Santaquin City Resolution 05-06-2015

MUNICIPAL WASTEWATER PLANNING PROGRAM RESOLUTION

WHEREAS, the City of Santaquin is a fifth class city in the State of Utah and operates a Wastewater Collection and Treatment System; and

WHEREAS, the Utah Division of Water Quality requires of the Santaguin City Public Works Department an annual Wastewater Planning Program Report; and

WHEREAS, the Utah Division of Water Quality desires formal action of the Santaguin City Council to review said report prior to its submission to the division;

NOW, THEREFORE, BE IT RESOLVED, that the Santaguin City Council informs the Water Quality Board that the following actions were taken by the City Council:

- 1. Reviewed the attached Municipal Wastewater Planning Program Report for 2014 (See Attached)
- 2. Have taken all appropriate actions necessary to maintain effluent requirements contained in the UPDES Permit (If Applicable)

January 4,

Approved and adopted by the Santaguin City Council this 6th day of May, 2015.

(irk F. Hunsaker, Mayor

B. Farnsworth, City Recorder

Municipal Wastewater Planning Program (MWPP) **Collection System Section**

Owner Name: SANTAQUIN

Name and Title of Contact Person:

Jason Callarray (DRC) Wade Eva Public Works Director

Phone:

801-420-3033

801-420-3006

E-mail:

jeallaway & santaquin.org weva & santaquin.org

PLEASE SUBMIT TO STATE BY: May 1, 2015

Mail to:

MWPP - Department of Environmental Quality

Division of Water Quality 195 North 1950 West P.O. Box 144870

Salt Lake City, Utah 84114-4870

Phone: (801) 536-4300

Form completed by

Jason Callanear Box Roses

Part I: SYSTEM AGE

	Year <u>/ 9 95</u>				
В.	What is the oldest part of your pr	esent syste	em?		
	Oldest part <u>20</u> years				
			Part II	: BYPASSES	
A.	Please complete the following ta	ble:			
	Question	Number	Points Earned	Total Points	
by	ow many days last year was there a rpass, overflow or basement flooding untreated wastewater in the system due to rain or snowmelt?		0 times = 0 points 1 time = 5 points 2 times = 10 points 3 times = 15 points 4 times = 20 points 5 or more = 25 points	0	
H by	low many days last year was there a repass, overflow or basement flooding by untreated wastewater due to equipment failure? (except plugged laterals)		0 times = 0 points 1 time = 5 points 2 times = 10 points 3 times = 15 points 4 times = 20 points 5 or more = 25 points	0	
			TOTAL PART II =	0	
В.	The Utah Sewer Management I classes. Below include the num	Program de ber of SSC	efines sanitary sewer ov s that occurred in 2014:	erflows into two)
	Number of Class 1 SSOs in Cale	endar year	2014		
	Number of Class 2 SSOs in Cale	endar year	2014		
	Class 1- a Significant SSO mea lateral obstruction or problem the	ns a SSO o at:	or backup that is not cau	sed by a private	9
 (a) effects more than five private structures; (b) affects one or more public, commercial or industrial structure(s); (c) may result in a public health risk to the general public; (d) has a spill volume that exceeds 5,000 gallons, excluding those in single structures; or (e) discharges to Waters of the state. 					Э
	Class 2 – a Non-Significant SS private lateral obstruction or pro	O means a	SSO or backup that is loes not meet the Class	not caused by a 1 SSO criteria.	а

What year was your collection system first constructed (approximately)?

A.

Part II: BYPASSES (cont.)

C.	Please specify whether the SSOs were caused a contract or tributary community, etc.					
		Part III: NEW	DEVELOPMENT			
Α.	Please complete the following table:					
	Question	Points Earned	Total Points			
ye th	as an industry (or other development) moved into the ommunity or expanded production in the past two ears, such that either flow or wastewater loadings to be sewerage system were significantly increased (10-0%)?	No = 0 points Yes = 10 points	0			
ye	re there any major new developments (industrial, ommercial, or residential) anticipated in the next 2-3 ears, such that either flow or BOD ₅ loadings to the ewerage system could significantly increase (25%)?	No = 0 points Yes = 10 points	0			
		TOTAL PART III =	0			
В.	Approximate number of new residential sewer of the sewer	connections in the la	st year			
_						
C.	C. Approximate number of new commercial/industrial connections in the last year					
	new commercial/industrial connection	ons				
D.	Approximate number of new population services	d in the last year				
	3/3 new people served					

