

State Waterboard 2019 SWS EAR

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Intro	Contacts	Population	Connections	Sources	Water Supplied	Water Rates and Deliveries	Water Quality	Treatment		
Backflow	Certification	Improvements	Complaints	Distribution	Emergency	Conservation	Climate Change	LSLR	Acknowledge	Finalize

SMALL WATER SYSTEM 2019 ANNUAL REPORT TO THE DRINKING WATER PROGRAM FOR YEAR ENDING DECEMBER 31, 2019 [Section 116530 Health & Safety Code]

WATER SYSTEM INFORMATION

Water System No.:	CA2210906
Water System Name:	MARIPOSA PINES MU
Water System Classification:	Community Water System
Water System Ownership (See descriptions below):	--Pick one--
Physical location: (address line 1, address line 2, city, zip)	7126 Hites Cove Road MARIPOSA 95338
General Office Phone: (with area code)	209-742-7130
Web site address:	mariposapineswater@waterboards.ca.gov

BOXES COLORED YELLOW ARE MANDATORY QUESTIONS AND MUST BE ANSWERED TO COMPLETE THIS REPORT

Water System Ownership Descriptions:

- Local Government: e.g., city, county, or special district, local school district, junior colleges, county or community parks, etc.
- State or Federal Government: e.g., state or national park, BLM, USFS and COE campgrounds and recreation facilities, state hospitals, State universities and colleges, California Veterans Home, County or District Fairs and Expositions, Caltrans rest stop, military base, other state or federal facility
- Privately owned, non-PUC-regulated (Community Water System): e.g., mobile home park, apartment or condominium
- Privately owned business (non-community): e.g., church, private school, restaurant, amusement park, RV park/campground, motel, ranch/farm, factory, other business establishment



COMMUNITY WATER SYSTEMS WHO RECEIVE AN ANNUAL BILL FROM THE STATE

IF YOU RECEIVE AN ANNUAL BILL FROM A LOCAL COUNTY, SKIP THIS SECTION.

Your water system classification is: Community Water System

IF YOU ARE NOT A COMMUNITY WATER SYSTEM, SKIP THIS SECTION.

CERTIFICATION FOR REDUCTION OF ANNUAL FEES FOR PUBLIC WATER SYSTEMS SERVING A DISADVANTAGED COMMUNITY (DAC)

If you are a community water system who has previously submitted documentation to the State Water Resource Control Board certifying that you are serving a DAC, you must check the box below to continue receiving a reduced annual fee.

☐ I certify under penalty of perjury under the laws of the State of California as a duly authorized representative of the public water system for which this document is being submitted that the foregoing is true and correct: the public water system for which this report is being submitted served a disadvantaged community (as defined in Title 22, Division 4, Chapter 14.5, section 64300 of the California Code of Regulations) for the year in which this report is applicable, and, if requested to do so by the State Board, will provide documentation to the State Board upon request, which may include an income survey, that the public water system served a disadvantaged community during the time period for which this report applies.

If you are a community water system who is not currently receiving a DAC fee reduction, is a serving a DAC as defined in Title 22, Division 4, Chapter 14.5, section 64300 of the California Code of Regulations and would like to request a fee reduction, y

Click [HERE](#) for instructions on how to upload your completed DAC certification form. To upload a DAC Certification Form, click [Choose File](#) No file selected

[Upload](#)

If you have questions about completing this section of the report, please contact the Program Liaison Unit at DDW-PLU@waterboards.ca.gov or call (916) 449-5158.

0%

REPORT SUBMITTED BY: ⓘ

Note: Your name and title, email address, and work phone number are disclosable report information that may be obtained through the Public Records Act.

Name:	Tom Atkins
Title:	Vice President
Work phone:	209-742-2333
Cell phone:	209-617-1808
Email address:	mariposapineswater@waterboards.ca.gov

Please be aware that all comment boxes throughout this electronic annual report will be made publicly available WITH THE EXCEPTION of the comment box below. Only Waterboard staff and other people with your water system's DRINC login credentials will have access to this comment box. You are encouraged to provide any comments that you believe may help improve this annual report process.

PRIVATE COMMENTS: MPMWC new email: mari

1. Public Water System Contacts



[Click here](#) to learn how to Modify, Add and Delete Contacts in the table below.

IMPORTANT: Each water system must have one and only one Administrative Contact AND one and only one Financial Contact. The same person may be both the Administrative and Financial Contacts.

Please provide an email address for the Administrative Contact as most email communication, particularly email blasts, from the Division of Drinking Water will be sent to the email address of the Administrative Contact.

PHONE TYPE: Home – if you use your home or personal phone number as your business number, use the HOME phone type instead and leave the BUSINESS phone type blank.

Only the BUSINESS phone type will appear in Drinking Water Watch (<https://sdwis.waterboards.ca.gov/PDWW/>), which can be viewed by the public, if the General Office phone number is not provided (see Water System Information section under the Intro tab).

