

MARYLAND DEPARTMENT OF THE ENVIRONMENT
 Water Management Administration - Water Rights Division
 2500 Broening Highway • Baltimore, Maryland 21224
 (410) 631-3591 • 1-800-633-6101 • http://www.mde.state.md

APPLICATION TO APPROPRIATE AND USE WATERS OF THE STATE

New Application Change in Existing Permit Application Number _____

APPLICATION		
Catocin Power, LLC <small>(Owners Name)</small> 101 Ash Street <small>(Mailing Address) (Street)</small>	San Diego, <small>(City)</small>	619.696.2959 <small>(Daytime Phone Number)</small> CA 92101 <small>(State) (Zip Code)</small>
WITHDRAWAL of GROUNDWATER Appropriate and use an annual average of _____ Gallons per day, and <small>(Total Annual Use / 365)</small> _____ gallons per day during <small>(Highest Monthly Use / 30)</small> month of maximum use, from _____ wells, having a diameter of _____ inches, and a depth of _____ feet <small>(Estimate) (Estimate)</small>	WITHDRAWAL of SURFACE WATER Appropriate and use an annual average of 2,434,000 gallons per day, and a maximum use <small>(Total Annual Use / 365)</small> of 4,031,000 gallons in any one day, from Potomac River <small>(Name of Stream or Waterway)</small> Point of Rocks, MD <small>(Exact Location of Intake)</small> (See attached location map, Figure 2.F-1)	
PROJECT LOCATION		
MANOR WOODS ROAD <small>(STREET ADDRESS – MAP DIRECTIONS – ADC PAGE/GRID – TAX MAP PAGE/GRID/PARCEL)</small>		
County <u>Frederick</u> Subdivision or Town <u>Frederick</u>		Phone Number <u>619.696.2959</u>
Name and Type of Business <u>CATOCTIN POWER, LLC</u>		
SUBDIVISIONS MUST INCLUDE PLAT - ALL PROJECTS MUST INCLUDE LOCATION MAP		
PURPOSE The water will be used for: <input type="checkbox"/> Community Water Supply <input type="checkbox"/> Non-Potable Supply (sanitary non Drinking Water) <input type="checkbox"/> Potable Supply <input checked="" type="checkbox"/> Cooling Water <input type="checkbox"/> Irrigation <input type="checkbox"/> Process Water <input checked="" type="checkbox"/> Other, explain <u>Fire Supression</u>	WASTEWATER TREATMENT AND DISPOSAL <input type="checkbox"/> Public Sewer <input type="checkbox"/> Groundwater <input type="checkbox"/> Subsurface (Tilefield, Seepage Pit etc.) <input type="checkbox"/> Spray Irrigation <input type="checkbox"/> Other, Explain _____ <input checked="" type="checkbox"/> Surface Water <u>Potomac River</u> <small>(Name of stream)</small> DISCHARGE PERMIT # <u>Pending</u>	
SIGNATURE <u>Alberto Abreu</u> <u>Director, Permitting & Licensing</u> <small>PRINT (NAME) (TITLE) (DATE)</small>	THIS APPLICATION WILL NOT BE PROCESSED WITHOUT A SIGNATURE AND LOCATION MAP	
REVIEW BY COUNTY ENVIRONMENTAL HEALTH OR DESIGNATED AGENCY		
THIS SECTION NOT TO BE COMPLETED BY APPLICANT		
IS PROJECT CONSISTANT WITH THE COUNTY WATER AND SEWER PLAN AND LOCAL PLANNING AND ZONING?		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO, Explain _____		
Signature of County Representative _____ <small>(Signature) (Title) (Date)</small>		