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Agent Contact Numbers (ph/fax/e-mail)

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ONTEREY PENINSULA WATER MANAGEMENT DISTRICTJUL 2 0 2009

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

MPWMD

PERMIT APPLICATION TO CREATE NEW or AMEND EXISTING WATER DISTRIBUTION SYSTEM

	Office Use Only
	Pre-Application Name/Date
	Application ID Number 2009 0720 GRE
	Date Application Accepted 7/20/2009
	Date Application Deemed Complete
	AMOUNT- The application fee must be paid concurrently with permit application. The fee amount
varies	depending upon the level of review required:
	Level 2 Permit Fee: \$2,100 for up to 30 hours of staff time
\boxtimes	Level 3 or Level 4 Permit Fee: \$2,800 for up to 40 hours staff time
	RULES- For more complex projects where staff time exceeds the number of pre-paid hours of staff time, of \$70 per hour will be charged. See Rule 60 for complete fee information.
review	ed upon a preliminary evaluation of basic information provided in the Pre-Application Form. During the of this application, staff will confirm the review level. If it is determined that a higher or lower level of is required, the applicant will be notified, and the higher or lower fee will be required or refunded.
	SECTION 1 APPLICANT INFORMATION
1.	Name of System Greek Orthodox Church WDS
2.	Assessor's Parcel Number(s) in System 259-021-013
3.	System Street Address/Area 3051 Monterey-Salinas HWY (HWY 68)
4.	Name of Applicant St John The Baptist Greek Orthodox Church (If the applicant is <u>not</u> the system owner or operator, the form <u>must</u> also be signed by the system owner or operator.)
5.	Mailing Address OR 3051 Monterey Salinas HWY POB 52090 POB 52090
б.	Contact Numbers (ph/fax/e-mail) C/o: John Scourkes @ (831) 206-3539 JnsArch@aol.com
7.	Agent (if any) Bierman Hydrogeologic
8.	Agent Mailing Address 3153 Redwood Drive, Aptos, California 95003

(831) 334-2237/708-2309

abierman@comcast.net

SECTION 2 -- WATER DISTRIBUTION SYSTEM INFORMATION

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

- 10. Attach Map (8 ½ x 11 or larger): Show the parcels to be served and the approximate location of the wells(s), easements and/or water supply facilities. See BHGL report dated 6/24/09
- Water Source Information. Complete the table below by describing both the existing and proposed 11. water source(s) to supply the proposed water system:

Source and System Information	Existing (list/describe)	Proposed (list/describe)				
A. Water Source (groundwater, surface water, reclaimed, desalination, etc.)	Two Groundwater Wells; Original & Replacement Well	Original Well to be destoryed (MCHD # 09-11584) Replacement Well to serve Church & Hall (MCHD # 08-11325)				
B. Cal-Am water service (is parcel in service area? Has active service?	Yes / No	Yes / No				
C. Total number of wells with MPWMD and County permits	Two	One				
D. Water system infrastructure (list major system components, e.g.; tanks, treatment, backflow, meters, etc.)	None Existing	Recommend one, 4,990 gal.storage tank. Groundwater will likely need RO Treatment Treatment system to be designed by a Professional Engineer.				
Other relevant information, comments or expansion on answers above:						

12.	In	erties and Emergency Supply. Please check appropriate box for i	tems A	through	F below.
		r all "yes" responses use the space provided to describe the item and I			
	if a	iny.			
	A.	Is there an emergency water supply in case of system failure?	& Yes	□No	o N/A
	B.	Will the system intertie to any other water distribution system?	□ Yes	Mo &	□ N/A
	C.	Has the other water system approved the intertie?	□ Yes	п No	₩ N/A

12.

D. Has a backflow device to prevent cross-contamination been installed? \(\times \text{Yes} \supers \text{NO} \supers \text{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? Recommend Cal-AM. See response to "E" below.

Description of "yes" responses: A. Min. of 4,990 gal storage Tank.

