



**PERMIT APPLICATION FORM TO CREATE OR AMEND A
WATER DISTRIBUTION SYSTEM**
Revised June 27, 2012

Office Use Only	
Pre-Application Name/Date	n/a
Application ID Number	20140206 CYP
Date Application Accepted	REVISED 2/13/2014
Date Application Deemed Complete	

FEE AMOUNT- The application fee (initial deposit) must be paid concurrently with the permit application. The fee amount varies depending upon the level of review required:

- Level 2 Permit Fee: \$2,850 for up to 30 hours of staff time or equivalent
- Level 3 or Level 4 Permit Fee: \$3,800 for up to 40 hours staff time or equivalent

The Permit Level is based on the preliminary information provided in the Pre-Application Form. If review of this Application determines that a different level of review is required, the applicant will be notified and charged a higher or lower fee, respectively. Where staff time (or equivalent) exceeds the number of pre-paid hours, a fee of \$95 per hour will be charged along with all direct costs incurred by MPWMD, pursuant to Rule 60. Visit the District website at: <http://www.mpwmd.dst.ca.us/> (click on "Rules & Regulations"). See also Rules 20, 21 and 22.

****NEW 2012 NOTICING REQUIREMENTS FOR NEIGHBORS: See MPWMD Memorandum #7 on the "Water Wells" webpage at: <http://www.mpwmd.net/pac/wds/wds.htm> ****

SECTION 1 -- APPLICANT INFORMATION

1. Name of System: Cal-Am/Cypress
2. Assessor's Parcel Number(s): NA *water right source of supply is APN 011-011-020*
3. System Street Address/Area: Seaside Adjudicated Basin
4. Name of Applicant: Cypress Pacific Investors, LLC
(If the applicant is not the system owner or operator, the form must also be signed by the system owner or operator.)
5. Mailing Address: C/o Peter Taormina 192 Healy Ave, Marina, CA 93933
6. Contact Numbers (ph/fax/e-mail): (831) 277-6112; F (831) 384-5078
7. Hydrogeology Consultant: NA- existing system
8. Consultant Mailing Address: _____
9. Consultant Contact Numbers (ph/fax/e-mail): _____

SECTION 2 -- WATER DISTRIBUTION SYSTEM INFORMATION

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

10. **Attach Map** (8 1/2 x 11 or larger): Show the parcels to be served and the approximate location of the wells(s), easements and/or water supply facilities.
11. **Water Source Information.** Complete the table below by describing both the existing and proposed water source(s) to supply the proposed water system:

Source and System Information	Existing (list/describe)	Proposed (list/describe)
A. Water Source (groundwater, alluvial water, reclamation, desal, etc.)	Seaside Basin Wells	Same
B. Is parcel in Cal-Am service area? Which buildings have active service?	Yes	Yes
C. Total number of wells with MPWMD and County permits	*	*
D. Water system infrastructure (list major system components, e.g.; tanks, treatment, backflow, meters, etc.)	*	*
Other relevant information, comments or expansion on answers above:		
Describe which parcel(s) are served by each well, especially if 2 or more wells.		
Request to utilize 8AF from APA; Calabrese. Remaining 6AF will stay in APA.		
Water will become part of Cal-Am distribution system within Seaside Basin.		
Parcels and use to be determined.		

12. **Interties and Emergency Supply.** Please check appropriate box for items A through F below. For all "yes" responses, describe the item and list associated attachments, if any.

- A. Is there a defined emergency water supply in case of system failure? Yes No N/A
- B. Will the system intertie to any other water distribution system? Yes No N/A
- C. Has MPWMD approved the intertie in Item B? Yes No N/A
- D. Has a backflow device to prevent cross-contamination been installed? Yes No N/A
- E. Must the local Fire Department approve this water system? Yes No N/A
- F. What is the source of water for Fire Protection? Cal-Am

Description of "yes" responses:

Existing Cal-Am system will provide all necessary supply and equipment.

Future parcels will be served through a front loading agreement with Cal-Am.

Water from Calabrese; 8AF from APA to SPA.

13. **Water Rights Information.** For systems utilizing wells located within the Carmel Valley Alluvial Aquifer (CVAA), applicants are encouraged to obtain a "Water Rights Confirmation" letter from the District prior to the submittal of this application. For systems utilizing wells outside the CVAA, complete item "A" only.

A. Water Rights Outside of CVAA. Attach a copy of the deed showing ownership of property (overlying rights to percolating groundwater is assumed).

B. If within CVAA, has a "Water Rights Confirmation Letter" been issued by the District?

Yes No N/A

If "Yes," state date of letter and attach a copy to this application: _____

If "No," complete questions C, D and E below.

C. Basis of water right claimed

- Riparian (invalid for 2+ parcels unless same owner)
- Pre-1914
- SWRCB domestic registration
- SWRCB appropriative permit
- Other (specify) Calabrese

D. If assisted by attorney, attach Declaration of Competency in Water Rights Law

E. Attach supporting water rights documentation. (MPWMD has examples on file for review)

14. **Water Quality Information.** Required for wells that will provide potable (drinking) water to one or more connections. None required for irrigation/agricultural or pool use only.

