



MONTEREY PENINSULA WATER MANAGEMENT DISTRICT

5 HARRIS COURT, BLDG. G
POST OFFICE BOX 85
MONTEREY, CA 93942-0085 • (831) 658-5600
FAX (831) 644-9560 • http://www.mpwmd.dst.ca.us

Form IG96-5, revised April 1, 2003

APPLICATION FOR WATER DISTRIBUTION SYSTEM PERMIT

Office Use: Date Application Accepted (signature and payment required)
Application ID Number:
Name and number on check /money order
Date Application Deemed Complete:

NOTE: Please attach additional pages, if necessary, to complete each question.

TYPE OF PERMIT APPLICATION: (check one)

- Create a water distribution system (non-mobile) -- please complete Sections 1, 2, and 5
Amend a water distribution system (non-mobile) -- please complete Sections 1, 3, and 5
Create or amend a mobile water distribution system -- complete Sections 1, 4, and 5

APPLICATION FEES: (must be attached for permit to be accepted; see Ord. 106 fee information)

- Create water distribution system -- \$2,450 for up to 35 hours staff time \*
Amend water distribution system/single-connection system -- \$1,400 for up to 20 hours staff time
Amend water distribution system /multiple-connection system -- \$2,450 for up to 35 hours
Create/amend mobile water distribution system -- \$1,400 (20 hrs) if source outside District; \$2,450 (35 hrs) if source inside District

\* Important Note: For unusually complex projects, a fee of \$70 per hour will be charged for more than the designated hours of staff time, once an application is accepted and issued ID number.

SECTION 1 -- APPLICANT INFORMATION

- Name of System Bardis Well
Assessor's Parcel Number(s) in System 169-181-051
System Street Address/Area Shulte Road/Corner Carmel Valley Road
Name of Applicant Chris Bardis
Mailing Address 9848 Business Park Dr., Suite H, Sacramento, CA 95827
Contact Numbers (ph/fax/e-mail) ph 831-424-1414; fax 831-424-1975 (Agent)
Agent (if any) Christine Kemp, Attorney



20. **Source of Water Supply.** (Check all that apply) (See Form IG96-11 for guidance)
- Monterey Peninsula Water Resources System (CV alluvial aquifer and Seaside Coastal Subareas)
  - Waters within jurisdiction of State Water Resources Control Board (CV alluvial aquifer)
  - Subsurface source within Carmel River watershed
  - Subsurface source within 1,000 feet from Tularcitos, Hitchcock Canyon, Garzas, Robinson Canyon or Potrero Creeks (*additional hydrologic information analysis is required—see worksheet*)
  - Other sources (describe): \_\_\_\_\_
21. **Water Rights Information.** Describe and provide documentation regarding: See attached
- Type of water right claimed \_\_\_\_\_ (see Form IG96-11 for guidance)
  - Basis of water right claim (see Form IG96-7 or 8 for guidance)
  - If assisted by attorney, attach Form IG96-12, Declaration of Competency
22. **Land Use/CEQA Information.** See Attached
- Zoning and land-use designations for affected parcels (available from Monterey County)
  - Status of permit process from jurisdiction planning department, including permits received
  - Environmental documents prepared by jurisdiction or other lead agency
  - Formal action taken by lead agency (e.g., Notice of Determination)
  - Permits required from other agencies (e.g., Coastal Commission, CPUC)

SINGLE-CONNECTION SYSTEMS (up to 3 homes on 1 parcel): PROCEED to SECTION 5  
(Ref: CEQA Guidelines 15301-15305)

23. MULTIPLE-CONNECTION SYSTEM APPLICANTS: COMPLETE the ATTACHED "SUPPLEMENTAL QUESTIONNAIRE", THEN PROCEED to SECTION 5

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### SECTION 3 -- APPLICATION TO AMEND A WATER DISTRIBUTION SYSTEM

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*Please refer to Form IG96-10 for guidance.*

