

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		MONUMENT RIDGE EAST	
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>340</u> of units <u>84,563</u> GPD <u>94.72</u> AF	<input type="checkbox"/> EXISTING WELLS		<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 _____
COMMERCIAL USE # <u>0</u> of S.F. _____ GPD _____ AF	<input type="checkbox"/> DEVELOPED SPRING		
IRRIGATION # <u>0.00</u> of acres <u>0.00</u> GPD <u>0.00</u> AF	WELL PERMIT NUMBERS _____ _____		
STOCK WATERING # <u>0</u> of head _____ GPD _____ AF	<input type="checkbox"/> MUNICIPAL		WATER COURT DECREE CASE NO.'S _____ _____ _____
OTHER <u>0</u> _____ GPD _____ AF	<input type="checkbox"/> ASSOCIATION		
TOTAL <u>84,563</u> GPD <u>94.72</u> AF	<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	
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 _____	