NAME, TITLE & ADDRESS	PHONE TYPE 	PHONE NO.	EMAIL	CONTACT TYPE (pick all that apply) 	
ATKINS, TOM	Business	209-742-2333	atkins@sti.net	<input type="checkbox"/> Contact1	<input type="checkbox"/> Operator
	Home			<input type="checkbox"/> Delete	
VICE PRESIDENT	Facsimile			<input type="checkbox"/> Administrative	
7126 Hites Cove Road	Mobile			<input type="checkbox"/> Financial	
			mariposapineswater@gmx	<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Water Quality
MARIPOSA	Emergency			<input type="checkbox"/> Owner	<input checked="" type="checkbox"/> Legal
95338				<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator
HARRIS, HEATH	Business	209-966-4461	yosemitewelltesting@hotmail.com	<input type="checkbox"/> Contact2	<input type="checkbox"/> Operator
	Home			<input type="checkbox"/> Delete	
OPERATOR	Facsimile			<input type="checkbox"/> Administrative	
P. O. Box 529	Mobile	209-617-2384		<input type="checkbox"/> Financial	
				<input checked="" type="checkbox"/> Designated Operator In Charge	<input checked="" type="checkbox"/> Water Quality
MARIPOSA	Emergency			<input type="checkbox"/> Owner	<input type="checkbox"/> Legal
95338				<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator
MARIPOSA PINES MW	Business		mariposapineswater@gmx	<input checked="" type="checkbox"/> Contact3	<input type="checkbox"/> Operator
	Home			<input type="checkbox"/> Delete	
	Facsimile			<input type="checkbox"/> Administrative	
	Mobile			<input type="checkbox"/> Financial	
				<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Water Quality
	Emergency			<input type="checkbox"/> Owner	<input type="checkbox"/> Legal
				<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator
LEACH, ROY	Business	209-742-7130	lqleach@sti.net	<input type="checkbox"/> Contact4	<input type="checkbox"/> Operator
	Home			<input type="checkbox"/> Delete	
PRESIDENT	Facsimile			<input checked="" type="checkbox"/> Administrative	
7126 Hites Cove Road	Mobile			<input type="checkbox"/> Financial	
			mariposapineswater@gmx	<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Water Quality
MARIPOSA	Emergency			<input type="checkbox"/> Owner	<input type="checkbox"/> Legal
95338				<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator
	Business			<input type="checkbox"/> Contact5	<input type="checkbox"/> Operator
	Home			<input type="checkbox"/> Delete	
	Facsimile			<input type="checkbox"/> Administrative	
	Mobile			<input type="checkbox"/> Financial	
				<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Water Quality
	Emergency			<input type="checkbox"/> Owner	<input type="checkbox"/> Legal

					<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator
<input type="text"/>	Business	<input type="text"/>		<input type="checkbox"/> Contact6 Delete	<input type="checkbox"/> Operator	
	Home	<input type="text"/>		<input type="checkbox"/> Administrative		
<input type="text"/>	Facsimile	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Financial	<input type="checkbox"/> Emergency	
<input type="text"/>	Mobile	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Contact6 Water Quality	
<input type="text"/>	Emergency	<input type="text"/>		<input type="checkbox"/> Owner	<input type="checkbox"/> Legal	
					<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator
<input type="text"/>	Business	<input type="text"/>		<input type="checkbox"/> Contact7 Delete	<input type="checkbox"/> Operator	
	Home	<input type="text"/>		<input type="checkbox"/> Administrative		
<input type="text"/>	Facsimile	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Financial	<input type="checkbox"/> Emergency	
<input type="text"/>	Mobile	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Water Quality	
<input type="text"/>	Emergency	<input type="text"/>		<input type="checkbox"/> Owner	<input type="checkbox"/> Legal	
					<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator
<input type="text"/>	Business	<input type="text"/>		<input type="checkbox"/> Contact8 Delete	<input type="checkbox"/> Operator	
	Home	<input type="text"/>		<input type="checkbox"/> Administrative		
<input type="text"/>	Facsimile	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Financial	<input type="checkbox"/> Emergency	
<input type="text"/>	Mobile	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Water Quality	
<input type="text"/>	Emergency	<input type="text"/>		<input type="checkbox"/> Owner	<input type="checkbox"/> Legal	
					<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator
NEW CONTACTS						
Add Additional Contact				(pick all that apply)		
<input type="text" value="Linda Perez"/>	Business	<input type="text"/>		<input type="checkbox"/> Administrative	<input type="checkbox"/> Operator	
<input type="text" value="TREASURER"/>	Home	<input type="text" value="(209) 742-2705"/>	<input type="text" value="allmachinery@comcast.net"/>	<input checked="" type="checkbox"/> Financial	<input type="checkbox"/> Emergency	
<input type="text" value="7078 Hites Cove Rd"/>	Facsimile	<input type="text"/>		<input type="checkbox"/> Operator In Charge	<input type="checkbox"/> Water Quality	
<input type="text"/>	Mobile	<input type="text" value="(408) 274-1938"/>	<input type="text" value="mariposapineswater@gmx"/>	<input type="checkbox"/> Owner	<input type="checkbox"/> Legal	
<input type="text" value="Mariposa"/>	Emergency	<input type="text"/>				
<input type="text" value="95338"/>						
					<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator
Add Additional Contact				(pick all that apply)		
<input type="text" value="--Contact Name--"/>	Business	<input type="text" value="(999) 999-9999"/>		<input type="checkbox"/> Administrative	<input type="checkbox"/> Operator	
<input type="text" value="--Title--"/>	Home	<input type="text" value="(999) 999-9999"/>	<input type="text" value="XXXXX@XXXXX.XXX"/>	<input type="checkbox"/> Financial	<input type="checkbox"/> Emergency	
<input type="text" value="--Address Line 1--"/>	Facsimile	<input type="text" value="(999) 999-9999"/>		<input type="checkbox"/> Operator In Charge	<input type="checkbox"/> Water Quality	
<input type="text" value="--Address Line 2--"/>	Mobile	<input type="text"/>	<input type="text" value="XXXXX@XXXXX.XXX"/>	<input type="checkbox"/> Owner	<input type="checkbox"/> Legal	
<input type="text" value="--City--"/>	Emergency	<input type="text" value="(999) 999-9999"/>				
<input type="text" value="99999"/>						
					<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator
Add Additional Contact				(pick all that apply)		
<input type="text" value="--Contact Name--"/>	Business	<input type="text" value="(999) 999-9999"/>		<input type="checkbox"/> Administrative	<input type="checkbox"/> Operator	
<input type="text" value="--Title--"/>	Home	<input type="text" value="(999) 999-9999"/>	<input type="text" value="XXXXX@XXXXX.XXX"/>	<input type="checkbox"/> Financial	<input type="checkbox"/> Emergency	
<input type="text" value="--Address Line 1--"/>	Facsimile	<input type="text" value="(999) 999-9999"/>		<input type="checkbox"/> Operator In Charge	<input type="checkbox"/> Water Quality	
<input type="text" value="--Address Line 2--"/>	Mobile	<input type="text"/>	<input type="text" value="XXXXX@XXXXX.XXX"/>	<input type="checkbox"/> Owner	<input type="checkbox"/> Legal	
<input type="text" value="--City--"/>	Emergency	<input type="text" value="(999) 999-9999"/>				
<input type="text" value="99999"/>						