24. For an existing water distribution system, describe **previous MPWMD permits received**, if any, including permit number and date issued \_\_\_\_\_
25. **Existing System Type:** (check one)
- Single-connection system
  - Multiple-connection system
26. **Existing Uses** (check all that apply):
- Residential (potable, drinking water)    Single-family \_\_\_\_\_    Multi-family (apartment) \_\_\_\_\_
  - Commercial (potable, drinking water)    Business type(s) \_\_\_\_\_
  - Irrigation/live-stock (subpotable)
27. **Existing number/type of structures (connections):** \_\_\_\_\_  
Number of acres now irrigated: \_\_\_\_\_ (Describe crop) \_\_\_\_\_  
Describe existing live-stock (number, type) \_\_\_\_\_
28. **Current Water Production Limit:** \_\_\_\_\_ acre-feet per year  
(Note: MPWMD staff will fill this in based on information from #25, 26 and 27 as well as any previous MPWMD permits issued)
29. **Assessor's Parcel Numbers** served by existing system \_\_\_\_\_

30. Indicate the **number of new connections** requested, and list Assessor's Parcel Number for each new connection. \_\_\_\_\_
31. Indicate the volume of **new production** requested. \_\_\_\_\_ acre-feet per year
32. Provide an estimate of **total water production** needed to meet the demand of the proposed project. If more than one connection is requested, include calculations showing how increased demand was estimated. \_\_\_\_\_ acre-feet total production with amended system  
\_\_\_\_\_
33. Describe **proposed changes** in service area, water source or water production/delivery facilities.  
\_\_\_\_\_  
\_\_\_\_\_
34. Describe **current status of land use approval** for proposed amendment from city or county, and attach that jurisdiction's approval of dedicated water allocation, if applicable.  
\_\_\_\_\_
35. Describe project's compliance with requirements of the **California Environmental Quality Act (CEQA)**, and attach appropriate environmental documentation. \_\_\_\_\_  
\_\_\_\_\_
36. Describe all **water rights** or water rights claims associated with the project (attach documentation), and describe any proposed modifications to the water rights due to the proposed amendment.  
\_\_\_\_\_
37. If a permit for the proposed amendment is required from **Monterey County Health Department**, attach a copy of the application submitted to MCHD. \_\_\_\_\_
38. List **unique issues or considerations**, if any, that may pertain to the proposed amendment.  
\_\_\_\_\_  
\_\_\_\_\_
39. List **special conditions, if any, that are proposed** for this permit amendment.  
\_\_\_\_\_  
\_\_\_\_\_

SYSTEMS with FEWER THAN FOUR HOMES ON ONE PARCEL: GO to SECTION 5  
(Ref: CEQA Guidelines 15301-15305)

40. SYSTEMS with FOUR OR MORE HOMES MUST COMPLETE the ATTACHED "SUPPLEMENTAL QUESTIONNAIRE", THEN GO to SECTION 5

**SECTION 4 -- CREATE OR AMEND MOBILE WATER DISTRIBUTION SYSTEM**

*See Form IG96-9 for guidance.*

*(Important Note: Health Department regulations prohibit water delivery for permanent potable supply; applications will be accepted by MPWMD only for subpotable irrigation/live-stock use)*

- 41. Address of property(ies) receiving water service \_\_\_\_\_  
(Please provide map)
- 42. Assessor's Parcel Number(s) of property(ies) receiving water \_\_\_\_\_
- 43. Name of water delivery company \_\_\_\_\_
- 44. Address of water delivery company \_\_\_\_\_
- 45. If property is within Cal-Am Water Company service area, describe arrangements made for backflow protection (required) \_\_\_\_\_
- 46. Delivery company phone/fax numbers \_\_\_\_\_
- 47. Method of delivery (assume truck unless otherwise specified) \_\_\_\_\_
- 48. Location/Source of water that is delivered (describe nearest city, river, groundwater basin)  
\_\_\_\_\_
- 49. Is source within MPWMD boundary? \_\_\_\_\_  
Is source within Carmel Valley watershed? \_\_\_\_\_  
Is source within Seaside Basin coastal subareas \_\_\_\_\_
- 50. If any answer to #49 is "yes", please provide map showing of source water
- 51. Quantity of water to be delivered \_\_\_\_\_ acre-feet per year or  
\_\_\_\_\_ gallons per year
- 52. Reason for Delivery: (check all that apply)  
 Emergency potable supply/system failure (provide date of emergency \_\_\_\_\_)  
 Drought  
 Supplemental irrigation water  
 Other
- 53. Duration of Delivery: (Check all that apply)  
 Short-term (describe beginning and ending dates) \_\_\_\_\_  
 Seasonal (describe season/months) \_\_\_\_\_  
 Permanent

