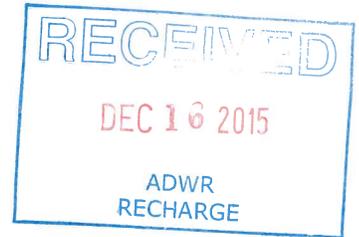


ARIZONA DEPARTMENT OF WATER RESOURCES
Water Management Division
3550 North Central Ave, 2nd Floor
Phoenix, Arizona 85012-2105
Phone (602) 771-8585 Fax (602) 771-8689



APPLICATION FOR GROUNDWATER SAVINGS FACILITY PERMIT (§ 45-812.01)

The initial fee for a Groundwater Savings Facility Permit Application is \$1,000. Total fees for this application are based upon an hourly billable rate, which can be found on the ADWR web site @www.azwater.gov. If the costs of reviewing your application exceed \$1,000, you will be invoiced for the difference, up to a maximum total fee of \$10,000. Payment may be made by cash, check, or credit card, (if you wish to pay by credit card, please contact the Recharge Program at 602-771-8599). Checks should be made payable to the Arizona Department of Water Resources. In addition to the hourly application fee, the applicant must pay any review-related costs associated with the application and the actual cost of mailing or publishing any legal notice of the application or any notice of a pre-decision administrative hearing on the application. Review related costs are: (1) costs associated with a pre-decision hearing on the application, such as court reporter services and facility rentals for the hearing, and (2) mileage expenses for a site visit conducted before issuing a decision on the application. Failure to enclose the initial application fee will cause the application to be returned. Fees for a Groundwater Savings Facility Permit Application are authorized by A.R.S. § 45-871.01 and A.A.C. R12-15-103.

FOR OFFICE USE ONLY
Application No.: 72-534550.0006
Date Received: 12-16-2015

PLEASE SUBMIT ONE ORIGINAL AND ONE COPY OF THE COMPLETED APPLICATION AND ALL SUPPORTING MATERIALS.

GENERAL INFORMATION

- Name of Applicant: QUEEN CREEK IRRIGATION DISTRICT
Mailing Address: P.O. Box 690 City: Queen Creek State: AZ Zip: 85142
Facility Contact Person: BURT HATCH Telephone: 480-987-3002 Fax: 480-987-3192
- Name of Active Management Area or Irrigation Non-Expansion Area if applicable, and name of groundwater basin and subbasin where the facility will be located AMA-PHOENIX SUBBASIN-EAST SALT RIVER VALLEY
- Name of the owner(s) of the land where the facility will be operated _____
Mailing Address _____
(If more than one owner, attach a list showing corresponding land owner and well registration number(s)).
- Legal description of the location of the facility Queen Creek Irrigation District Service area within Boundaries
(quarter/quarter/quarter/section, township and range) 57-002515
- Name of recipient(s) of in lieu water. Attach list if necessary. SEE ATTACHMENT