				<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator
Add Additional Contact				(pick all that apply)	
--Contact Name--	Business	(999) 999-9999		<input type="checkbox"/> Administrative	<input type="checkbox"/> Operator
--Title--	Home	(999) 999-9999	XXXXXX@XXXXXX.XXX	<input type="checkbox"/> Financial	<input type="checkbox"/> Emergency
--Address Line 1--	Facsimile	(999) 999-9999		<input type="checkbox"/> Operator In Charge	<input type="checkbox"/> Water Quality
--Address Line 2--	Mobile		XXXXXX@XXXXXX.XXX		
--City--	--ST--	Emergency	(999) 999-9999	<input type="checkbox"/> Owner	<input type="checkbox"/> Legal
99999				<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator
COMMENTS (Note: Comments will be made publicly available): <input type="text"/>					

Intro	Contacts	Population	Connections	Sources	Water Supplied	Water Rates and Deliveries	Water Quality	Treatment
Backflow	Certification	Improvements	Complaints	Distribution	Emergency	Conservation	Climate Change	LSLR
							Acknowledge	Finalize

2. POPULATION SERVED

Population Type	Population	Method Used to Determine Population:	Annual Operating Period			
			MM	DD	MM	DD
Residential ¹	284	Multipled number of service connections by 3.3	01	01	12	31
Transient ²	0		01	01	12	31
Nontransient ³	284		01	01	12	31

MM = month, in 2-digit format DD = day, in 2-digit format

If residential population is based on "Other", identify the methods or sources of how it was estimated:

Descriptions:

¹Residential -- report the number of persons who reside within the water system service area for more than half of the year (excludes transient and nontransient populations). If year-round, the *Begin Date* would be 01/01 and the *End Date* would be 12/31.

²Transient -- report the number of persons who are at the water system on the 60th busiest day of the year (excludes residential and nontransient populations). Report the *Begin Date* and *End Date* if the Transient use is seasonal.

³Nontransient -- report the number of the persons who are at the water system for over 6 months per year (excludes residential and transient populations). Report the *Begin Date* and *End Date* if the Nontransient use is seasonal.

List the names of communities served by the system identifying both incorporated and unincorporated areas:

COMMENTS (Note: Comments will be made publicly available):

Intro	Contacts	Population	Connections	Sources	Water Supplied	Water Rates and Deliveries	Water Quality	Treatment
Backflow	Certification	Improvements	Complaints	Distribution	Emergency	Conservation	Climate Change	LSLR
							Acknowledge	Finalize

3. NUMBER OF SERVICE CONNECTIONS (as of December 31, 2019)

A. Active Service Connections:

Total Active Potable Water Connections currently in Division of Drinking Water database:

The total number of Service Connections as of December 31, 2019 must be reported as either Unmetered or Metered for each Service Connection Type as appropriate.

Potable Water			
TYPE	Unmetered	Metered	Total*
Do NOT report fire sprinkler connections and fire hydrants. These connections are not counted toward "service connections" for compliance purposes.			
<u>Single-family Residential:</u> single family detached dwellings	87	0	87
<u>Multi-family Residential:</u> Apartments, condominiums, town houses, duplexes and trailer parks	0	0	0
<u>Commercial/Institutional:</u> Retail establishments, office buildings, laundries, schools, prisons, hospitals, dormitories, nursing homes, hotels, churches	0	0	0

Industrial:000

All manufacturing

Landscape Irrigation:

Parks, play fields, cemeteries, median strips, golf courses000

Agricultural Irrigation:

Irrigation of commercially-grown crops000

Total Active Connections*87087

*Calculated field

B. Number of Inactive Connections (all types)0

Include only service connections that have been physically disconnected (e.g. meter removed) from the water system. All other service connections should be considered as "Active."

C. Number of NON-residential customers required to have dedicated outdoor irrigation meters (excluding agricultural connections)0

COMMENTS: (Note: Comments will be made publicly available) : One new house constructi

IntroContactsPopulationConnectionsSourcesWater SuppliedWater Rates and DeliveriesWater QualityTreatment

BackflowCertificationImprovementsComplaintsDistributionEmergencyConservationClimate ChangeLSLRAcknowledgeFinalize

4. GROUNDWATER (GW) AND SURFACE WATER (SW) SOURCES

GROUNDWATER SOURCES (INCLUDING STANDBY SOURCES)

Add sources not listed above. Describe changes to sources above under "Comments".

