

**SOUTHEASTERN COLORADO WATER CONSERVANCY DISTRICT
MUNICIPAL/DOMESTIC APPLICATION 2018 FRYINGPAN-ARKANSAS PROJECT WATER**

TO: Southeastern Colorado Water Conservancy District Board of Directors, acting by and through its Water Activity Enterprise (“District”):

We/I, the _____ (entity), hereby request _____ acre-feet of Project water in the May 2018 allocation. We/I understand the Board of Directors of the District will allocate available waters equitably in its discretion, based upon the merits of each application, and water will be delivered in accordance with, and we accept the terms and conditions of the District’s Water Allocation Policy and of the District’s notice dated March 1, 2018, which accompanied this application. We understand and accept that we will pay the District \$9.75 per acre-foot, which includes \$7.00 per acre-foot for Project water, a \$1.50 per acre-foot for a Water Activity Enterprise (WAE) surcharge, a \$0.50 per acre-foot Safety of Dams (SOD) surcharge, and a \$0.75 per acre-foot Environmental Stewardship Surcharge (ESS). An allocation and delivery of water by the District does not create any right, title, entitlement, or other interest in Project water beyond the right to delivery of current Project water sold by the District

We expect to use _____% of our allocated Project water for well augmentation. Project water used for municipal well augmentation will be surcharged an additional \$2.60 per acre-foot because the water is considered to be totally consumed and generates no Return Flows.

In support of our request, and to comply with the need for information by the District to meet the terms and conditions of its Contract with the United States, and the Operating Principles, we submit the following information:

_____.

Water will be paid before use, and not later than June 15, 2018. In 2018, we will serve a population of _____.

We confirm that we have sufficient non-Project water resources and that we will not deliver Fryingpan-Arkansas Project water to ineligible lands or lands outside of the boundaries of the Southeastern Colorado Water Conservancy District. Please indicate source of decreed water:

_____.

If supplementary information is required regarding our request, we agree to supply additional information as requested by the District. The following is information we feel should be used by the Board of Directors in their evaluation of our request, and to set out our unusual circumstances involving our entity in 2018 (use additional pages if necessary).

_____.

Please do not send payment until you are notified of the amount of water approved by the Board of Directors. **This information will be used to send Project water applications and other correspondence to you.**

Authorized Agent	Address	City	State	Zip
Authorized Agent, Title	email	Phone		

Billing Address: This information will be used to invoice you for Project water and quarterly billings for AVC, Excess Capacity Master Contract, and/or Enlargement. If you do not fill this portion out, we will default to the above information.

Billing Contact	Address	City	State	Zip
	email	Phone		

ALLOCATION APPLICATIONS MUST BE RECEIVED BY 4:30 P.M. FRIDAY, MARCH 30, 2018