1 connection: Attach test results for "general mineral, general physical, inorganics" + coliform (described in Title 22, Chapter 15)

2+ connections: Attach water quality test results as required by Monterey Co. Health Dept.

15. **Water Use.** Complete the table below by describing both the existing and proposed uses to be served by the proposed water system; use worksheets on website to estimate water demand:

http://www.mpwmd.fsnet.ca.gov/wds/wds.htm

Use and Demand Information	Existing (list/describe)	Proposed (list/describe)
A. Residential service (potable, drinking water); includes standard landscaping for home. List all separate structures or units served, and if they include kitchen. Check zoning rules first.	NA	TBD
B. Commercial service (potable); describe type of use; # of non-fire meters; describe landscaping.	NA	TBD
C. Industrial service (potable or non-potable; # of non-fire meters)	NA	TBD
D. Total number of structures served	NA	TBD
E. Addl. Landscaping (non-potable); for extra large gardens or commercial	acres	TBD acres
F. Pool or Pond (non-potable)	Sq. ft.	TBD Sq. ft.
G. Irrigation/agriculture (non-potable) Describe crop(s) and other agric. use	acres	TBD acres
H. Live-stock (non-potable)	head	TBD head
I. Other		TBD
J. Total number of parcels served		
K. Total acreage served (all parcels); describe size of each parcel if multiple	acres	TBD acres
L. Estimated water use. (See worksheets; show how calculated.)	acre-feet/year	* acre-feet/year
Other relevant information, comments or expansion on answers above (please add extra sheets):		
This application is submitted to allow an increase in the Cal-Am distribution system within the Seaside Adjudicated Basin. All water will be utilized within the Basin and within the Cal-Am service area. The amount requested represents 8AF of Alternative production Allocation. Location and uses to be determined		

16. **Well Source and Pumping Impact Assessments.** Systems using wells are required to attach a *Well Source and Pumping Impact Assessment* performed by a Qualified Consultant as defined by Rule 21-A-9. Please confirm the name and contents of the *Assessment* as shown below:
- Assessment title, date, and preparer's name: NA- Currently active wells providing service to Cal-Am customers
 - The following are required items in all Assessments. Please confirm that the following items are included in the Assessment document:
 - Well logs (State DWR "Well Completion Report")
 - Results of well capacity/pumping tests (*must follow MPWMD procedures*)
 - Copy of Well Construction Permit from Monterey County Health Department
 - Pump horsepower, pump make, pump type and related info
 - Water quality analysis (for potable uses only)
 - Documentation of interactions with Neighboring Well owners regarding option to monitor their wells during the pumping test. See MPWMD Memo #7 on wells webpage.

Comments: _____

17. **Reliability of Supply (Non-Well).** For sources of supply other than a well, describe water source and production facilities, including reliable yield and water quality testing performed. Attach and list associated information.

Existing Cal-Am system as permitted by MPWMD.

18. **Land Use/CEQA Information.** Please complete all applicable items below.
- A. Zoning and land-use designations for parcels served (available from Monterey County or City): Unknown at this time. Parcels within Seaside Basin.
 - B. Permits and approvals required or received from other agencies (e.g., Planning Department, Building Department, Health Department, Coastal Commission, CPUC). Include file numbers and resolution numbers used by the agencies.
None at this time.
 - C. Recent or pending subdivisions to be served by the proposed water system. Include file numbers and resolution numbers used by the agencies.
None at this time.
 - D. Environmental documents prepared by jurisdiction or other lead agency. Per Appeal Court decision, no environmental review shall be required to process this application.
 - E. Status of lead agency CEQA actions. Provide date of formal action (e.g., Notice of Determination, Neg. Dec., EIR, etc.) Include agency file numbers and resolution numbers.

19. **MPWMD Permits**
 Describe and list previous MPWMD permits received, if any, including permit number and date issued. Attach existing well meter information, if applicable.
Cal-Am system and wells previously permitted by MPWMD.

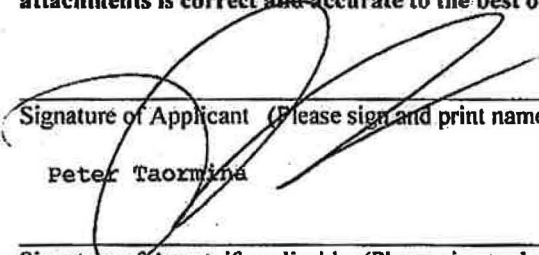
20. List unique issues, considerations and/or special conditions, if any, which may pertain to the proposed water system. This amendment includes the provision of water from Calabrese to Cal-Am to be utilized within the Seaside Water Basin and the Cal-Am service area.

SECTION 3- SIGNATURES, RESPONSIBLE PARTIES AND ATTACHMENTS

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.

Signature of Applicant (Please sign and print name)

Date


Peter Taormina

Signature of Agent, if applicable (Please sign and print name)

Date

Signature of System Owner/Operator (*required*)
(Please sign and print name)

Date

Responsible Party(ies). Pursuant to MPWMD Rule 22-C, please provide name(s) and address(es) 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."

Name(s): Cypress Pacific Investors, LLC, c/o Peter Taormina

Address(es) 192 Healy Avenue, Marina, CA 93933

ATTACHMENTS: Please list all attachments, including maps, reports, deeds and other documents included with this Application Form

Attachment 1: Adjudication Decision

Attachment 2: Grant Deed, Muriel Calabrese Trust

Attachment 3: Letter from Watermaster

Attachment 4: Draft front loading agreement

Attachment :

Attachment :

Attachment :

Attachment :

Attachment :

U:\Henri\wp\ceqa\2012\WDS2012\ORD150\WDS_CreateWDSAppForm_20120627.docx
Prepared by H. Stern on 6/27/2012

TAX CODE AREA

COUNTY OF M
ASSESSOR'
BOOK 11

TRACT NO. 1101
SAND DOLLAR SHOPPING CENTER
RECORDED 5-17-89

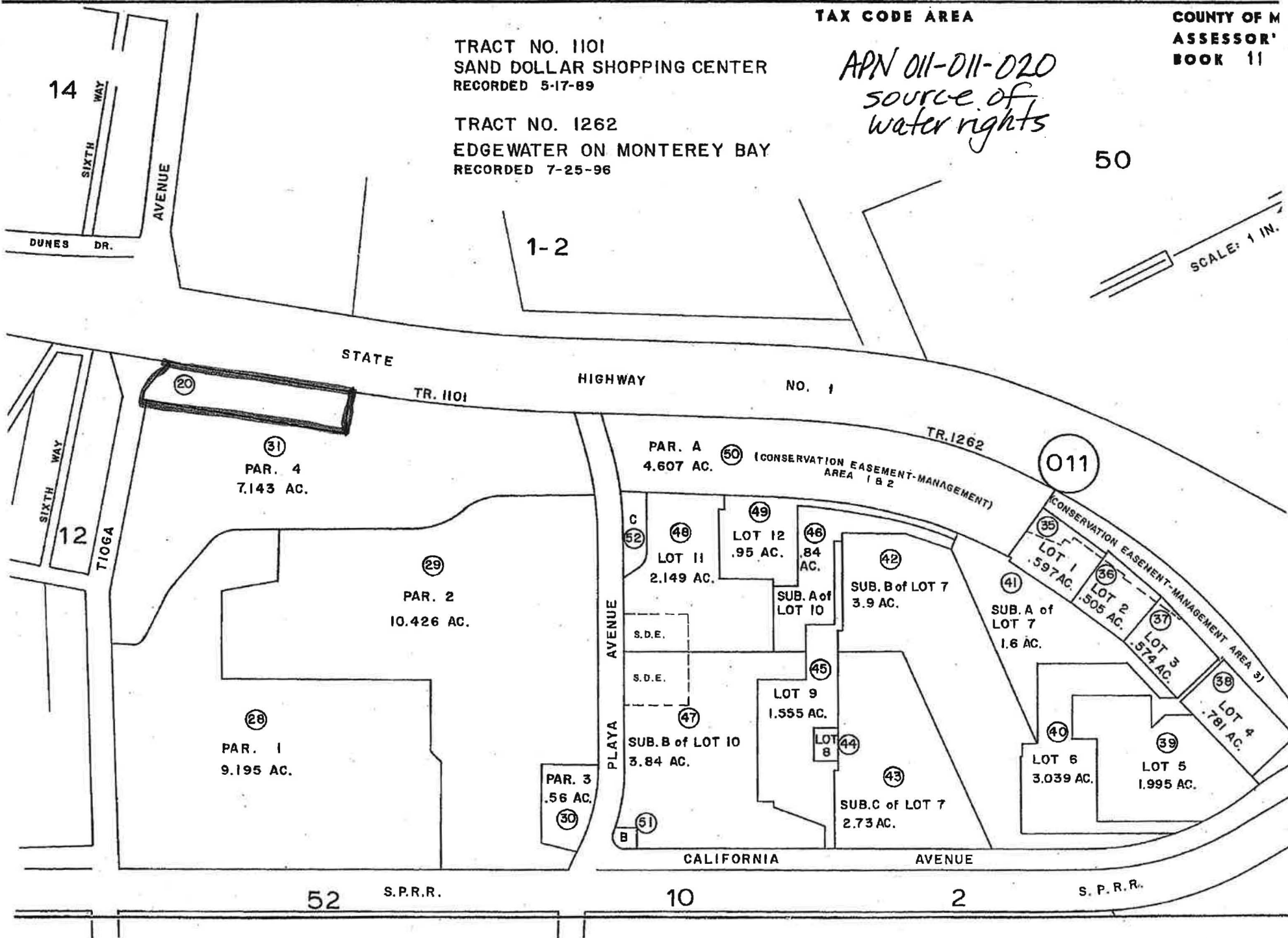
TRACT NO. 1262
EDGEWATER ON MONTEREY BAY
RECORDED 7-25-96

APN 011-011-020
*source of
water rights*

50

1-2

SCALE: 1 IN.



52

S.P.R.R.

10

2

S.P.R.R.