SURFACE WATER INTAKES

Add sources not listed above. Describe changes to sources above under "Comments".

Are your water sources metered?--Pick one--

Do you routinely monitor the static water levels in your wells?--Pick one--

Do you routinely monitor the pumping water levels in your wells?--Pick one--

Are these levels recovering, declining or steady?:--Pick one--

DISCUSS CHANGES TO ABOVE SOURCES

If a STANDBY SOURCE was used in 2019, provide the following information.

COMMENTS (Note: Comments will be made publicly available) :

IntroContactsPopulationConnectionsSourcesWater SuppliedWater Rates and DeliveriesWater QualityTreatment

BackflowCertificationImprovementsComplaintsDistributionEmergencyConservationClimate ChangeLSLRAcknowledgeFinalize

5. WATER PRODUCED, PURCHASED AND SOLD

The **Maximum Day** is the day during 2019 with the highest total water usage. Provide the *date* for that day in Column B, then complete Columns C, D and E, indicating how much of the water on that day was from each source.

Units of Measure for the Maximum Day ONLY: Gallons

☒ Mark this box if your water system does not have monthly production data.

If you do not have monthly production data to report, please report your Annual Total production in the row for January and leave all the other months blank.

Units of Measure for this table except for the Maximum Day: Gallons

Volumes are based on: ESTIMATED VOLUMES

A	B	C	D	E	F	G	H	
	Potable Water						Non-potable (exclude recycled)	
	Date/ Month	Water Produced from Groundwater (Wells)	Water Produced from Surface Water ²	Finished Water Purchased or Received from another PWS ⁵	Total Amount of Potable Water ^{3*}	Water Sold to Another PWS ⁵		
Check here if no production for every month		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
Maximum Day ⁴					0			
January		9831560	0	0	9831560	0	0	0
February					0			
March					0			
April					0			
May					0			
June					0			
July					0			

August				0			
September				0			
October				0			
November				0			
December				0			
Annual Total*	9831560	0	0	9831560	0	0	0
Percent Treated ⁴							

PWS = Public Water System

*Calculated field.

Non-potable = water supplies, except recycled water, that do not enter the drinking water distribution system and are for non-potable uses only such as irrigation

Recycled = domestic wastewater which as a result of treatment is suitable for uses other than potable use such as irrigation or toilet flushing

¹Only report Maximum Day if it is actually measured or determined from production records. It should not be the average day demand during the maximum month of production.

²Do not include raw water purchased; report only volume of water that was treated.

³(F) Total Amount of Potable Water = Sum of Columns (C), (D) and (E), automatically calculated. Total water production includes water that is sold to another water system. To update, click below

⁴This is the percentage of the total annual volume for Groundwater produced that was provided treatment to meet drinking water standards other than precautionary disinfection and flouridation.

⁵If water was *Purchased* from or *Sold* to another PWS, complete the table below:

Specify whether water was *Purchased* or *Sold*~Name of PWS
If recycled water was *supplied to your customers*, complete the table below: Specify the level of treatment (e.g., tertiary, disinfected secondary)~Name of Recycled Water supplier

COMMENTS (Note: Comments will be made publicly available):

- Intro
- Contacts
- Population
- Connections
- Sources
- Water Supplied
- Water Rates and Deliveries
- Water Quality
- Treatment
- Backflow
- Certification
- Improvements
- Complaints
- Distribution
- Emergency
- Conservation
- Climate Change
- LSLR
- Acknowledge
- Finalize

6. WATER RATES AND DELIVERIES

A. WATER RATES

If you have questions about completing this section of the report, please contact Kathy.Frevert@Waterboards.ca.gov, 916-322-5274 or Mary.Yang@Waterboards.ca.gov, 916-322-6507.

A1. Residential Water Rates



A1.a. Indicate the type of residential water rate structure used by your water system (select those that apply):

- Base Rate ~ (Non-Volumetric Rates)
- Fixed Base Rate - Basic or fixed charge that is the same for all customers regardless of use.
- Variable Base Rate - Basic charge is different for customers depending on size of pipe, water meter, elevation, peak use, or other factors.
- Usage Rate (Volumetric Rates)
- Uniform Usage Rate - The charge per 100 cubic feet of water is the same regardless of use.
- Variable Usage Rate - Increasing Block or Tier Rate. The charge per 100 cubic feet or other increment of water increases as water use increases.
- Other Rates
- Flat Rate (often unmetered)- One rate for providing drinking water regardless of the volume of water used, not combined with a usage rate.
- If you have a Flat Rate, please skip questions A1.b, A1.d, A1.f, A1.g and A3. Enter your flat rate in A4.
- Allocation Based
- Other rate structure (specify your rate structure in the comment box, provide a weblink 1j below)
- We do not charge a water rate (explain in next question)

A1.b. If your water system doesn't have rates, explain why: --Pick one--

Comments on rate structure (Note: Comments will be made publicly available):

If you are a water supplier without water rates, check this box , then move to [Section 6B Water Deliveries](#).

