

WATER SUPPLY INFORMATION SUMMARY

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			
Estates at Rolling Hills Ranch Filing 1			
2. LAND USE ACTION			
Planned Unit Development Plan			
3. NAME OF EXISTING PARCEL AS RECORDED			
SUBDIVISION	FILING	BLOCK	LOT
4. TOTAL ACREAGE 29	5. NUMBER OF LOTS PROPOSED 16	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 <hr/>			
7. LOCATION OF PARCEL – Include a map delineating the project area and tie to a section corner.			
_____ of _____ 1/4 SECTION <u>19, 20</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 6 AF	<input checked="" type="checkbox"/> EXISTING <input type="checkbox"/> DEVELOPED WELLS SPRINGS WELL PERMIT NUMBERS <u>17655-F</u> <u>17656-F</u> <u>17657-F</u> <u>17661-F</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		
IRRIGATION	GPD 0 AF		
STOCK WATERING	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. _____ _____ _____
OTHER _____	GPD _____ AF		
TOTAL	GPD 6 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 type="checkbox"/> SEPTIC TANKLEACH _____ <input type="checkbox"/> LAGOON _____ <input type="checkbox"/> ENGINEERED SYSTEM (Attach a copy of engineering design) _____		<input checked="" type="checkbox"/> CENTRAL SYSTEM – DISTRICT NAME Cherokee Metropolitan District Water Reclamation Facility Cherokee Metro District and Meridian Service Metro District <input type="checkbox"/> VAULT – LOCATION SEWAGE HAULED TO _____ <input type="checkbox"/> OTHER _____	