

WATER SUPPLY INFORMATION SUMMARY

please fill in project number

Section 30-28-122.(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 Latigo Trails Filing No. 9 SF-21-xxx			
2. LAND USE ACTION Final Plat			
3. NAME OF EXISTING PARCEL AS RECORDED			
SUBDIVISION		FILING	
BLOCK		LOT	
4. TOTAL ACREAGE 102	5. NUMBER OF LOTS PROPOSED 37	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 checked="" 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 checked="" 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.			
_____ of _____ 1/4 SECTION <u>16</u> TOWNSHIP <u>12</u> <input type="checkbox"/> N <input checked="" type="checkbox"/> S RANGE <u>64</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W			
_____ of _____ 1/4 SECTION _____ TOWNSHIP _____ <input type="checkbox"/> N <input checked="" type="checkbox"/> S RANGE _____ <input type="checkbox"/> E <input checked="" type="checkbox"/> W			
PRINCIPAL MERIDIAN: <input checked="" type="checkbox"/> 6 TH <input type="checkbox"/> N.M. <input type="checkbox"/> UTE <input type="checkbox"/> COSTILL			
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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No See Water Report			
9. ESTIMATED WATER REQUIREMENTS – Gallons per day or Acre Feet per Year		10. WATER SUPPLY SOURCE	
HOUSEHOLD USE (including irr.) _____ GPD _____ AF	_____ GPD _____ AF	<input checked="" type="checkbox"/> EXISTING WELLS <input type="checkbox"/> DEVELOPED SPRINGS WELL PERMIT NUMBERS <u>46406-F</u> <u>612-RFP-R</u> <u>27554-FP-R</u>	<input type="checkbox"/> NEW WELLS – Proposed <input type="checkbox"/> Alluvial <input type="checkbox"/> Upper Arapahoe <input type="checkbox"/> Upper Dawson <input type="checkbox"/> Lower Arapahoe <input type="checkbox"/> Lower Dawson <input type="checkbox"/> Laramie Fox Hills <input type="checkbox"/> Denver <input type="checkbox"/> Dakota <input type="checkbox"/> Other
COMMERCIAL USE _____ GPD _____ AF	_____ GPD _____ AF		
IRRIGATION _____ GPD _____ AF	_____ GPD _____ AF	<input type="checkbox"/> MUNICIPAL <input type="checkbox"/> ASSOCIATION <input type="checkbox"/> COMPANY <input checked="" type="checkbox"/> DISTRICT NAME <u>MSMD</u> LETTER OF COMMITMENT FOR SERVICE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO See Below	WATER COURT DECREE CASE NO. <u>154-BD, 155-BD, 156-BD, 157-BD, 228-BD, 229-BD, 230-BD, 568-BD, 569-BD, 570-BD, 2099-BD, 2100-BD</u>
STOCK WATERING _____ GPD _____ AF	_____ GPD _____ AF		
OTHER _____ GPD _____ AF	_____ GPD _____ AF		
TOTAL _____ GPD _____ AF	_____ GPD _____ AF		
11. ENGINEER'S WATER SUPPLY REPORT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE FORWARD WITH THIS FORM.			
12. TYPE OF SEWAGE DISPOSAL SYSTEM			
<input checked="" type="checkbox"/> SEPTIC TANK LEACH _____		<input type="checkbox"/> CENTRAL SYSTEM – DISTRICT NAME _____	
<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 _____	