

FORM NO. GWS-76 05/2011		WATER SUPPLY INFORMATION SUMMARY STATE OF COLORADO, OFFICE OF THE STATE ENGINEER 1313 Sherman St., Room 821, Denver, CO 80203 Main (303) 866-3581 dwr.colorado.gov	
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: Northgate Subaru (ACADEMY GATEWAY SUBDIVISION FILING NO 2)			
2. LAND USE ACTION: Auto dealership			
3. NAME OF EXISTING PARCEL AS RECORDED: TR D ACADEMY GATEWAY SUB FIL NO 1 EX THAT PT CONV TO ROW BY REC # 221096004 AND TR E ACADEMY GATEWAY SUB FIL NO 1			
SUBDIVISION: _____, FILING (UNIT) _____, BLOCK _____, LOT _____			
4. TOTAL ACREAGE: 10.15 ac		5. NUMBER OF LOTS PROPOSED 2 PLAT MAP ENCLOSED? <input checked="" type="checkbox"/> YES or <input type="checkbox"/> NO	
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 or <input checked="" type="checkbox"/> NO			
B. Has the parcel ever been part of a division of land action since June 1, 1972? <input checked="" type="checkbox"/> YES or <input type="checkbox"/> NO			
If yes, describe the previous action: Land was platted			
7. LOCATION OF PARCEL – Include a map delineating the project area and tie to a section corner.			
SW 1/4 of the NW 1/4, Section 6 , Township 12 <input type="checkbox"/> N or <input checked="" type="checkbox"/> S, Range 66 <input type="checkbox"/> E or <input checked="" type="checkbox"/> W			
Principal Meridian (choose only one): <input checked="" type="checkbox"/> Sixth <input type="checkbox"/> New Mexico <input type="checkbox"/> Ute <input type="checkbox"/> Costilla			
Optional GPS Location: GPS Unit must use the following settings: Format must be UTM , Units must be meters , Datum must be NAD83 , Unit must be set to true N , <input type="checkbox"/> Zone 12 or <input type="checkbox"/> Zone 13 Easting: _____			
Northing: _____			
8. PLAT – Location of all wells on property must be plotted and permit numbers provided.			
Surveyor's Plat: <input checked="" type="checkbox"/> YES or <input type="checkbox"/> NO If not, scaled hand drawn sketch: <input type="checkbox"/> YES or <input type="checkbox"/> NO			
9. ESTIMATED WATER REQUIREMENTS		10. WATER SUPPLY SOURCE	
USE	WATER REQUIREMENTS		<input type="checkbox"/> EXISTING WELL <input type="checkbox"/> DEVELOPED SPRING WELL PERMIT NUMBERS _____ _____ _____
HOUSEHOLD USE # _____ of units	Gallons per Day	Acre-Feet per Year	<input type="checkbox"/> NEW WELLS - PROPOSED AQUIFERS – (CHECK ONE)
COMMERCIAL USE # 66,460 of S. F	13,000	14.6	<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: _____
IRRIGATION # 3.5 of acres	11,900	5.83	
STOCK WATERING # _____ of head	_____	_____	
OTHER: _____	_____	_____	
TOTAL	24,900	20.4	<input type="checkbox"/> MUNICIPAL <input type="checkbox"/> ASSOCIATION <input type="checkbox"/> COMPANY <input checked="" type="checkbox"/> DISTRICT NAME Donala Water... LETTER OF COMMITMENT FOR SERVICE <input checked="" type="checkbox"/> YES or <input type="checkbox"/> NO
11. WAS AN ENGINEER'S WATER SUPPLY REPORT DEVELOPED? <input checked="" type="checkbox"/> YES or <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 type="checkbox"/> SEPTIC TANK/LEACH FIELD <input type="checkbox"/> LAGOON <input type="checkbox"/> ENGINEERED SYSTEM (Attach a copy of engineering design.)		<input checked="" type="checkbox"/> CENTRAL SYSTEM DISTRICT NAME: Donala Water & Sanitation District <input type="checkbox"/> VAULT LOCATION SEWAGE HAULED TO: _____ <input type="checkbox"/> OTHER: _____	