## **Atascadero Basin Stakeholder Survey**

Thank you for taking the time to share your thoughts and concerns with us. All information will be collected, analyzed, and shared in aggregate. Individual responses will remain confidential.

1.	Are you familiar with the Sustainable Groundwater Management Act (SGMA)?  ☐ Yes ☐ No		
2.	Are you currently engaged in activities or discussions regarding groundwater management in this region?  ☐ Yes ☐ No		
3.	Do you own or manage land in this region?  ☐ Yes ☐ No		
3b.	If yes, what is the approximate size (in acres) of the largest land area you own or manage in this region?  □ Residential (under 1 acre)  □ 1-5 acres  □ 6-20 acres  □ 21-100 acres  □ More than 100 acres  □ Decline to state		
3c.	c. If yes, please tell us about your current land use and are you planning any future changes in land use or water use in the next 20 years? <i>(optional)</i>		
4.	Where do you get your water supply?  ☐ Private well  ☐ Mutual Water Company or Community Service District  ☐ Unsure  ☐ Other, please specify		
4b.	If private well is selected in Q1, what is your well depth? If you are unsure, please leave this field blank. (optional)		

4c.	If private well is selected in Q1, has your well ever gone dry?		
	□ Yes □ No		
	□ Unsure		
	- Onsure		
5.	Please indicate which type(s) of stakeholder best describes you (select all that apply):		
	☐ Residential user of water		
	☐ Ag user of water		
	□ Environmental user of water		
	☐ Entity responsible for monitoring and reporting groundwater data		
	Local land use planning agency		
	California Native American Tribe  Disadvanta and (Bural Community)		
	<ul><li>□ Disadvantaged/Rural Community</li><li>□ Federal government</li></ul>		
	☐ Other, please specify		
6.	Do you manage water resources?		
	□ Yes		
	□ No		
6b.	If yes, please tell us more about your role. (optional)		
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7.	. What is your primary interest in land or water resource management? (optional)		
8.	Do you have concerns about groundwater management?		
Ο.	□ Yes		
	□ No		
8b.	If yes, what are your groundwater management concerns? (optional)		

9.	<ul><li>9. Do you have recommendations regarding groundwater management?</li><li>☐ Yes</li></ul>		
	□ No		
9b	. If yes, what are your groundwater management recommendations? (optional)		
10	Through which mediums would you prefer t	o receive SGMA updates, public meeting	
	notices, etc.? Select all that apply.		
	□ Email		
	☐ Direct postal mail		
	☐ Direct call		
	☐ Along with my water bill		
	☐ Newspaper ☐ Social media		
	□ Website		
	□ Radio		
	☐ Public workshops/meetings		
	☐ Other, please specify		
11.	. Please use the space below to share any other information, thoughts, concerns, etc. regarding groundwater management in your area. (optional)		
12. Please identify any other individuals, agencies, grou recommend us being in contact with as we develop			
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Plea	se provide your contact information below.		
Name:		_ Date:	
Orga	anization or Business Name:		
Add	ress:		
	*****		
Pho	ne:	Email:	