A1.c. What is your billing frequency?	monthly
A1.d. If charges change with different levels of water consumption or features, what is the number of tiers or levels of charges?	Not Tiered
A1.e. Identify any aspects or factors used to determine or adjust residential water rates (mark those that apply).	
<input type="checkbox"/> Agricultural use (non-commercial or commercial)	
<input type="checkbox"/> Elevation	
<input type="checkbox"/> Evaporative Coolers	
<input type="checkbox"/> Fire protection - water to irrigate vegetation	
<input type="checkbox"/> Home-based business	
<input type="checkbox"/> Livestock or large animals	
<input type="checkbox"/> Lot size	
<input type="checkbox"/> Medical needs	
<input type="checkbox"/> Meter size	
<input type="checkbox"/> Mitigation of high levels of total dissolved solids	
<input type="checkbox"/> Occupancy (All-year)	
<input type="checkbox"/> Occupancy (Seasonal)	
<input type="checkbox"/> Pressure zone	

☐ Soil compaction and dust control

☐ Supplement ponds and lakes to sustain wildlife

☒ Other : improved or not improved

☐ None of the above

A1.f. Units of Measure (UOM) for this table on Residential Water Rates:

--Pick one--

A1.g. Table on Residential Water Rates, Single-family and Multi-family

If your water system uses an allocation or flat base rate structure, add a direct weblink to more information on your rate structure (A1.i), provide information in the box "Comments on Residential Rate Structure" (A1.k), and leave this table blank.

Provide information on residential water rates based on consumption. If a feature of your rate structure, (e.g., meter size, elevation, or other) affects water rates, provide the water rate associated with the most common situation. Enter zero "0" if not applicable. See examples

	Single-family		Multi-family
	Upper volume of water included in base rate in Units of Measure (UOM)		Upper volume of water included in base rate in Units of Measure (UOM)
	If there is no base rate or volume of water associated with a base rate, enter the number zero "0".	Cost per Billing Period (Dollars)	If there is no base rate or volume of water associated with a base rate, enter the number zero "0".
Base Rate (non-volumetric rates)	55	55	0
Usage Rate (volumetric rates) The rows that follow do not include a base rate or fixed charge.	Upper level of water volume for each level in UOM	Cost per UOM (Dollars)	Upper level of water volume for each level in UOM
Rate Structure level 1	0	0	0
Rate Structure level 2			
Rate Structure level 3			
Rate Structure level 4			
Rate Structure level 5			
Rate Structure level 6			
Rate Structure level 7			

A1.h. Date of most recent update to the rate structure: MM/DD/YYYY

08/01/2019

A1.i. Describe the changes to rate changes that were made in the update:

Increase in monthly charge

A1.j. Provide a direct link to a web page that explains water rates and fees, if available.

mariposapineswater.webs

A1.k. Comments on Residential Rate Structure. Explain allocation rate, if applicable.

A2. RESIDENTIAL SERVICE CONNECTIONS

A2.a. Select the most common single-family residential meter size:

--Pick one--

A2.b. Select the most common multi-family residential meter size:

--Pick one--

A2.c. What is, approximately, the service connection fee for single-family brand-new construction based on the most common meter size listed above (\$)?

650

A2.d. Date of most recent update to the new connection fee for single-family brand-new construction: MM/DD/YYYY

08/01/2017

A2.e. What is the one-time connection fee to open a new account for an existing single-family home based on the most common meter size indicated above (\$)?

0

A2.f. What is, approximately, the connection fee for multi-family new construction based on the most common meter size indicated above (\$)?

0

A2.g. Check items included in new residential connection fees:

☒ Existing infrastructure buy-in (e.g., water treatment/ conveyance/sewage treatment)

☒ Upgrades to infrastructure (seismic retrofits, pipe replacements, etc.)

☐ Storm water management system

☒ Debt service charge

☒ Development of new water supplies

☒ Other : Repairs and Maintenance

A2.h. Comments on Residential Service Connections (publicly available):

A3. NON-RESIDENTIAL WATER RATES

A3.a. Select the most common non-residential meter size: --Pick one--

A3.b. Complete the table below providing specific water rates applied to your non-residential customers:

Connection Type	BASE RATE (BR)	If BR + UUR, what is the volume allowed before UUR applies	UNIFORM USAGE RATE (UUR)	VARIABLE BASE RATE (provide range) (VBR)		VARIABLE USAGE RATE (provide range) (VUR)	
	\$ (Base)	HCF	\$ per HCF	\$ Low	\$ High	\$ per HCF Low	\$ per HCF High
Commercial							
Institutional							
Industrial							
Landscape Irrigation							
Agricultural Irrigation							
Other							

Comments on non-residential water rates (publicly available):

A4. AFFORDABLE DRINKING WATER

If your water system uses a flat rate, i.e., one rate for providing drinking water regardless of the volume used, enter the FLAT RATE MONTHLY COST in "Section A4.a 6 HCF Drinking Water Charges" below

For each amount of water delivered to a single-family residential customer shown below, what is charged (in dollars) to a customer?

For each of the three water volumes shown below, provide what would be the monthly water bill for a single-family residential customer. Enter the monthly Water Charges and Other Charges for each water volume. For example, if a single-family customer used 12 HCF in a month, the total bill would include water charges for using 12 HCF and other charges that are added to the bill. Other charges vary locally and may include property tax, city tax, utility users tax, services for fire suppression, waste water or sewer, stormwater or other non-water surcharges. If the "other charges" varies by certain features (e.g., by climate, lot size, landscaped area) use the lowest charge in your calculation. Click the "Update Totals" button to automatically add the charges together to show a Total Monthly Water Bill that a residential customer would pay when its household used the specified amount of water.