**SECTION 5, SIGNATURE BLOCK**

I declare under penalty of perjury that the information in this application and on accompanying attachments is correct and accurate to the best of my knowledge and belief.

Chris Bardis Chris Bardis 3-25-04  
Signature of Applicant (Please sign and print name) Date

Christine Kemp Christine Kemp 4-20-04  
Signature of Agent (Please sign and print name) Date

\_\_\_\_\_  
Signature of System Owner/Operator (or Mobile Firm) Date  
(Please sign and print name)

Pursuant to MPWMD Rule 22-C, please provide name(s) of person(s) "who, at all times, will be available and legally responsible for the proper performance of those things required of a permit holder by this ordinance." Chris Bardis, owner

\_\_\_\_\_  
Address of responsible party(ies) 9848 Business Park Dr., Suite H  
Sacramento, CA 95827  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Form IG96-5 Supplement

Supplemental Questionnaire for Water Distribution System Application

NOTE: Attach additional pages, if necessary, to complete each question.

- S1. Does this request rely upon an "Environmental Document", as per the California Environmental Quality Act (CEQA)? If so, please specify the type of Environmental Document that was prepared and provide details regarding its preparation (e.g. notice of preparation, notice of completion, and any public hearing dates).

See attached statement

- S2. Has any new information regarding the proposed project, its environmental impacts, the severity of those impacts, mitigations for those impacts, or alternatives become available since the lead agency reviewed the project?

No

- S3. Will this request have any significant effects on the environment based upon the Environmental Document or other information? If so, describe the effects and the mitigations, if any, that are proposed to minimize those effects.

No

- S4. Is the source of supply shared by any other water distribution system? Would the addition of the proposed production result in an adverse cumulative impact on the environment?

No

- S5. Does this request rely on any specific hydrologic, geologic, or other technical study? If so, state the name of the study, the date it was finalized, and the principal author or authors. Attach a copy of each study cited.

No

- S6. Have there been any studies done to determine if an alternative water supply is economically feasible and physically available? If so, please describe the alternatives that were identified and the reasons why they were rejected.

No

S7. Will the request cause any possible duplication of service with an existing water distribution system?

No

S8. Will the request result in either exportation of water outside of or importation of water into the Monterey Peninsula Water Management District? If so, please specify the quantities that would be either exported or imported.

No

S9. Will the request create or increase an overdraft of ground water, or cause a degradation in water quality due to sea-water intrusion or some other type of contamination?

No

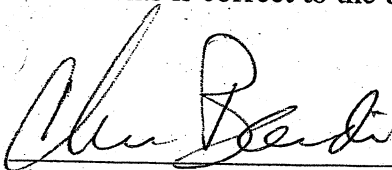
S10. Will this request adversely affect the ability of existing water distribution systems and individual users to produce water?

No

S11. If the request is for an annexation of new territory into an existing water distribution system service area, is the property to be annexed surrounded by, or adjacent to other properties in the service area?

N/A

I declare under penalty of perjury that the information in this questionnaire and on accompanying attachments is correct to the best of my knowledge and belief.



