

# 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 <p style="text-align: center;">Sedona Sun Acres</p>			
2. LAND USE ACTION <u>Minor Subdivision/Final Plat</u>			
3. NAME OF EXISTING PARCEL AS RECORDED			
SUBDIVISION <u>N/A</u>	FILING <u>N/A</u>	BLOCK <u>N/A</u>	LOT <u>N/A</u>
4. TOTAL ACREAGE <u>37.70</u>	5. NUMBER OF LOTS PROPOSED <u>3</u>	PLAT MAP ENCLOSED <input checked="" 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 _____			
7. LOCATION OF PARCEL - Include a map delineating the project area and tie to a section corner.			
<u>SW</u> <u>1/4</u> OF <u>NW</u> <u>1/4</u> SECTION <u>10</u> TOWNSHIP <u>12</u> <input type="checkbox"/> N <input checked="" type="checkbox"/> S RANGE <u>65</u> <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 <span style="float: right;">If not, scaled hand drawn sketch <input type="checkbox"/> Yes <input type="checkbox"/> No</span>			
9. ESTIMATED WATER REQUIREMENTS - Gallons per Day or Acre Feet per Year		10. WATER SUPPLY SOURCE	
HOUSEHOLD USE # <u>3</u> of units _____ GPD <u>1.0</u> AF	COMMERCIAL USE # _____ of S.F. _____ GPD _____ AF	<input type="checkbox"/> EXISTING WELLS <input type="checkbox"/> DEVELOPED SPRING WELL PERMIT NUMBERS _____ _____	<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"/> BENER <input type="checkbox"/> DAKOTA <input type="checkbox"/> OTHER _____
IRRIGATION # _____ of acres _____ GPD <u>1.25</u> AF	STOCK WATERING # <u>8</u> of head _____ GPD <u>0.75</u> AF		
OTHER _____ GPD _____ AF	TOTAL <u>2,678</u> GPD <u>3.0</u> AF		
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 _____	