

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 <div style="text-align: center; font-size: 1.2em;"><i>Ellicott Town Center Filing No. 2</i></div>			
2. LAND USE ACTION <i>Final Plat</i>			
3. NAME OF EXISTING PARCEL AS RECORDED			
SUBDIVISION	FILING	BLOCK	LOT
4. TOTAL ACREAGE <i>85.8</i>	5. NUMBER OF LOTS PROPOSED <i>3</i>	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.			
<i>W 1/2</i> OF <i>NE</i> 1/4 SECTION <i>14</i> TOWNSHIP <i>14</i> <input type="checkbox"/> N <input checked="" type="checkbox"/> S RANGE <i>63</i> <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 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 # <i>0</i> of units _____ GPD <i>0</i> AF		<input checked="" type="checkbox"/> EXISTING WELLS <input type="checkbox"/> DEVELOPED SPRING WELL PERMIT NUMBERS <i>61972-F</i> <i>61973-F</i>	
COMMERCIAL USE # <i>21,797</i> of S.F. _____ GPD <i>2.48</i> AF			
IRRIGATION # <i>0.1</i> of acres _____ GPD <i>0.3</i> AF		<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 _____	
STOCK WATERING # _____ of head _____ GPD <i>0</i> AF			
OTHER _____ GPD <i>0</i> AF		WATER COURT DECREE CASE NO.'S <i>598-BA</i>	
TOTAL _____ GPD <i>2.78</i> AF			
		<input type="checkbox"/> MUNICIPAL <input type="checkbox"/> ASSOCIATION <input checked="" type="checkbox"/> COMPANY <input type="checkbox"/> DISTRICT NAME <i>Ellicott Utilities Co.</i> LETTER OF COMMITMENT FOR SERVICE <input checked="" type="checkbox"/> YES <input 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 type="checkbox"/> SEPTIC TANK/LEACH FIELD		<input checked="" type="checkbox"/> CENTRAL SYSTEM - DISTRICT NAME <i>Ellicott Utilities Company</i>	
<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 _____	