

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		<u><i>Sterling Ranch Sketch Plan Amendment</i></u>	
2. LAND USE ACTION		<u><i>Sketch Plan Amendment</i></u>	
3. NAME OF EXISTING PARCEL AS RECORDED			
<u><i>N/A</i></u>			
SUBDIVISION	<u><i>See Above</i></u>	FILING	<u><i>NA</i></u>
BLOCK	<u><i>All</i></u>	Lot	<u><i>All</i></u>
4. TOTAL ACERAGE	<u><i>1444</i></u>	5. NUMBER OF LOTS PROPOSED	<u><i>4,800</i></u>
PLAT MAPS ENCLOSED		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <i>Sketch Plan Separate Cover</i>	
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 checked="" 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 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. (In submittal)			
<u><i>portions</i></u> OF _____ SECTION <u><i>27, 28, 33 and 34</i></u> TOWNSHIP <u><i>12</i></u>		<input type="checkbox"/> N <input checked="" type="checkbox"/> S RANGE <u><i>65</i></u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W	
OF _____ 1SECTION _____ TOWNSHIP _____			
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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO <i>N/A</i>	
9. ESTIMATED WATER REQUIREMENTS - Gallons per Day or Acre Foot per Year		10. WATER SUPPLY SOURCE <u><i>DENVER BASIN</i></u>	
HOUSEHOLD USE # *	<u><i>4800</i></u> of units <u><i>1,512,658</i></u> GPD <u><i>1,694.40</i></u> AF	<input checked="" type="checkbox"/> EXISTING <input type="checkbox"/> DEVELOPED	<input type="checkbox"/> NEW WELLS
COMMERCIAL USE # **	<u><i>28.500</i></u> Acres <u><i>44,907</i></u> GPD <u><i>50.30</i></u> AF	WELLS SPRING WELL PERMIT NUMBERS	Proposed Aquifers - (Check One)
SCHOOLS USE #	<u><i>57</i></u> Acres <u><i>12,921</i></u> GPD <u><i>14.473</i></u> AF	<u><i>LFH 80131-F</i></u>	<input type="checkbox"/> Alluvial <input checked="" type="checkbox"/> Upper Arapahoe
IRRIGATION #	<u><i>21.5</i></u> acres <u><i>47,985</i></u> GPD <u><i>53.75</i></u> AF	<u><i>Arapahoe 80132-F</i></u>	<input type="checkbox"/> Upper Dawson <input checked="" type="checkbox"/> Lower Arapahoe
STOCK WATERING #	_____ of head _____ GPD _____ AF	_____	<input type="checkbox"/> Lower Dawson <input checked="" type="checkbox"/> Laramie Fox Hills
OTHER	_____ GPD _____ AF	_____	<input checked="" type="checkbox"/> Denver <input type="checkbox"/> Dakota
TOTAL -Central System	<u><i>1,618,471</i></u> GPD <u><i>1,812.93</i></u> AF	_____	<input type="checkbox"/> Other
* Residential Use includes outside use		<input checked="" type="checkbox"/> MUNICIPAL	
** Commercial is estimated as 50% of Mixed Use plus Industrial plus schools		<input type="checkbox"/> ASSOCIATION	
		<input checked="" type="checkbox"/> COMPANY	
		<input checked="" type="checkbox"/> DISTRICT	
		NAME <u><i>Falcon Area Water and Wastewater Authority</i></u>	
		LETTER OF COMMITMENT FOR SERVICE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
		WATER COURT DECREE CASE NUMBERS	
		<u><i>08 CW-113; 08 CW-018</i></u>	
		<u><i>86 CW-019, 17 CW 3002, 18 CW 3002</i></u>	
		<u><i>20 CW 3059, 93 CW 018, 85 CW 131</i></u>	
		<u><i>1689 BD, 1690 BD, 1691 BD</i></u>	
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 <u><i>Central Sewer</i></u>			
<input type="checkbox"/> SEPTIC TANK/LEACH FIELD	<input type="checkbox"/> CENTRAL SYSTEM - DISTRICT NAME: <u><i>Falcon Area Water and Wastewater Authority</i></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: _____		