A4.a. 6 HCF

Drinking Water Charges (Fixed and variable water charges)

55.00

Dollars/month

Other Charges (e.g., property tax, fire suppression, waste water, other)

0

Dollars/month

Total Monthly Water Bill (Automatic sum of Water Charges and Other Charges)*

55

Dollars/month

A4.b. 12 HCF

Drinking Water Charges (Fixed and variable water charges)

Dollars/month

Other Charges (e.g., property tax, fire suppression, waste water, other)

Dollars/month

Total Monthly Water Bill (Automatic sum of Water Charges and Other Charges)*

0

Dollars/month

A4.c. 24 HCF

Drinking Water Charges (Fixed and variable water charges)

Dollars/month

Other Charges (e.g., property tax, fire suppression, waste water, other)

Dollars/month

Total Monthly Water Bill (Automatic sum of Water Charges and Other Charges)*

0

Dollars/month

Comments on Affordable Drinking Water(publicly available):



A5. SHUT-OFFS

Completing this section will fulfill the 2019 requirements of Senate Bill 998 – Discontinuation of residential water service.

Click the "Update Totals" button to automatically add the Single Family and Multifamily Accounts

Community Water Systems that have water rates and more than 200 connections must complete this section. If your community water system does not meet these criteria for completing this Section, then you must mark the boxes "did not collect information" below in order to avoid completion errors.

If a water supplier tracks the number of services connections but did not collect information on whether residences were occupied or unoccupied at the time of disconnection, put the total number of disconnections in the "unknown accounts" column in the tables in this section.
If a water supplier does not differentiate between single-family or multi-family, then enter all information as single-family.

A5.a. How many accounts for residential service connections had their water shut off once during the year of 2019 due to failure to pay?

If there was no information collected for question A5.a, mark the check box "Did not collect information" and skip below table.

	Occupied Accounts	Unoccupied Accounts	Unknown Accounts	Total*
Single-Family Accounts	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>
Multi-family Accounts	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>

A5.b. How many accounts for residential service connections had their water shut off more than once during 2019 due to failure to pay?

If there was no information collected for question A5.b, mark the check box "Did not collect information" and skip below table.

	Occupied Accounts	Unoccupied Accounts	Unknown Accounts	Total*
Single-Family Accounts	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>
Multi-Family Accounts	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>

A5.c. What is the residential reconnection fee to restore drinking water service due to failure to pay during operating hours?

Single-Family Accounts

0

Multi-family Accounts

0

A5.d. What is the residential reconnection fee to restore drinking water service due to failure to pay during non-operating hours?

Single-Family Accounts

0

Multi-Family Accounts

0

A5.e. What was the median duration of the shut-offs (in days) for continuously occupied residential service accounts?

If there was no information collected for question A5.e, mark the check box "Did not collect median duration of shut-offs (in days) for occupied residents" and ☒ WR SHUT_OFFS Median #Days No Collect and skip below table.

	Occupied Accounts	Unoccupied Accounts	Unknown Accounts	Total*
Single-Family Accounts	<div>0</div>	<div>0</div>	<div>0</div>	
Multi-Family Accounts	<div>0</div>	<div>0</div>	<div>0</div>	

A5.f. If you offer an extended repayment or other customer payment assistance plan, how many continuously occupied residential customer accounts participated?

Single-Family Accounts

0

Multi-family Accounts

0

Total*

0

A5.g. How many of the continuously occupied residential accounts were shut off at least once during calendar year 2019 and were enrolled in an extended repayment plan or other customer payment assistance plan at the time of the service disconnection?

Single-Family Accounts

Multi-family Accounts

Total*

0

0

A5.h. Do you have a written policy on discontinuation of residential service? --Pick one--

A5.i. Comments on Shut-offs (publicly available): We have not shut off water

A6. Affordable Drinking Water Assistance

A6.a. Do you provide options for low-income assistance?

A6.b. If yes, how was the program funded?

A6.c. How much funding was allocated to the program in 2019?

A6.d. What form of benefit was given per account (dollar amount, percentage, or volume) and how much?

A6.e. How many residential accounts received the low-income subsidy?

A6.f. What are the eligibility criteria to qualify for assistance?

☐ Disabled

☐ Low Income Families

☐ Seniors

☐ Special Medical Need

☐ Other Please describe:

A6.g. At this time, does your agency have a policy to allow for alternative payment? --Pick one--

Comments on Affordable Drinking Water Assistance (publicly available):

B. WATER DELIVERIES

Check this box ☒ if your water system does not have monthly water deliveries data and skip the rest of Section B.

Units of Measure (UOM) for this table: --Pick one--

Provide monthly metered water deliveries for all water sources (potable and non-potable) in the table below.

A	B	C	D	E	F	G	H	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
January							0	
February							0	
March							0	
April							0	
May							0	
June							0	
July							0	
August							0	
September							0	
October							0	
November							0	
December							0	
Total*	0	0	0	0	0	0	0	0

COMMENTS (Note: Comments will be made publicly available):

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7. WATER QUALITY

Date of Emergency Notification Plan: 04/01/2019

Is the Emergency Notification Plan up to date? --Pick one-- If no is selected, please upload a revised WQENP.

DIRECT ADDITIVES

Pursuant to Section 64590, Title 22 of the California Code of Regulations, (effective January 1, 1994), all chemicals or products, including chlorine, added directly to the drinking water as part of a treatment process must meet the ANSI/NSF Standard 60. Please complete the following table for each chemical used by this water system. If you are not sure whether a chemical you are using meets this standard, contact the manufacturer or distributor of the chemical.

If you do not use any direct additives, put "NONE" in each column of the first row.

INDIRECT ADDITIVES

As of March 9, 2008, a water system shall not use any chemical, material, lubricant, or product in the production, treatment or distribution of drinking water that comes in contact with the drinking water that does not have certification of meeting NSF/ANSI standard 61.

