

WATER SUPPLY INFORMATION SUMMARY

Section 30-29-133(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 Manley	
2. LAND USE ACTION Minor subdivision	
3. NAME OF EXISTING PARCEL AS RECORDED #11223 Manley Sub Fil No. 1	
SUBDIVISION	FILING No. 1 BLOCK LOT 2
4. TOTAL ACREAGE 22.29	5. NUMBER OF LOTS PROPOSED 2 PLAT MAP ENCLOSED <input checked="" type="checkbox"/> YES
6. PARCEL HISTORY - Please attach copies of deeds, plats or other evidence or documentation. See attached	
A. Was parcel recorded with county prior to June 1, 1972? <input checked="" type="checkbox"/> YES <input 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 <input type="checkbox"/> NO	
If yes, describe the previous action Original 40-acre parcel was divided into 5 lots in 2010	
7. LOCATION OF PARCEL - Include a map delineating the project area and tie to a section corner.	
SW 1/4 OF SW 1/4 SECTION 22 TOWNSHIP 13 <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	
8. PLAT - Location of all wells on property must be plotted and permit numbers provided. Surveyors plat <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If not, scaled hand drawn sketch <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. ESTIMATED WATER REQUIREMENTS - Gallons per Day or Acre Feet per Year	10. WATER SUPPLY SOURCE
HOUSEHOLD USE # 2 of units GPD 0.59 AF	<input checked="" type="checkbox"/> EXISTING WELLS 1 <input type="checkbox"/> DEVELOPED SPRING WELL PERMIT NUMBERS 104-RP <input checked="" type="checkbox"/> NEW WELLS - 1 PROPOSED AQUIFERS - (CHECK ONE) <input type="checkbox"/> ALLUVIAL <input checked="" 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 # _____ of S.F. GPD _____ AF	
IRRIGATION # _____ of acres GPD _____ AF	
STOCK WATERING # _____ of head GPD _____ AF	
OTHER _____ GPD _____ AF	
TOTAL GPD 0.59 AF	<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 <input type="checkbox"/> NO
See Determination 104-BD-RP	
WATER COURT DECREE CASE NO.'S Determination 102-BD Determination 103-BD Determination 104-BD-RP	
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 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 checked="" type="checkbox"/> OTHER Non-evaporative individual septic system	