Part IV: OPERATOR CERTIFICATION

How many collection system operators are currently employed by your facility?						
collection system operators employed						
What is/are the name(s) of your DRC operator(s)?						
Jason Callaway						
		•				
You are required to have the collection	DRC operator(s) certified a	at <u>Grade II</u>				
What is the current grade of the DRC of	operator(s)?					
State of Utah Administrative Rules require be appropriately certified. List all the class.	uires all operators considere operators in your system by	ed to be in DRC to their certification				
Not Certified						
Small Lagoons						
Collection I						
Collection II	5					
Collection III						
Collection IV						
Please complete the following table:						
Question	Points Earned	Total Points				
Is/are your DRC operator(s) currently certified at the appropriate grade for this facility? (see C)	Yes = 0 points No = 50 points	0				
How many continuing education units has each of the DRC operator(s) completed over the last 3 years?	3 or more = 0 points less than 3 = 10 points	0				
	What is/are the name(s) of your DRC of Tason Callauray You are required to have the collection What is the current grade of the DRC of State of Utah Administrative Rules required be appropriately certified. List all the class. Not Certified Small Lagoons Collection II Collection III Collection IV Please complete the following table: Question Is/are your DRC operator(s) currently certified at the appropriate grade for this facility? (see C) How many continuing education units has each of the DRC operator(s) completed over	What is/are the name(s) of your DRC operator(s)? Tasen Callaway You are required to have the collection DRC operator(s) certified at What is the current grade of the DRC operator(s)? State of Utah Administrative Rules requires all operators considered be appropriately certified. List all the operators in your system by class. Not Certified Small Lagoons Collection II Collection III Collection IV Please complete the following table: Question Points Earned Is/are your DRC operator(s) currently certified at the appropriate grade for this facility? (see C) How many continuing education units has each of the DRC operator(s) completed over				

A. Please complete the following table:

Question	Points Earned	Total Points
Do you follow an annual preventative maintenance program?	Yes = 0 points No = 30 points	0
Is it written?	Yes = 0 points No = 20 points	0
Do you have a written emergency response plan?	Yes = 0 points No = 20 points	6
Do you have an updated operations and maintenance manual	Yes = 0 points No = 20 points	D
Do you have a written safety plan?	Yes = 0 points No = 20 points	0
	TOTAL PART V =	0

Part VI: SSMP EVALUATION

A.	Has your system completed its Sewer System Management Plan (SSMP)?
	Yes NO
B.	If the SSMP has been completed then has the SSMP been public noticed?
	No Yes, included date of public notice
C.	Has the SSMP been approved by the permittee's governing body at a public meeting?
	Yes NO
D.	During the annual assessment of the operation and maintenance plan were any adjustments needed based on the performance of the plan?
	No If yes, what components of the plan were changed (i.e. line cleaning, CCTV inspections and manhole inspections and/or SSO events)

Part VI: SSMP EVALUATION (cont.)

E. During 2014 was any part of the SSMP audited as part of the five year audit? No
If yes, what part of the SSMP was audited and were changed made to the SSMP as a result of the audit?
F. Has your system completed its System Evaluation and Capacity Assurance Plan (SECAP) as defined by the Utah Sewer Management Program? Yes NO
The following are required completion dates that the SSMP and SECAP based on population. The SSMP and SECAP must be public noticed and approved by the permittee's governing body in order to be considered complete.

	Population				
Program	< 2,000	2,000 - 3,500	3,501 – 15,000	15,001 - 50,000	> 50,000
SSMP	3-31-16	3-31-16	9-30-15	3-31-15	9-30-14
SECAP	Optional	9-30-17	9-30-16	3-31-16	9-30-15

SSMP Signatory Requirement

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of Signatory Official

Print Name of Signatory Official

Ity MANAGER

The signatory official is the person authorized to sign permit documents, per R317-8-3.4.

Part VII: SUBJECTIVE EVALUATION

This section should be with the system operators.

