

This information does not match information on Water Resources Report. Please confirm and revise as necessary.

APPLY INFORMATION SUMMARY

COLORADO, OFFICE OF THE STATE ENGINEER
 1700 Sherman St., Room 821, Denver, CO 80203
 (303) 866-3581 dwr.colorado.gov

Applicant submit to the County, "Adequate evidence that a water supply that is available and its availability will be available to ensure an adequate supply of water."

FORM NO. GWS-76 05/2011		Section 30-28-133(d), C.R.S. requires that the water supply be sufficient in terms of quantity and quality.	
1. NAME OF DEVELOPMENT AS PROPOSED		8 ACRES	
2. LAND USE ACTION:		SUBDIVISION APPROVAL	
3. NAME OF EXISTING PARCEL AS RECORDED. SUBDIVISION: _____, FILING (UNIT) _____, BLOCK _____, LOT _____			
4. TOTAL ACREAGE: 47.577		5. NUMBER OF LOTS PROPOSED 8 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 type="checkbox"/> YES or <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. _____ 1/4 of the NE 1/4, Section 4, Township 14 <input type="checkbox"/> N or <input checked="" type="checkbox"/> S, Range 64 <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 Gallons per Day Acre-Feet per Year	<input checked="" type="checkbox"/> EXISTING WELL <input type="checkbox"/> DEVELOPED SPRING WELL PERMIT NUMBERS 74444-A	<input type="checkbox"/> NEW WELLS - PROPOSED AQUIFERS – (CHECK ONE) <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: _____
HOUSEHOLD USE # 8 of units	_____ 1.76		
COMMERCIAL USE # _____ of S. F	_____		
IRRIGATION # 0.27 of acres	_____ 0.56		
STOCK WATERING # _____ of head	_____ 0.32	<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 or <input type="checkbox"/> NO	WATER COURT DECREE CASE NUMBERS: DETERMINATION No. 1147-ED
OTHER: _____	_____		
TOTAL	_____ 2.64		
11. WAS AN ENGINEER'S WATER SUPPLY REPORT DEVELOPED? <input 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 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: _____	