

#### FOX CANYON GROUNDWATER MANAGEMENT AGENCY

800 South Victoria Avenue, Ventura, CA 93009-1610 Phone (805) 645-1372 Fax (805) 654-3350 Websites: www.fcgma.org www.fcgmaonline.org Email: FCGMA.Report@ventura.org

# **LPV Allocation Ordinance**

Additional Reporting Requirements for Agricultural Wells

Water Year 2021/2022 (October 1, 2021 - September 30, 2022)

#### Enter FCGMA CombCode here:

#### FORM MUST BE TYPED

Agricultural Operators in the Las Posas Valley Basins **shall provide** <u>all</u> **APNs irrigated with: 1) groundwater from wells, 2) water received from purveyors, or 3) any other source**, in accordance with the Ordinance to Establish Allocation System for Las Posas Valley Groundwater Basins, Article 9.1 for Agricultural Well Operators (effective October 1, 2021). This information is required to be reported at the end of each Water Year. List one APN and corresponding water sources per row. Should additional Water Sources require more rows leave APN field blank. List Irrigated Acres for each APN only once. Attach additional sheets as necessary. FORM MUST BE TYPED.

Assessor's Parcel Number (APN)			Water Sources Per APN					
			State Well Number (SWN): Water Purveyor:		Other Groundwater Sources:			
List all APNs with irrigated acres. Use first nine (9) digits of each APN, omitting last digit. Irrigated Acres		List SWN(s) under CombCode entered above, supplying water to corresponding APN.	List Purveyors supplying water to corresponding APN.	Acre Feet (per Purveyor) Provide multiple	List wells supplying water to corresponding APN (ie.: neighbors well).	Acre Feet		
		(per APN)		List Turnout / Meter # for corresponding Purveyor.	turnout/meter breakdown separately.		(per SWN)	
Exam	iple:		00010014/401/00	VC Water Works District 1	00.000	04NE4WZ0Z02	10.670	
#1	050-0-060-23	267.00	02N68W42V09	389, 748	26.832	01N54W78Z02		
#2	060-0-051-10	76.278	02N68W43W10	VC Water Works District 19	7.495	01N54W78Z02m2	4.358	
<i>π</i> ∠	000-0-031-10	10.210	02110077407710	P53	1.50			
			02N68W43W10m3	PVCWD	3.298			
			021000004000101110	M-81, X-35	- 3.290			
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			State Well Number (SWN):	Water Purveyor:		Other Groundwater Sources:	
		Irrigated Acres		Purveyor   Turnout / Meter #	Acre Feet		Acre Feet
					-		
					-		
					-		
					-		
					-		
					-		
					-		
					-		
					-		
					-		

Complete documentation, including APNs and all water sources for the current Water Year, is required to be submitted by an authorized representative of the Well Owner or designated Well Operator on record with the Agency. Failure to submit complete documentation may result in assessment of civil penalty in accordance with Resolution No. 2019-01.

"I declare under penalty of perjury under the laws of the State of California that the information contained within this document is true and correct."

Authorized Well Owner or designated Well Operator (print name)	Date				
	Street Address / Suite	City	State	Zip	Well Owner
Authorized Well Owner or designated Well Operator (signature)		City	State		Well Operator
	Phone Number	Email Address	Email Address		