

| FOR CAP USE ONLY |  |  |
|------------------|--|--|
| CAWCD #          |  |  |
| PLAN             |  |  |
| LAND TITLE       |  |  |
| ASSIGNED TO      |  |  |
| WO               |  |  |
| IS               |  |  |
| ER               |  |  |
| MP               |  |  |

## LAND USE / CONSENT DOCUMENT APPLICATION Send the completed application package to:

Central Arizona Project Lands Department 23636 N. 7<sup>th</sup> Street Phoenix, AZ 85024 Phone: (623) 869-2555 Fax: (623) 869-2249 Email: <u>2555@cap-az.com</u> Web: <u>www.cap-az.com/lands.aspx</u>

Failure to provide ALL information will delay processing

| Applicant Legal Name:  |  |  |  |
|--|--|--|--|
| Type of Applicant (e.g. a Delaware corporation):   |  |  |  |
| Applicant Coordinator (R/W Agent) Name:  |  |  |  |
| Address:   |  |  |  |
| Email:   |  |  |  |
| Field Representative (Construction):   |  |  |  |
| Emergency Contact (After Hours):   |  |  |  |
| PROJECT INFORMATION  |  |  |  |
| Location: Twp RgeSec G&SRB&M Acres of CAP Land Use   |  |  |  |
| Location in Relation to CAP Canal:   |  |  |  |
| County/ Cross Streets/ Other Reference (e.g. County- 1/4 mile South of Happy Valley Rd and West of 7th Street) |  |  |  |
|  |  |  |  |
| <b>Project Description</b> (e.g. 12KV Overhead Power Line; 24" Underground Water Line):                        |  |  |  |
| ANTICIPATED PROJECT START DATE AND DURATION:   |  |  |  |



CAWCD#

## APPLICANT'S DESIGNATED CONTACT INFORMATION

| Safety Representative:  |
|---|
| Address:  |
| Phone:  |
| Environmental Representative:   |
| Address:  |
| Phone:  |
| Contact Name for Official Notices:  |
| Address:  |
| Signature Authority:  |
| Title:  |
| Finance/Acct/Billing Contact:   |
| Address:  |
| Email:Phone:Phone:  |
| THE FOLLOWING INFORMATION MUST BE INCLUDED WITH THIS APPLICATION  |
| Design Plans (may submit concept plans). Indicate the project area and CAP Boundaries on plans.   |
| <ul> <li>Legal Description written as Western U.S. Grid system, e.g. Section, Township &amp; Range; and<br/>Location/Site Map.</li> <li>Dreef of Insurance</li> </ul> |

Proof of Insurance.

Signature Authority and Legal Verification Form.

Permit Bond (if directed by CAP)

For additional requirement information please visit our website: www.cap-az.com/lands.aspx

The applicant is requesting CAP's review of this application and agrees to pay all administrative costs for CAP's research, meetings, inspection, appraisal, processing, preparation of land use documents, and any other CAP activities related to the applicant's project. Applicant also understands that most long-term land use licenses and easements may require an on-going annual use fee based on an appraisal.

| Print Name | Titl | е |
|------------|------|---|
| Signature  | Dat  | e |