Α	 Describe the physical condition of the sewer collection system: (lift stations, etc. included)
	Collection system was constructed in 1995.
	System has very little I and I. Lift station
	was constructed in 2007 with new pumps
	installed in 2013.
В	. What sewerage system improvements does the community have under consideration fo
	the next 10 years?
	due to development and arouth
	GOE TO SPECEDEMENT AND GROWIN
C	. Explain what problems, other than plugging have you experienced over the last year
	have experienced higher here's of grouse
	in our hift station and certain Mains
D	. Is your community presently involved in formal planning for system
	expansion/upgrading? If so explain.
Е	Does the municipality/district pay for the continuing education expenses of operators
	ALWAYS SOMETIMES NO
	If they do, what percentage is paid?
	approximately <u>/00</u> %
	approximation / / / /

Part VII: SUBJECTIVE EVALUATION (cont.)

F. Is there a written policy regarding continuing education and training for operators?				
	YES NO			
G.	Any additional comments? (Attach additional sheets if necessary.)			

POINT SUMMATION

Fill in the values from Parts II through V in the blanks provided in column 1. Add the numbers to determine the MWPP point total that your wastewater facility has generated for the past twelve months.

Part	Points
II	0
III	0
IV	0
V	0
Total	0

Municipal Wastewater Planning Program (MWPP) Mechanical Plant Section

Owner Name: SANTAQUIN

Name and Title of Contact Person:

Jason Callarray (DRC) Wade Eva Public Works Director

Phone:

801-420-3033

801-420-3006

E-mail:

jeallanay@ santaquin org Weva@santaquin org

PLEASE SUBMIT TO STATE BY: May 1, 2015

Mail to:

MWPP - Department of Environmental Quality

Division of Water Quality 195 North 1950 West P.O. Box 144870

Salt Lake City, Utah 84114-4870

Phone: (801) 536-4300

Form completed by

A. Please update (if needed) the average <u>design</u> flow and average <u>design</u> BOD₅ and TSS loading for your facility.

	Average Design Flow (MGD)	Average Design BOD ₅ Loading (lbs/day)	Average Design TSS Loading (lbs/day)
Design Criteria	0,650	1355	1355
90% of the Design Criteria	.585	1220	1220

B. Please list the average monthly flows in millions of gallons per day (MGD) and BOD₅ and TSS loadings in milligrams per liter (mg/L) *received* at your facility during 2014. (Calculate the BOD₅ and TSS loadings in pounds per day (lbs/day).

Month	(1) Average Monthly Flow (MGD)	(2) Average Monthly BOD₅ Concentration (mg/L)	(3) Average BOD₅ Loading (lbs/day) 1	(4) Average Monthly TSS Concentration (mg/L)	(5) Average TSS Loading (lbs/day) 2
January	.542	183	827	240	777
February	.512	208	888	305	1302
March	.492	201	824	265	1087
April	-487	208	844	254	1031
May	,489	210	856	340	1386
June	.548	248	1133	282	1288
July	.548	198	904	251	1147
August	.551	121	556	218	1001
September	.552	170	740	275	1266
October	.549	177	810	310	1419
November	,563	129	605	251	1178
December	. 565	231	1088	262	1234
Average	, 533	190	839	271	1176

¹ BOD₅ Loading (3) = Average Monthly Flow (1) x Average Monthly BOD₅ Concentration (2) x 8.34 2 TSS Loading (5) = Average Monthly Flow (1) x Average Monthly TSS Concentration (4) x 8.34

Part I. INFLUENT INFORMATION (cont.)

C. Refer to the information in A & B to determine a point value for your facility. Please enter the points for each question in the blank provided.

Question	Number	Points Earned	Total Points
How many times did the average monthly flow (Part B., Column 1) to the wastewater facility exceed 90% of design flow?	0	0 = 0 points 1 - 2 = 10 points 3 - 4 = 20 points 5 or more = 30 points	0
How many times did the average monthly flow (Part B., Column 1) to the wastewater facility exceed the design flow?	0	0 = 0 points 1 - 2 = 20 points 3 - 4 = 40 points 5 or more = 60 points	0
How many times did the average monthly BOD₅ loading (Part B., Column 3) to the wastewater facility exceed 90% of the design loading?	0	0-1 = 0 points 1 - 2 = 10 points 3 - 4 = 20 points 5 or more = 30 points	0
How many times did the average monthly BOD₅ loading (Part B., Column 3) to the wastewater facility exceed the design loading?	0	0 = 0 points 1 - 2 = 20 points 3 - 5 = 40 points 5 or more = 60 points	Ò
		TOTAL PART I =	0

Part II: EFFLUENT INFORMATION

A. Please list the average monthly BOD₅, TSS, Ammonia (NH₃), monthly maximum Cl₂, minimum monthly DO, and 30-day geometric averages for Fecal and Total Coliform,or E-Coli produced by your facility during 2014.

