

# 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 <p style="text-align: center; font-size: 1.2em;">ARVIDSON SUBDIVISION</p>			
2. LAND USE ACTION <p style="text-align: center; font-size: 1.2em;">FINAL PLAT</p>			
3. NAME OF EXISTING PARCEL AS RECORDED <p style="text-align: center; font-size: 1.2em;">(NOT PLATTED)</p>			
SUBDIVISION	FILING	BLOCK	LOT
4. TOTAL ACREAGE <p style="font-size: 1.2em;">5.45</p>	5. NUMBER OF LOTS PROPOSED <p style="font-size: 1.2em;">2</p>	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 delimiting the project area and tie to a section corner.			
<del>SW</del> 1/4 OF <u>SE</u> 1/4 SECTION <u>3</u> TOWNSHIP <u>11</u> <input type="checkbox"/> N <input checked="" type="checkbox"/> S RANGE <u>67</u> <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 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>2</u> of units _____ GPD <u>0.50</u> AF	COMMERCIAL USE # _____ of S.F. _____ GPD _____ AF	<input checked="" type="checkbox"/> EXISTING WELLS WELL PERMIT NUMBERS <u>25919</u>	<input type="checkbox"/> DEVELOPED SPRING
IRRIGATION # <u>0.37</u> of acres _____ GPD <u>0.40</u> AF	STOCK WATERING # <u>8</u> of head _____ GPD <u>0.50</u> AF	<input type="checkbox"/> MUNICIPAL	<input checked="" type="checkbox"/> NEW WELLS - PROPOSED AQUIFERS - (CHECK ONE)
OTHER _____ GPD _____ AF	TOTAL _____ GPD <u>640</u> AF	<input type="checkbox"/> ASSOCIATION	<input type="checkbox"/> ALLUVIAL
		<input type="checkbox"/> COMPANY	<input type="checkbox"/> UPPER ARAPAHOE
		<input type="checkbox"/> DISTRICT	<input checked="" type="checkbox"/> UPPER DAWSON
		NAME _____	<input type="checkbox"/> LOWER DAWSON
		LETTER OF COMMITMENT FOR SERVICE <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> LARAMIE FOX HILLS
			<input type="checkbox"/> DENVER
			<input type="checkbox"/> DAKOTA
			<input type="checkbox"/> OTHER _____
			WATER COURT DECREE CASE NO.'S <u>10CW3098 (Div 2)</u> <u>(CR 10CW3192 DIV 1)</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			
<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 _____	