

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 <p style="text-align: center;">Sanctuary of Peace Filing No. 1</p>			
2. LAND USE ACTION <u>Final Plat</u>			
3. NAME OF EXISTING PARCEL AS RECORDED <u>(not platted)</u>			
SUBDIVISION	FILING	BLOCK	LOT
4. TOTAL ACREAGE <u>49.58</u>	5. NUMBER OF LOTS PROPOSED <u>27</u>	PLAT MAP ENCLOSED <input checked="" 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 checked="" 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 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 <u>S1/2</u> # SECTION <u>24</u> TOWNSHIP <u>11</u> <input type="checkbox"/> N <input checked="" type="checkbox"/> S RANGE <u>66</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"/> COSTILLA			
8. PLAT - Location of all wells on property must be plotted and permit numbers provided.			
Surveyors plat <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If not, scaled hand drawn sketch <input type="checkbox"/> Yes <input type="checkbox"/> No			
9. ESTIMATED WATER REQUIREMENTS - Gallons per Day or Acre Feet per Year		10. WATER SUPPLY SOURCE	
HOUSEHOLD USE # <u>26</u> of units	GPD <u>5.30</u> AF	<input checked="" type="checkbox"/> EXISTING WELLS <input type="checkbox"/> DEVELOPED SPRING WELL PERMIT NUMBERS <u>83885-F</u>	<input type="checkbox"/> NEW WELLS - PROPOSED AQUIFERS - (CHECK ONE) <input type="checkbox"/> ALLUVIAL <input type="checkbox"/> UPPER ARAPAHOE <input checked="" type="checkbox"/> UPPER DAWSON <input type="checkbox"/> LOWER ARAPAHOE <input checked="" type="checkbox"/> LOWER DAWSON <input type="checkbox"/> LARAMIE FOX HILLS <input type="checkbox"/> DENVER <input type="checkbox"/> DAKOTA <input type="checkbox"/> OTHER _____
COMMERCIAL USE # _____ of S.F.	GPD _____ AF		
IRRIGATION # <u>0.60</u> of acres	GPD <u>1.30</u> AF	<input type="checkbox"/> MUNICIPAL <input type="checkbox"/> ASSOCIATION <input type="checkbox"/> COMPANY <input type="checkbox"/> DISTRICT NAME _____ LETTER OF COMMITMENT FOR SERVICE <input type="checkbox"/> YES <input type="checkbox"/> NO	WATER COURT DECREE CASE NO.'S <u>18CW3019</u> <u>18CW3040</u>
STOCK WATERING # _____ of head	GPD _____ AF		
OTHER <u>Community Garden</u>	GPD <u>1.64</u> AF		
<u>Private Club House</u>	GPD <u>0.13</u> AF		
TOTAL	GPD <u>8.37</u> AF		
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.)			
12. TYPE OF SEWAGE DISPOSAL SYSTEM <u>4 Onsite Wastewater Treatment Systems (OWTS)</u>			
<input type="checkbox"/> SEPTIC TANK/LEACH FIELD		<input type="checkbox"/> CENTRAL SYSTEM - DISTRICT NAME _____	
<input type="checkbox"/> LAGOON		<input type="checkbox"/> VAULT - LOCATION SEWAGE HAULED TO _____	
<input checked="" type="checkbox"/> ENGINEERED SYSTEM (Attach a copy of engineering design)		<input type="checkbox"/> OTHER _____	