Does your water system have procedures to ensure all future equipment and materials meet this standard? --Pick one--

COMMENTS (Note: Comments will be made publicly available): : Heath Harris managed

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8. WATER TREATMENT

If treatment was added or changed in any way in 2019, provide a brief description and identify the water source

COMMENTS (Note: Comments will be made publicly available): :

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9. CROSS-CONNECTION CONTROL ?

	Total Number in System in 2019 ¹	Number Installed in 2019	Number Tested in 2019 ²	Number Failed in 2019	Number Repaired/ Replaced
Backflow Assemblies □ on the Service Connections or Meter (Reduced Pressure Principle and Double Check Valve assemblies) Backflow Assemblies On-site but not on the Service Connections or Meter: (Reduced Pressure Principle and Double Check Valve assemblies) Air-gap Separation:	2	1	0	0	0
	0	0	0	0	0
	3	0			

Notes:

¹ **Total Number in System in 2019** – Total number of active Backflow Prevention Assemblies including new devices installed in 2019, but excluding inactive devices.

² **Number Tested in 2019** – includes all active devices that were tested in 2019 and either passed or failed.

No. of *Inactive* Backflow Prevention Assemblies: in water system in 2019 : 0
Date of last cross-connection control survey done on the system:
Cross Connection Control Program Coordinator
Name:
Certification Number:
Business Phone: Email Address:
Certification or training received:

Describe any cross-connection incidents: that occurred during 2019:

COMMENTS (Note: Comments will be made publicly available): :

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10. OPERATOR CERTIFICATION ?

A. Please list the State certified Water **Treatment Plant Operators** employed by your water system that supervise and direct the operation of your water treatment plants, beginning with the chief operator(s) .

Your Highest Treatment System Classification is: There are no facilities sub

If you do not have a Certified Distribution System Operator, put "NONE" in **each** column of the first row.

☐ Check this box if your public water system has designated a Chief Treatment Operator.

Name of Chief Treatment Operator (First name Last name):

Grade of Chief Treatment Operator (1, 2, 3, 4 or 5):

Treatment Operator Number (4 or 5 digits):

Treatment Certification Expiration Date (MM/DD/YYYY):

¹Use "C" for Chief Operator and "S" for Shift Operator. If neither, put an "X". Do not leave blank.

Do your Chief and Shift Treatment Plant Operators have the minimum level required?

B. Please list the State certified Water **Distribution System Operators** employed by your water system that supervise and direct the operation of your distribution systems, beginning with the chief operator(s) ..

Your Distribution System Classification is:

If you do not have a Certified Distribution System Operator, put "NONE" in **each** column of the first row.

☐ Check this box if your public water system has designated a Chief Distribution Operator.

Name of Chief Distribution Operator (First name Last name):

Grade of Chief Distribution Operator (1, 2, 3, 4 or 5):

Distribution Operator Number (4 or 5 digits):

Distribution Certification Expiration Date (MM/DD/YYYY):

¹Use "C" for Chief Operator and "S" for Shift Operator. If neither, put an "X". Do not leave blank.

Do your Chief and Shift Distribution System Operators have the minimum level required?

COMMENTS (Note: Comments will be made publicly available):

-

11. WATER SYSTEM IMPROVEMENTS

The California Waterworks Standards (Section 64556) require an amended permit for any of the following improvements or modifications:

- Addition of a new distribution reservoir with a capacity of 100,000 gallons or more
- Modification or extension of the existing distribution system using an alternative to the requirements of the California Waterworks Standards (see Sections 64570 through 64578)
- Modification of the water supply by:
 - Adding a new source
 - Changing the status of an existing source (for example, active to standby) or
 - Changing or altering a source, such that the quality or quantity of water supply could be affected
- Any addition or change in treatment, including
 - Design capacity
 - Process
- Expansion of the existing service area by 20 percent or more of the number of service connections specified in your current permit.

If your water system made any improvements or modifications during 2019 for which a permit was not obtained, please describe the improvements or modifications below.

Indicate any planned improvements or modifications for 2020.

COMMENTS (Note: Comments will be made publicly available):

-

12. COMPLAINTS REPORTED (WRITTEN OR VERBAL)

Type of Complaint	No. of Complaints Reported by Customers	No. of Complaints Investigated	No. of Complaints reported to the Division of Drinking Water or Local County Staff	Brief Description of Cause and Corrective Action taken
Taste and Odor	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Color	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Turbidity	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Visible Organisms	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Pressure (High or Low)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Water Outages	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Illnesses (Waterborne)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other (Specify)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total No. of Complaints*	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	

*Calculated field

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13. SYSTEM PROBLEMS

Type of Problem	No. of Problems	No. of Problems Investigated	No. of Problems Reported to the Division of Drinking Water or Local County Staff	Brief Description of Cause and Corrective Action Taken
Service Connection Breaks/ Leaks Main	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Service Connection Breaks/Leaks Main	<input type="text"/>	<input type="text"/>	<input type="text"/>	Telephone Company broke
Water Outages	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Boil Water Orders	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total*	<input type="text"/>	<input type="text"/>	<input type="text"/>	

INFRASTRUCTURE AND PRESSURE

Pipe Material in Distribution System

Which materials does your distribution system pipe consist of? Please check all that apply:

- ☒ Plastic (Including Poly Vinyl Chloride and HDPE)
- ☐ Steel
- ☐ Cast Iron
- ☐ Galvanized Iron
- ☐ Ductile Iron
- ☒ Cement Concrete
- ☐ Asbestos Cement

