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

South Woodmoor Preserve, Filing No. 1

2. LAND USE ACTION Final Plat

3. NAME OF EXISTING PARCEL AS RECORDED see Legal Description, part of Sec. 12,23,24 T11S,R67W

SUBDIVISION WOODMOOR PLACER / WOODMOOR GREENS BLOCK N/A LOT N/A

4. TOTAL ACREAGE 175.07

5. NUMBER OF LOTS PROPOSED 33 (existing) PLAT MAP ENCLOSED [X] 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? X YES ☐ NO

B. Has the parcel ever been part of a division of land action since June 1, 1972? X YES ☐ NO

If yes, describe the previous action _____

7. LOCATION OF PARCEL - Include a map deliniating the project area and tie to a section corner.

_____ 1/4 OF _____ 1/4 SECTION 12,23,24 TOWNSHIP 11 ☐ N X S RANGE 67 ☐ E [X] W

PRINCIPAL MERIDIAN: X 6TH ☐ N.M. ☐ UTE ☐ COSTILLA

8. PLAT - Location of all wells on property must be plotted and permit numbers provided.

Surveyors plat x Yes ☐ No If not, scaled hand drawn sketch ☐ Yes ☐ No

9. ESTIMATED WATER REQUIREMENTS - Gallons per Day or Acre Feet per Year

Re-plat

HOUSEHOLD USE # 0new of units	0 GPD	0 AF
COMMERCIAL USE # _____ of S.F.	_____ GPD	_____ AF
IRRIGATION # 0new of acres	0 GPD	0 AF
STOCK WATERING # _____ of head	_____ GPD	_____ AF
OTHER _____	_____ GPD	_____ AF
TOTAL	_____ GPD	0 AF

10. WATER SUPPLY SOURCE

☐ EXISTING WELLS ☐ DEVELOPED SPRING

WELL PERMIT NUMBERS

_____

_____

_____

☐ NEW WELLS -

PROPOSED AQUIFERS - (CHECK ONE)

☐ ALLUVIAL ☐ UPPER ARAPAHOE
☐ UPPER DAWSON ☐ LOWER ARAPAHOE
☐ LOWER DAWSON ☐ LARAMIE FOX HILLS
☐ DENVER ☐ DAKOTA
☐ OTHER _____

☐ MUNICIPAL
☐ ASSOCIATION
☐ COMPANY
x DISTRICT NAME Woodmoor

LETTER OF COMMITMENT FOR SERVICE x YES ☐ NO

WATER COURT DECREE CASE NO.'S

_____

_____

_____

_____

11. ENGINEER'S WATER SUPPLY REPORT x YES ☐ NO IF YES, PLEASE FORWARD WITH THIS FORM. (This may be required before our review is completed.)

12. TYPE OF SEWAGE DISPOSAL SYSTEM

☐ SEPTIC TANK/LEACH FIELD

x CENTRAL SYSTEM - DISTRICT NAME Woodmoor

☐ LAGOON

☐ VAULT - LOCATION SEWAGE HAULED TO _____

☐ ENGINEERED SYSTEM (Attach a copy of engineering design)

☐ OTHER _____