Month	(1) BOD₅ (mg/L)	(2) TSS (mg/L)	(3) Fecal Coliform (#/100 mL)	(4) Total Coliform (#/100 mL)	(5) E-Coli	(6) Cl ₂ (mg/L)	(7) DO (mg/L)	(8) NH ₃ (mg/L)
		V	Vhole Numbers	Only		One De	cimal Plac	ce Only
January	0				0			
February	6				0			
March	0				0			
April	0				0			
May	0				0			
June	0				0			
July	0	-			0			
August	0				6			
September	0				0			
October	0				0			
November	0				0			
December	0				0			
Average	0				0			

B. Please list the monthly average permit limits for the facility in the blanks below.

	BOD ₅ (CBOD ₅) (mg/L)	maximum Cl ₂ (mg/L)	NH₃ (mg/L)	minimum DO (mg/L)
Monthly Permit Limit	10	NA	N/A	NA
80% of the Permit Limit	E			

Part II: EFFLUENT INFORMATION (cont.)

C. Refer to the information in A & B and your operating reports to determine a point values for your facility.

Question	Number	Points Earned	Total Points
How many months did the effluent BOD₅ (CBOD₅) exceed 80% of monthly permit limit?	0	0 -1 = 0 points 2 = 5 points 3 = 10 points 4 = 15 points 5 or more = 20 points	0
How many months did the effluent BOD ₅ (CBOD ₅) exceed the monthly permit limits?	.0	0 = 0 points 1 - 2 = 10 points 3 or more = 20 points	0
How many months did the effluent TSS exceed 20 mg/L?	N/A	0 -1 = 0 points 2 = 5 points 3 = 10 points 4 = 15 points 5 or more = 20 points	
How many months did the effluent TSS exceed 25 mg/L?	NA	0 = 0 points 1 - 2 = 10 points 3 or more = 20 points	
How many times did the Cև exceed permit limit?	NA	0 = 0 points 1 - 2 = 15 points 3 or more = 30 points	
How many times did the NH₃ exceed permit limits?	NA	0 = 0 points 1 - 2 = 15 points 3 or more = 30 points	
How many times did the DO not meet permit limit?	NA	0 = 0 points 1 - 2 = 15 points 3 or more = 30 points	
How many months did the 30-day fecal coliform exceed 200 #/100 mL?	NA	0 = 0 points 1 - 2 = 10 points 3 or more = 20 points	
How many months did the 30-day total coliform exceed 2,000 #/100 mL?	NA	0 = 0 points 1 - 2 = 10 points 3 or more = 20 points	
How many months did the 30-day E-coli exceed 126 #/100 mL?	0	0 = 0 points 1 - 2 = 20 points 3 or more = 40 points	0
		TOTAL PART II =	0

Part III: FACILITY AGE

In what year were the following process units constructed or underwent a major upgrade? To determine a point score subtract the construction or upgrade year from 2014.

Points = Age = Present Year - Construction or Upgrade Year.

Enter the calculated age below.

If the point total exceeds 20 points, enter only 20 points.

Unit Process	Current Year	Construction or Last Upgrade Year	Age = Points
Headworks	2014	2013	/
Primary Treatment	2014	2013	/
Secondary Treatment	2014	2013	/
Solids Handling	2014	2013	/
Disinfection	2014	2013	/
			the spilling property of

TOTAL PART III (not greater than 20) =

Part IV: BYPASSES

Please complete the following table:

Question	Number	Points Earned	Total Points
How many days in the past year was there a bypass or overflow of untreated wastewater due to high flows?	0	0 = 0 points 1 = 5 points 2 = 10 points 3 = 15 points 4 = 20 points 5 or more = 25 points	0
How many days in the last year was there a bypass or overflow of untreated wastewater due to equipment failure?	D	0 = 0 points 1 = 5 points 2 = 10 points 3 = 15 points 4 = 20 points 5 or more = 25 points	0
	Lacra de la constante de la co	TOTAL PART IV =	0