D. Check Valve installed at top of pump, and every 100' of drop pipe. E. BHGL recommends Cal-Am to provide fire protection service, Client to obtain letter from

Cal-Am for fire service as well as obtain approval with local

Water Rights Information. For systems utilizing wells located within the Carmel Valley Alluvial 13. Aquifer (CVAA), applicants are encouraged, but not required, 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.

 B. If within CVAA, has a "Water Rights Confirmation Letter" been issued by the Distr Yes No NA 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 (see Form IG96-11 for guidance) Riparian (invalid for 2+ parcels unless same owner) Pre-1914 SWRCB domestic registration 	
If "No," complete questions C, D and E below. C. Basis of water right claimed (see Form IG96-11 for guidance) Riparian (invalid for 2+ parcels unless same owner) Pre-1914	
If "No," complete questions C, D and E below. C. Basis of water right claimed (see Form IG96-11 for guidance) Riparian (invalid for 2+ parcels unless same owner) Pre-1914	
Riparian (invalid for 2+ parcels unless same owner) Pre-1914	
□ Pre-1914	
SWRCB domestic registration	
☐ SWRCB appropriative permit	
□ Other (specify)	
D. If assisted by attorney, attach Form IG96-12, Declaration of Competency	
E. Attach supporting water rights documentation. (MPWMD has examples on file	for review)

- Water Quality Information. For wells that will provide potable (drinking) water to one or more connections, water quality information is required prior to further processing of this application.

 Irrigation/agricultural use only (non-potable use only). No water quality analysis required.
 - I connection- Please attach water quality test results for "general mineral, general physical, inorganics" + coliform (described in Title 22, Chapter 15)
 - 2+ connections- Please attach water quality test results as required by Monterey Co. Health See BHGL report dated 6/243/09
- 15. Water Use. Complete the table below by describing both the existing and proposed uses to be served by the proposed water system:

Use and Demand Information	Existing	4	Proposed				
	(list/describe	e)	(list/describe)				
A. Residential service (potable, drinking			Potable & Non-potab	le			
water); includes standard landscaping.							
List all separate structures/units served	ctronicos:		Service for one Church and				
and if they include kitchen.)			one Hall				
B. Commercial service (potable, drinking	0 /0 mete	r	1 /1 meter				
water; # of non-fire meters)	<u> </u>		1 /1 111000				
C. Industrial service (potable or non-	0		0				
potable; # of non-fire meters)	Ü						
D. Total number of structures served	0		. two; Church and	Hall			
E. Addl. Landscaping (non-potable)	0	acres	0.59	acres			
F Pool or Pond (non-potable)	- 0	Sq. ft.	0	Sq. ft			
G. Irrigation/agriculture (non-potable)	0	acres	0	acres			
Describe crop(s) and other agric. use							
H. Live-stock (non-potable) O head O				head			
I. Other							
J. Total number of parcels served	One		One				
K. Total acreage served (all parcels)	~2.70	acres	~2.70	acres			
L. Estimated water use. (Worksheets are	0.174 *acre-feet	per year	1.65** acre-fee	t per year			
available; show how calculated.)							
Other relevant information, comments or expansion on answers above (you may add extra sheets):							
*From recent 72-hr pumping tests and performance pumping							
** Sum of Non-Residential Water Application Value and							
Estimated Applied Water Use (EAWU) supplied by Rana Creek.							
The same of the sa							

