbers provided. Surveyors plat <input type="checkbox"/> Yes <input type="checkbox"/> No If not, scaled hand drawn sketch <input type="checkbox"/> Yes <input type="checkbox"/> No <u>N/A no well</u>			
9. ESTIMATED WATER REQUIREMENTS - Gallons per Day or Acre Feet per Year		10. WATER SUPPLY SOURCE	
HOUSEHOLD USE # _____ of units _____ GPD _____ AF		<input type="checkbox"/> EXISTING WELLS	<input type="checkbox"/> DEVELOPED SPRINGS
COMMERCIAL USE # <u>9500</u> of S.F. <u>321,386</u> GPD <u>.36</u> AF		WELL PERMIT NUMBERS _____	
IRRIGATION # <u>N/A</u> of acres _____ GPD _____ AF		_____	
STOCK WATERING # _____ of head _____ GPD _____ AF		_____	
OTHER _____ GPD _____ AF		<input type="checkbox"/> MUNICIPAL <input type="checkbox"/> ASSOCIATION <input checked="" type="checkbox"/> COMPANY <input checked="" type="checkbox"/> DISTRICT NAME <u>PAINT BRUSH HILLS</u> LETTER OF COMMITMENT FOR SERVICE <input type="checkbox"/> YES <input type="checkbox"/> NO	
TOTAL _____ GPD _____ AF		<input type="checkbox"/> NEW WELLS - PROPOSED DEPTHS - (SCREENING ONLY) <input type="checkbox"/> ALLIUMAL <input type="checkbox"/> OTHER UNKNOWN <input type="checkbox"/> OTHER UNKNOWN <input type="checkbox"/> OTHER UNKNOWN <input type="checkbox"/> OTHER <input type="checkbox"/> OTHER	
		WATER COURT DECREE CASE NO.'S _____	
11. ENGINEER'S WATER SUPPLY REPORT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE FORWARD WITH THIS FORM. (This may be required before our review is completed) Located on SHEET <u>P0.1</u>			
12. TYPE OF SEWAGE DISPOSAL SYSTEM			
<input type="checkbox"/> SEPTIC TANK/LEACH FIELD	<input checked="" type="checkbox"/> CENTRAL SYSTEM - DISTRICT NAME <u>PAINT BRUSH METRO</u>		
<input type="checkbox"/> LAGOON	<input type="checkbox"/> VAULT - LOCATION SEWAGE HAULED TO _____		
<input type="checkbox"/> ENGINEERED SYSTEM (Attach a copy of engineering design)	<input type="checkbox"/> OTHER _____		