Signature of Applicant; please print name below

Chris Bardis

3/25/04, Sacramento

Date/Location

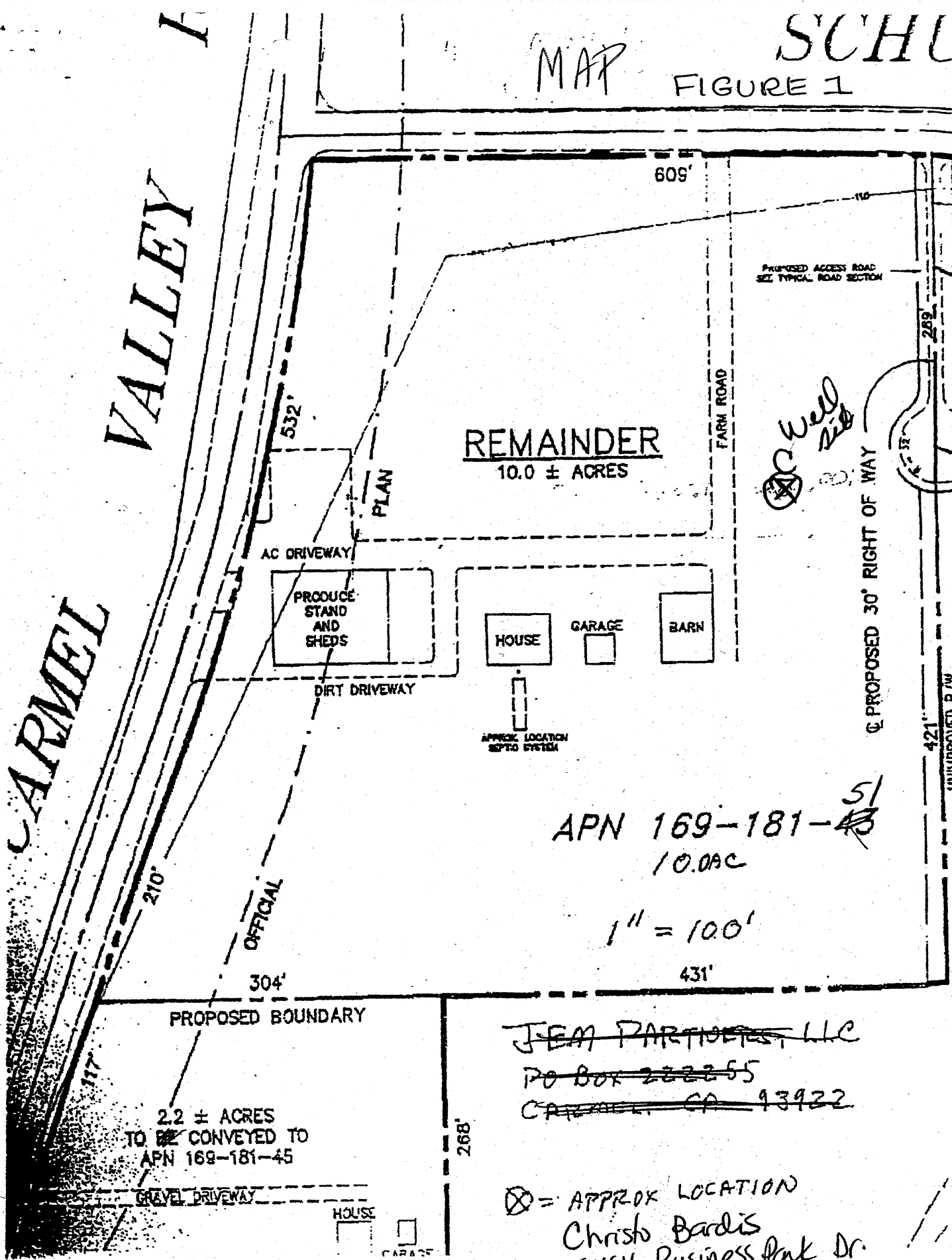
*Note: The applicant may attach written findings for the Board to review and consider to support the action requested.*



MAP

SCHL

FIGURE 1



REMAINDER  
10.0 ± ACRES

PRODUCE  
STAND  
AND  
SHEDS

HOUSE

GARAGE

BARN

APN 169-181-51  
10.0AC

1" = 100'

~~JEM PARTNERS, LLC~~  
~~PO BOX 222255~~  
~~CARMEL, CA 93922~~

⊗ = APPROX LOCATION  
Chris Bardi's  
984 Business Park Dr.  
Sk H  
Sacramento, CA 95827

2.2 ± ACRES  
TO BE CONVEYED TO  
APN 169-181-45

HOUSE  
GARAGE