A. Please complete the following table:

Current Disposal Method (check all that apply)	Points Earned	Total Points
Landfill	Class B = 0 points < Class B = 50 points	D
Land Application	Site Life 0 - 5 years = 20 points 5 - 10 years = 10 points 10+ years = 0 points	NA
Give Away/Distribution and Marketing	Class A = 10 points Class B = 20 points	NA
	TOTAL PART V =	6

Part VI: NEW DEVELOPMENT

A. Please complete the following table:

Question	Points Earned	Total Points
Has an industry (or other development) moved into the community or expanded production in the past two years, such that either flow or wastewater loadings to the sewerage system were significantly increased (10 - 20%)?	No = 0 points Yes = 10 points	0
Are there any major new developments (industrial, commercial, or residential) anticipated in the next 2-3 years, such that either flow or BOD loadings to the sewerage system could significantly increase (25%)?	No = 0 points Yes = 10 points	0
Have you experienced any upset due to septage haulers?	No = 0 points Yes = 10 points	0
	TOTAL PART VI =	0

Part VI: NEW DEVELOPMENT (cont.)

	Approximate number of new residential sewer connections in the last year
	_/ new residential connections
	Approximate number of new commercial/industrial connections in the last year
	new commercial/industrial connections
	Approximate number of new population serviced in the last year
	3/3 new people served
	Part VII: OPERATOR CERTIFICATION
	How many operators are currently employed by your facility?
	operator(s) employed
	What is/are the name(s) of your DRC operator(s)?
	Jason Callarary
	Gress Hiatt
	Pat Hatfield
	You are required to have the treatment DRC operator(s) certified at GRADE III.
	the state of the s
	What is the current grade of the DRC operator(s)? <u>TV</u>
).	State of Utah Administrative Rules Require that all operators considered to be in DRC to be appropriately certified. List all the operators in your system by their certification class.
	Not Certified
	Treatment I 2
	Treatment II
	Treatment III
	Treatment IV/

Part VII: OPERATOR CERTIFICATION (cont.)

E. Please complete the following table:

Question	Points Earned	Total Points
Is/are your DRC operator(s) currently certified at the appropriate grade for this facility? (see C)	Yes = 0 points No = 50 points	6
How many continuing education units has each of the DRC operator(s) completed over the last 3 years?	3 or more = 0 points less than 3 = 10 points	0
	TOTAL PART VII =	0

Part VIII: FACILITY MAINTENANCE

A. Please complete the following table:

Question	Points Earned	Total Points
Do you follow an annual preventative maintenance program?	Yes = 0 points No = 30 points	0
Is it written?	Yes = 0 points No = 20 points	0
Do you have a written emergency response plan?	Yes = 0 points No = 20 points	0
Do you have an updated operations and maintenance manual	Yes = 0 points No = 20 points	Ö
Do you have a written safety plan?	Yes = 0 points No = 20 points	0
	TOTAL PART VIII =	Ŏ

Part IX: SUBJECTIVE EVALUATION

This section should be completed with the facility operators.

٨.	Do you consider your wastewater facility to be in good physical and structural condition?
	YES NO
	If NOT, why?
В	What improvements do you think the plant will need in the next 5 years? We way wed one more blower,
	and 2 more filter Cossettes depending
	on how fast the citys population
	increases.
С.	Where there any backups into basements at any point in the collection system in 2014.
	YES NO
	Why? (do not include backups due to clogged laterals)
D.	Does the municipality/district pay for the continuing education expenses of operators?
	ALWAYS SOMETIMES NO
	If so, what percentage do they pay?
	approximately %

Part IX: SUBJECTIVE EVALUATION (cont.)

E.	Is there a written policy regarding continuing education and training for wastewater operators?
	YES NO NO
F.	Have you done any major repairs or mechanical equipment replacement in 2014? (do not include construction or upgrade projects)
	YES NO
G.	What was the approximate cost for those repairs or replacements?
	\$
H.	Any additional comments? (Attach additional sheets if necessary.)

POINT SUMMATION

Fill in the values from Parts I through VIII in the blanks provided in column 1. Add the numbers to determine the MWPP point total that your wastewater facility has generated for the past twelve months.

