

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 PEERLESS FARMS FINAL PLAT			
2. LAND USE ACTION FINAL PLAT			
3. NAME OF EXISTING PARCEL AS RECORDED 4313000001			
SUBDIVISION	FILING	BLOCK	Lot
4. TOTAL ACERAGE 40+/-	5. NUMBER OF LOTS PROPOSED 7	PLAT MAPS ENCLOSED YES <input type="checkbox"/>	
6. PARCEL HISTORY - Please attach copies of deeds, plats, or other evidence or documentation. (In submittal package)			
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 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.			
NW 1/4 SECTION 13 and 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. - no wells have been drilled at this time, and no existing wells are located on the property.			
Surveyors plat <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If not, scaled hand -drawn sketch Y <input type="checkbox"/> NO			
9. ESTIMATED WATER REQUIREMENTS - Gallons per Day or Acre Foot per Year		10. WATER SUPPLY SOURCE	
HOUSEHOLD USE # * <u>7</u> of units <u>0.2</u> AF/SFE/YR <u>1.4</u> AF		<input type="checkbox"/> EXISTING <input checked="" type="checkbox"/> DEVELOPED <input type="checkbox"/> NEW WELLS	
COMMERCIAL USE # _____ SF _____ GPD _____ AF		WELLS SPRING WELL PERMIT NUMBERS	
IRRIGATION # ** <u>0.0566</u> AF/lot/year _____ GPD <u>1.85</u> AF <u>AF/1000sqft/lot/year</u>		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	
ANIMAL WATERING # *** <u>4</u> ²⁴⁴ <u>0.011</u> AF/Horse/Year <u>0.31</u> AF <u>horses/lot</u>		<input type="checkbox"/> MUNICIPAL	
TOTAL <u>3,180</u> GPD <u>3.56</u> AF *		<input type="checkbox"/> ASSOCIATION	
* Per Part 10 of the Findings from Rep. Plan No. 2 and Part 11 of Rep. Plan No. 3		<input type="checkbox"/> COMPANY	
** Assuming 0.25 AF/year/res. lot and 2.46 AF/acre/year for commercial irrigation		<input type="checkbox"/> DISTRICT	
*** Per Part 2.c. Rep. Plan No. 2, Appendix C of Report (assuming 4 horses/SFE)		NAME:	
		LETTER OF COMMITMENT FOR	
		SERVICE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
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:			