FOX CANYON
GROUNDWATER MANAGEMENT AGENCY
A STATE OF CALIFORNIA WATER AGENCY

Application for Assignment of Baseline Allocation

Type of Assignment: ☐ **Ag to Ag** ☐ **Ag to M & I** ☐ **M & I to Ag** ☐ **M & I to M & I**

Chapter 5, Section 5.3 of the FCGMA Ordinance Code (Ordinance No. 8.1) provides for adjustments to and assignments of Baseline Allocations. These transfers are limited to a maximum of one (1) acre-foot per acre per year.

Please provide the following information:

Applicant's Name: _____
Address: _____
Phone #: _____

Allocation Recipient (if different from above): _____
Address: _____
Phone #: _____

Owner's Well No.: _____ **State Well No.:** _____

Assessor's Parcel No.(s): _____

Parcel/Usage Information:
1. Previous Acreage & Use of Parcel _____
2. Acreage & Development Planned _____
3. Previous & Planned Water Source _____

Baseline Allocation: **Currently =** _____ **AF/YR** **Assignment Requested =** _____ **AF/YR**

Provide assessor's map(s) that show location of well(s) and acreage currently & proposed to be supplying groundwater.

Applicant Information	**Recipient Information**
Name/Title: _____ Please Print	**Name/Title:** _____ Please Print
Signature: _____ Date	**Signature:** _____ Date

*****FAILURE to submit a complete package may result in denial of this application.*****

DISPOSITION OF GMA APPLICATION
(For Office use only)

☐ **Approved**

☐ **Approved as Noted** **Date Effective:** _____

☐ **Denied**

Conditions/Reason for Denial: _____

By: _____ **Date** _____

This application is valid when signed by the FCGMA Executive Officer or his/her designated appointee.

_____ **Date** _____

Jeff Pratt, P.E., FCGMA Executive Officer

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Web sites: ***www.foxcanyongma.org*** **or** ***http://publicworks.countyofventura.org/fcgma***

Revised
14 October 2005