

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			
Grandview Reserve			
2. LAND USE ACTION Preliminary Plan of 184 lots, 2.5 ac. minimum			
3. NAME OF EXISTING PARCEL AS RECORDED N/A			
SUBDIVISION N/A	FILING N/A	BLOCK N/A	LOT N/A
4. TOTAL ACREAGE 768.2	5. NUMBER OF LOTS PROPOSED 184	PLAT MAP ENCLOSED <input checked="" type="checkbox"/> YES	
6. PARCEL HISTORY - Please attach copies of deeds, plats or other evidence or documentation. See Title Policy submitted with application			
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 delimiting the project area and tie to a section corner.			
_____ 1/4 OF _____ 1/4 SECTION ^{21, 22} / _{28, 27} TOWNSHIP 12 <input type="checkbox"/> N <input checked="" type="checkbox"/> S RANGE 64 <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 See Attached Title Commitment			
8. PLAT - Location of all wells on property must be plotted and permit numbers provided. No Wells on Property			
Surveyors plat <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If not, scaled hand drawn sketch <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
9. ESTIMATED WATER REQUIREMENTS - Gallons per Day or Acre Feet per Year		10. WATER SUPPLY SOURCE	
HOUSEHOLD USE # 184 of units	200 GPD 41.2 AF	<input type="checkbox"/> EXISTING WELLS <input type="checkbox"/> DEVELOPED SPRING WELL PERMIT NUMBERS _____ _____ _____ <input type="checkbox"/> MUNICIPAL ASSOCIATION <input type="checkbox"/> COMPANY <input type="checkbox"/> DISTRICT NAME _____ LETTER OF COMMITMENT FOR SERVICE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input checked="" 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 type="checkbox"/> LOWER DAWSON <input type="checkbox"/> LARAMIE FOX HILLS <input type="checkbox"/> DENVER <input type="checkbox"/> DAKOTA <input type="checkbox"/> OTHER _____
COMMERCIAL USE # N/A of S.F.	_____ GPD _____ AF		
IRRIGATION # 14.6 of acres	_____ GPD 36.1 AF		
STOCK WATERING # N/A of head	_____ GPD _____ AF		
OTHER _____	_____ GPD _____ AF		
TOTAL	_____ GPD 77.3 AF	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.)			
12. TYPE OF SEWAGE DISPOSAL SYSTEM			
<input checked="" 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 type="checkbox"/> ENGINEERED SYSTEM (Attach a copy of engineering design) <input type="checkbox"/> OTHER _____			