Part	Points
1	0
II	0
III	5
IV	0
V	0
VI	0
VII	0
VIII	0
Total	5

Municipal Wastewater Planning Program (MWPP) Financial Evaluation Section

Owner Name: SANTAQUIN

Name and Title of Financial Contact Person:

Phone:

(801) 754 -3211

E-mail:

breeves a Santaguin.org

PLEASE SUBMIT TO STATE BY: May 1, 2015

Mail to:

MWPP - Department of Environmental Quality

Division of Water Quality 195 North 1950 West P.O. Box 144870

Salt Lake City, Utah 84114-4870

Phone: (801) 536-4300

NOTE: This questionnaire has been compiled for your benefit by a state sponsored task force comprised of representatives of local government and service districts. It is designed to assist you in making an evaluation of your wastewater system and financial planning. Please answer questions as accurately as possible to give you the best evaluation of your facility. If you need assistance please call, Emily Canton. Utah Division of Water Quality: (801) 536-4342.

I. Definitions: The following terms and definitions may help you complete the worksheets and questionnaire:

User Charge (UC) - A fee established for one or more class(es) of users of the wastewater treatment facilities that generate revenues to pay for costs of the system.

Operation and Maintenance Expense - Expenditures incurred for materials, labor, utilities, and other items necessary for managing and maintaining the facility to achieve or maintain the capacity and performance for which it was designed and constructed.

Repair and Replacement Cost - Expenditures incurred during the useful life of the treatment works for obtaining and installing equipment, accessories, and/or appurtenances necessary to maintain the existing capacity and the performance for which the facility was designed and constructed.

Capital Needs - Cost to construct, upgrade or improve the facility.

Capital Improvement Reserve Account - A reserve established to accumulate funds for construction and/or replacement of treatment facilities, collection lines or other capital improvement needs.

Reserve for Debt Service - A reserve for bond repayment as may be defined in accordance with terms of a bond indenture.

Current Debt Service - Interest and principal costs for debt payable this year.

Repair and Replacement Sinking Fund - A fund to accumulate funds for repairs and maintenance to fixed assets not normally included in operation expenses and for replacement costs (defined above).

Part I: OPERATION AND MAINTENANCE

Complete the following table:

Question	Points Earned	Total
Are revenues sufficient to cover operation, maintenance, and repair & replacement (OM&R) costs at this time?	YES = 0 points NO = 25 points	0
Are the projected revenues sufficient to cover operation, maintenance, and repair & replacement (OM&R) costs for the next five years? YES = 0 points NO = 25 points		
Does the facility have sufficient staff to ensure proper O&M?	YES = 0 points NO = 25 points	0
Has a dedicated sinking fund been established to provide for repair & replacement costs?	YES = 0 points NO = 25 points	0
Is the repair & replacement sinking fund adequate to meet anticipated needs?	YES = 0 points NO = 25 points	0
	TOTAL PART I =	0

Part II: CAPITAL IMPROVEMENTS

Complete the following table:

Question	Points Earned	Total
Are present revenues collected sufficient to cover all costs and provide funding for capital improvements?	YES = 0 points NO = 25 points	\bigcirc
Are projected funding sources sufficient to cover all projected capital improvement costs for the next five years?	YES = 0 points NO = 25 points	0
Are projected funding sources sufficient to cover all projected capital improvement costs for the next ten years?	YES = 0 points NO = 25 points	0
Are projected funding sources sufficient to cover all projected capital improvement costs for the next twenty years ?	YES = 0 points NO = 25 points	0
Has a dedicated sinking fund been established to provide for future capital improvements?	YES = 0 points NO = 25 points	0
	TOTAL PART II =	0

Complete the following table:

Question	Points Earned	Total
Is the wastewater treatment fund a separate enterprise fund/account or district?	YES = 0 points NO = 25 points	0
Are you collecting 95% or more of your sewer billings?	YES = 0 points NO = 25 points	
Is there a review, at least annually, of user fees?	YES = 0 points NO = 25 points	
Are bond reserve requirements being met if applicable?	YES = 0 points NO = 25 points	\bigcirc
	TOTAL PART III =	0

Part IV: PROJECTED NEEDS

Estimate as best you can the following:

Cost of projected capital	2015	2016	2017	2018	2019
improvements (in thousands)	0	0	0	0	0

Growth will dictate when the next WRF Membrane Chain will Come
On the This Could be within syears or after, However, we set aside Point Summation
\$2500 from Every Sewer Impact fee | Building Permit to Cower this future Expenditure In its Enterty.
Fill in the values from Parts I through III in the blanks provided in column 1. Add the
numbers to determine the MWPP point total that reflects your present financial position
for meeting your wastewater needs.

Part	Points
1	0
II	0
III	0
Total	