

**ARIZONA DEPARTMENT OF WATER RESOURCES
OFFICE OF ASSURED AND ADEQUATE WATER SUPPLY**



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DATE RECEIVED:

APPLICATION NO:

PLEDGE OF LONG-TERM STORAGE CREDITS TO AREA OF HYDROLOGIC IMPACT FOR DESIGNATION OF ASSURED WATER SUPPLY

_____ holds Area of Hydrologic Impact Recovery Well Permit No. 74-_____ (“AOHI Permit”). The AOHI Permit requires that _____ acre-feet of long-term storage credits (“LTSCs”) must be maintained in Long Term Storage Account No. 70-_____ (“LTSC Account”), for the location(s) of recovery of the stored water determined to be within the area of hydrologic impact of the stored water.

All wells determined to be within the area of hydrologic impact of the stored water in the AOHI Permit have also been included as recovery wells in Application for Designation of Assured Water Supply No. _____ (“Designation”).

The undersigned acknowledges that _____ acre-feet of LTSCs must be maintained in the LTSC Account for the location(s) of recovery of stored water determined to be within the area of hydrologic impact as identified in the AOHI Permit, in addition to any LTSCs to be recovered as part of the water supply for the Designation.

The undersigned acknowledges that, pursuant to A.R.S. § 45-853.01(A)(2) and § 45-855.01(C), the _____ acre-feet of LTSCs are required to be maintained in storage at permitted facility No. _____, are not recoverable, and are not assignable except for the benefit of the designated service area, for a period of at least 100 years after the end of the term of the Designation, even if the provider does not maintain its Designation for the entire 100-year period. Please note, if _____ acre-feet of LTSCs are not maintained in storage at permitted facility No. _____, ADWR may review the Designation, which could result in modification or revocation under A.A.C. R12-15-711.

If the undersigned modifies its Designation and demonstrates that the assured water supply requirements for its total demand can be met without the AOHI Permit, then the _____ acre-feet of LTSCs may become recoverable again.

Name of Signatory

Title

Signature

Date