re P	equired to submit a Well Source and Pumping Impact Assessment. Most systems using groundwater wells will be equired to submit a Well Source and Pumping Impact Assessment with this formal application lease complete the items below to confirm the name and contents of the Assessments. Title, date, and preparer's name of Assessment: One. 72-Hour Constant Rate Well Pumping, Aquifer Recover and PIA for Greek Orthodox Church, APN, 259-021-013 By BHGL, 6/24/09.
Appendix A Appendix A Appendix A Appendix C Appendix F	boxes to confirm that the items have been included either in the Assessment or as separate attachments to this application. Well logs (State DWR "Well Completion Report") Results of well capacity/pumping tests (Hydrologist should follow MPWMD procedures) Copy of approved Well Construction Permit from Monterey County Health Department Pump horsepower, pump make, pump type Field Sheets
wa	eliability of Supply (Non-Well). For sources of supply other than groundwater wells, describe the source and production facilities, including reliable yield and water quality testing performed tach and list associated information, if any.
А.	nd Use/CEQA Information. Please complete all applicable items below. Zoning and land-use designations for parcels served (available from Monterey County or City) C-O-D-2 = Office and Professional District requiring use permit 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. Pending
C.	Recent or pending subdivisions to be served by the proposed water system. Include file numbers and resolution numbers used by the agencies. None
D.	Environmental documents prepared by jurisdiction or other lead agency
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. City of Monterey: CEQA Exempt.
MP	Letter to be provided by Applicant
Des	cribe and list previous MPWMD permits received, if any, including permit number and date ed. Include existing well meter information, if applicable
proj	unique issues, considerations and/or special conditions, if any, which may pertain to the bosed water system. Elevated, Manganese, EC, TDS and Turbidity concentrations will need to reduced to meet State Drinking Water Standards.

SECTION 3- SIGNATURES, RESPOSIBLE PARTIES AND ATTACHMENTS

attachments i	s correct and accurate to the best of my knowledge and belief.				
	John Scourkes 7/16/09				
Signature of A	pplicant (Please sign and print name) Date				
Signature of A	Aaron Bierman 7/16/09 gent (Please sign and print name) Date				
Qh	John Scourkes 7/16/09				
	vstem Owner/Operator (required) Date				
(Please sign an	d print name)				
e-					
person(s) "who	arty(ies). Pursuant to MPWMD Rule 22-C, please provide name(s) and address(es) of a tall times, will be available and legally responsible for the proper performance of those of a permit holder by this ordinance." Saint John The Baptist Greek Orthodox Church				
	c/o: John Scourkes				
Address(es)	326 Park Street, Salinas, California 93901				
	OR 3051 Monterey-Salinas Highway, Moneterey Ca 93940				
Attachment #1:	Please list all attachments, including maps, included with this Application Form MPWMD Fee: \$2,800 for Level IV WDS Permit Review.				
	ttachment#2: 2 copies+1CD of BHGL Report on GOC Replacement Well, dated 6/24/09.				
	Attachment#3: MPWMD Supplemental Questionnaire for WDS Application.				
Attachment#4: MPWMD Water Well Registration Form-"Active" Well Status, for GOC Replacement Well					
	Copy of Deed of Ownership of Property.				
-	Copy of Use Permit, Indicating CEQA Exempt from Lead Agency - City of Monterey.				
Attachment: Attachment :					
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Supplemental Questionnaire for Water Distribution System Application

SYSTEM NAME:	Greek	Orthodox	Church	WDS	APN: 259-021-013
	-	***************************************			

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

An electronic version of expanded answers may be requested.

- 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 (or will be prepared) and provide details regarding its preparation (e.g. notice of preparation, notice of completion, and any public hearing dates). Indicate CEQA lead agency. Lead Agency (City of Monterey) to provide CEQA Exempt Letter
- 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?
- 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 direct or cummulative impacts observed in regards to hydrogeology

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?

Yes, other SFDs have wells penetrated into the Monterey Shale.

Technical calculations performed on the well proposed for the project, as well as offsite impacts to neighboring wells show no significant cumulative impact relating to hydrogeology.

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.

Yes, one, 72-Hour Constant Rate Well Pumping, Aquifer Recovery Test & Pumping Impact Assessment for GOC Replacement Well APN: 259-021-013, dated 6/24/09 by; A.Bierman of Bierman Hydrogeologic.

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.

Cal-Am is economically feasible, although Cal-Am not available.

- S7. Will the request cause any possible duplication of service with an existing water distribution system? Explain why the duplication of service is necessary.
- 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.
- 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?

 None anticapted
- S10. Will this request adversely affect the ability of existing water distribution systems and individual users to produce water?

 None anticipated
- 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?

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

Date/Location

Saint John The Baptist of Greek Orthodox Church

c/o; John Scourkes

Note: The applicant may submit written Findings, with evidence for each Finding, for District Board consideration; please contact MPWMD staff re: proper format.