
State Water Resources Control Board

To All Wastewater Agencies and Interested Parties,

CALENDAR YEAR (CY) 2018 WASTEWATER USER CHARGE SURVEY; REQUEST FOR INFORMATION FROM AGENCIES RESPONSIBLE FOR COLLECTION, TRANSPORT, TREATMENT OR DISPOSAL OF WASTEWATER

The Division of Financial Assistance (DFA) is conducting a survey of sewer rates and connection (capacity) fees for CY 2018. The survey information assists us with providing communities with financing to address water quality problems throughout California and also benefits communities to better serve their constituents. In order to make the process as easy as possible, we have developed an online survey and provided a copy of the survey questionnaire to assist in gathering the information necessary to complete the online survey. The online survey should take approximately 15 minutes to complete after you gather the information. We ask that you please complete the survey at your earliest convenience. The online survey is available via the following link:

<https://www.surveymonkey.com/r/CY18DFASURVEY>

If you cannot complete the survey online, you may complete a hard copy of the survey questionnaire and return it by mail to the address below, or you may email the completed form to DFA-Survey@waterboards.ca.gov.

Mailing Address: **State Water Resources Control Board**
 Division of Financial Assistance
 P.O. Box 100
 Sacramento, CA 95812-0100

Please complete the survey no later than **December 31, 2018**. We hope to publish the survey results by **June 14, 2019**, so your timely response to the survey will assist us in meeting this timeline.

After the survey report has been completed, a link to the report will be provided to you via the email provided on the survey questionnaire.

Wastewater User Charge Survey
Cover Letter

If you have any questions concerning this letter, the enclosed forms, or wastewater user charge systems, please contact Mr. Melky Calderon at (916) 341-5646 or by email at DFA-Survey@waterboards.ca.gov. Thank you in advance for completing the questionnaire and participating in this year's survey.

Sincerely,

A handwritten signature in blue ink that reads "Leslie S. Laudon". The signature is written in a cursive style with a large, stylized initial "L".

Leslie S. Laudon, Deputy Director
Division of Financial Assistance

2. Please fill in the following table (Base Wastewater User Fee as of the date survey completed):

	Number of sewer accounts	CY 2018 Wastewater User Fee (\$): If variable, please specify the average.	Connection (or capacity) fees (\$): If variable, please specify the average.
Single-family residence		(per month)	(per connection)
Multiple family (per unit)		(per month)	(per connection)
Mobile homes (per unit)		(per month)	(per connection)
Industrial		(per month)	(per connection)
Commercial		(per month)	(per connection)
Institutional		(per month)	(per connection)

3. Sources of revenue (check all that apply; and please provide the approximate percentage of total revenue provided by each of the following sources):

- Sewer service charge _____%
 Sewer connection fees _____%
 Industrial waste fees _____%
 Ad valorem (property) taxes _____%
 Interest _____%
 Other _____% (describe) _____

4. Is loading considered when setting rates? Yes No

If yes, please check all loading types that apply.

- Biochemical Oxygen Demand (BOD)
 Chemical Oxygen Demand (COD)
 Suspended Solids (SS)
 Other, please specify: _____

5. Wastewater debt service (bonds, loans, Certificate of Participation, etc.) is included in (check all that apply):

- The wastewater user fee
 Other wastewater-related charges to the customer (e.g., property taxes)
 Neither of the above, the agency has no debt

6. Are connection fees used for anything other than capital expansion (or replacement)? Yes No N/A

7. a. Agency's CY 2018 wastewater operation and maintenance budget is: \$ _____

b. Agency's CY 2018 wastewater debt service budget is: \$ _____

c. Agency's CY 2018 wastewater capital expenditure budget is: \$ _____

IV. AGENCY ROLE/RESPONSIBILITIES

1. Wastewater facilities your agency is responsible for (check all that apply):

- Collection
 Interceptor
 Treatment
 Disposal

2. Do you have a pre-treatment program? Yes No

3. a. Current average dry weather flow (ADWF) is: _____ mgd (million gallons per day)

b. Current design (or contractual) flow capacity is: _____ mgd

4. Is your agency responsible for onsite septic system maintenance? Yes No

If onsite septic system maintenance is your agency's only responsibility, please skip to Section VI.

5. Is your agency responsible for treatment? Yes No

If No, please list the agency that is then skip to Section VI:

V. WASTEWATER TREATMENT FACILITIES

1. Please list the name(s) and location(s) of the treatment facilities your agency is responsible for:

2. The treatment facilities consist of or include the following components or processes (check all that apply):

- Community Septic System Ponds and/or Lagoon System
 Septic Tank Effluent Pump (STEP) System Extended Aeration

Primary Treatment:

- Comminutor/Grinder Screening Scum and/or Grit Removal Sedimentation Tank
 Other, please explain: _____

Secondary Treatment:

- Suspended Growth/Activated Sludge (e.g., Sequencing Batch Reactor, etc.)
 Attached Growth (e.g., Trickling Filter, Biotower, Rotating Biological Contactor, etc.)
 Other, please explain: _____

Disinfection:

- Chlorine Ozone Ultraviolet Light Other, please explain: _____

Tertiary/ Advanced Treatment:

- Filtration, please specify filtration type (e.g., Membrane Bioreactor, Sand Filter, etc.):

 Phosphorus Removal Nitrification Denitrification Other, please specify: _____

Sludge Handling:

- Anaerobic Digestion Dewatering Thickening Compost Disposal/Landfill

Other Processes:

- Other, please explain: _____

3. Amount of recycled water used: _____ (AFY) Volume of potable water usage offset: _____ (AFY)

4. Is your agency responsible for wastewater discharge? Yes No

If your agency is not responsible for wastewater discharge, please list the agency that is then skip to Section VI:

5. Discharge is regulated under (please check all that apply, and write the order number(s) in the blank below):

- Waste Discharge Requirements (WDRs) Order No.: _____
 National Pollutant Discharge Elimination System (NPDES) Permit NPDES No.: _____

VI. FUTURE NEEDS

1. Does your agency have an electronic capital improvement plan available on the internet? Yes No

If yes, please provide the website address: _____

VII. COMMENTS

1. Please provide comments in the space provided below:
