

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."

revise based on latest
submittal name.

1. NAME OF DEVELOPMENT AS PROPOSED

Falcon Eye Care .aka. 7615 McLaughlin Rd .aka. Woodmen Hills Filing 7, lot 4

2. LAND USE ACTION final plat ammendment

3. NAME OF EXISTING PARCEL AS RECORDED Woodmen Hills Filing 7, lot 4

SUBDIVISION Woodmen Hills FILING 7 BLOCK LOT 4

4. TOTAL ACREAGE 1.63

5. NUMBER OF LOTS PROPOSED 2 PLAT MAP ENCLOSED ☒ 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? ☐ YES ☒ NO

B. Has the parcel ever been part of a division of land action since June 1, 1972? ☐ YES ☒ NO

If yes, describe the previous action _____

7. LOCATION OF PARCEL - Include a map deliniating the project area and tie to a section corner.

SE 1/4 OF SW 1/4 SECTION 6 TOWNSHIP 13 ☐ N ☒ S RANGE 64 ☐ E ☒ W

PRINCIPAL MERIDIAN: ☒ 6TH ☐ N.M. ☐ UTE ☐ COSTILLA

8. PLAT - Location of all wells on property must be plotted and permit numbers provided. NA

Surveyors plat ☐ Yes ☐ No

If not, scaled hand drawn sketch ☐ Yes ☐ No

9. ESTIMATED WATER REQUIREMENTS - Gallons per Day or Acre Feet per Year

HOUSEHOLD USE # _____ of units _____ GPD _____ AF

COMMERCIAL USE # 6100 of S.F. 610 GPD 0.683 AF

IRRIGATION # 0.0918 of acres 201.6 GPD 0.226 AF

STOCK WATERING # _____ of head _____ GPD _____ AF

OTHER _____ GPD _____ AF

TOTAL 811.6 GPD 0.909 AF

10. WATER SUPPLY SOURCE

☐ EXISTING WELLS ☐ DEVELOPED SPRING

WELL PERMIT NUMBERS _____

☐ 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 _____ | |

- ☐ MUNICIPAL
☐ ASSOCIATION
☐ COMPANY
☒ DISTRICT

NAME Woodmen Hill Metro Dist

LETTER OF COMMITMENT FOR SERVICE ☒ YES ☐ NO

WATER COURT DECREE CASE NO.'S _____

11. ENGINEER'S WATER SUPPLY REPORT ☐ YES ☒ NO IF YES, PLEASE FORWARD WITH THIS FORM. (This may be required before our review is completed.)

12. TYPE OF SEWAGE DISPOSAL SYSTEM

☐ SEPTIC TANK/LEACH FIELD

☒ CENTRAL SYSTEM - DISTRICT NAME Woodmen Hill Metro Dist

☐ LAGOON

☐ VAULT - LOCATION SEWAGE HAULED TO _____

☐ ENGINEERED SYSTEM (Attach a copy of engineering design)

☐ OTHER _____