

# 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			
<b>MONUMENT RIDGE EAST</b>			
2. LAND USE ACTION		Preliminary Plan	
3. NAME OF EXISTING PARCEL AS RECORDED			
SUBDIVISION	FILING	BLOCK	LOT
4. TOTAL ACREAGE    63	5. NUMBER OF LOTS PROPOSED    342	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 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 _____			
7. LOCATION OF PARCEL - Include a map delineating the project area and tie to a section corner.			
_____ 1/4 OF _____ 1/4 SECTION <u>  2  </u> TOWNSHIP <u>  11  </u> <input type="checkbox"/> N <input type="checkbox"/> S RANGE <u>  67  </u> <input type="checkbox"/> E <input type="checkbox"/> W			
PRINCIPAL MERIDIAN: <input 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 type="checkbox"/> Yes <input type="checkbox"/> No		if not, scaled hand drawn sketch <input checked="" 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 # <u>  342  </u> of units	<u>  85,032  </u> GPD	<u>  95.24  </u> AF	<input type="checkbox"/> EXISTING WELLS <input type="checkbox"/> DEVELOPED SPRING WELL PERMIT NUMBERS _____ _____ _____
COMMERCIAL USE # <u>  0  </u> of S.F.	_____ GPD	_____ AF	
IRRIGATION # <u>  3.52  </u> of acres	<u>  8,919  </u> GPD	<u>  9.99  </u> AF	
STOCK WATERING # <u>  0  </u> of head	_____ GPD	_____ AF	<input type="checkbox"/> MUNICIPAL <input type="checkbox"/> ASSOCIATION <input type="checkbox"/> COMPANY <input checked="" type="checkbox"/> DISTRICT WOODMOOR WATER & SANITATION DISTRICT LETTER OF COMMITMENT FOR SERVICE <input type="checkbox"/> YES <input type="checkbox"/> NO
OTHER <u>  0  </u>	_____ GPD	_____ AF	
TOTAL	<u>  93,951  </u> GPD	<u>  105.23  </u> AF	
11. ENGINEER'S WATER SUPPLY REPORT <input 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 checked="" type="checkbox"/> CENTRAL SYSTEM - DISTRICT NAME <u>  WOODMOOR WATER AND SANITATION DISTRICT  </u>		
<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 _____		