Pipeline Material	Percentage of distribution pipe system composed of the materials selected above	Average Age (in years)
Plastic	<input type="text"/>	<input type="text"/>
Steel	<input type="text"/>	<input type="text"/>
Cast Iron	<input type="text"/>	<input type="text"/>
Galvanized Iron	<input type="text"/>	<input type="text"/>
Ductile Iron	<input type="text"/>	<input type="text"/>
Cement Concrete	<input type="text"/>	<input type="text"/>
Asbestos Cement	<input type="text"/>	<input type="text"/>
Asbestos Cement	<input type="text"/>	<input type="text"/>
other: <input type="text"/>	<input type="text"/>	<input type="text"/>

COMMENTS (Note: Comments will be made publicly available):

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14. EMERGENCY PREPAREDNESS AND RESPONSE

A. EMERGENCY RESPONSE PLANS

PUBLIC WATER SYSTEMS WITH AT LEAST 3,300 OR MORE PERSONS SHOULD REVIEW AND REVISE THEIR EMERGENCY RESPONSE PLAN TO ENSURE THAT THE PLANS ARE SUFFICIENT TO ADDRESS POSSIBLE DISASTER SCENARIOS.

Do you have an Emergency Response Plan (ERP) that addresses the procedures for the restoration of water service for your water system?

Date of your current Emergency Response Plan:

Date ERP was last exercised with a tabletop or other activity:

Are you registered in your local energy utility's Public Safety Power Shutoff notification plan?

B. AUXILIARY POWER SUPPLY

Does your water system have backup power for:

1. Sources:

2. Pumping Stations:

3. Water Treatment Plants:

If your system has backup power, how many times per year is it exercised?

Can your system maintain system pressure in all pressure zones either by backup power or by gravity fed storage during power outages for each of the following number of hours?

24 hours

48 hours

72 hours

Is your backup power system automatic or manual start?:

C. WATER PARTNERSHIPS

- 1) Are you interested in obtaining information about [water partnership or consolidation options](#)? ☒ If yes, please mark those that apply:
- ☐ Please have Drinking Water staff contact our organization with more information about water partnership activities such as consolidation, extension of service, or interties that connect one system to another

- ☐ Please send my water system information about training opportunities
- ☐ Please send my water system information about funding options for water partnerships and consolidations

COMMENTS (Note: Comments will be made publicly available):

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14. WATER CONSERVATION AND DROUGHT PREPAREDNESS

- Date of your revised Drought Preparedness Plan or Water Shortage Contingency Plan, if any:
- Water system does not have a current drought or water shortage plan, mark box if applies: ☒
2. Did your water system experience water shortages in 2019?
- If yes, please estimate the amount of shortfall in units selected for this section
- Volume of water:
- Units of Measure:
3. How many water-shortage response stages are in your drought plan? For "non-applicable", enter zero.
4. Did drought conditions cause you to activate emergency standby wells in 2019?
5. Do you project water shortages in the current calendar year?
6. Does your water system anticipate having to go to mandatory restrictions in the upcoming year?
7. Identify the method your water system uses to discourage excessive water use when in drought, in support of SB 814 (2016) - (Check as applicable)
- ☐ 7a. Rate structure (e.g., block tiers, water budgets, or rate surcharges above base rates for excessive water use)
- ☒ 7b. Excessive water use ordinance, rule, or tariff condition
- ☐ 7c. Not implementing
- ☒ 7d. Not applicable: not an urban retail water supplier
- ☐ 7e. COMMENTS REGARDING SB 814 (Note: Comments will be made publicly available) :
8. To identify data streamlining opportunities, are there other government agencies, aside from the Department of Water Resources, that require reports on the same information found in the Electronic Annual Report? If yes, please describe (include the title of the report, which agency receives it, and the type of information it includes):
9. COMMENTS (Note: Comments will be made publicly available):

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15. CLIMATE CHANGE ADAPTATION AND RESILIENCY FOR WATER UTILITIES



Per Waterboard Resolution 2017-0012, dated 3/7/17, water system inspections are required to address climate change impacts & concerns.

ONLY FOR COMMUNITY WATER SYSTEMS

Your water system classification is:

If you have questions about completing this section of the report, please contact Joseph.Crisologo@waterboards.ca.gov or call (818) 551-2046.

A. CLIMATE THREATS		
What climate-related impacts are of concern for your water system (check all that apply)? ?		
<input type="checkbox"/> Drought <input type="checkbox"/> Groundwater Depletion <input type="checkbox"/> Water Quality Degradation <input type="checkbox"/> Flooding <input type="checkbox"/> Sea Level Rise <input type="checkbox"/> Extreme Heat <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Other <input type="checkbox"/> None or N/A		
B. SENSITIVITY AND MAGNITUDE OF IMPACTS		
Qualitatively assess climate change sensitivity of your facilities, and criticality or consequence of disruption. Consider identified climate threats using past experience, and expert judgement based on the magnitude of expected change and extreme events in the future. You do not need numeric answers. USEPA provides a risk assessment tool, called CREAT, to help utilities identify which environmental changes can impact water supply: https://www.epa.gov/crwu/build-resilience-your-utility . More resources are available that may help you complete this section. ?		
Drought Groundwater Depletion	Decreased water storage (low lake and reservoir levels)	Choose an item <input type="text" value="--Pick one--"/>
	Groundwater depletion (increased extraction, reduced groundwater recharge, etc.)	Choose an item <input type="text" value="--Pick one--"/>
	Change in seasonal runoff and/or loss of snowmelt	Choose an item <input type="text" value="--Pick one--"/>
	Region relies on water diverted from the Delta, imported from the Colorado River, or other climate-sensitive area	Choose an item <input type="text" value="--Pick one--"/>
Water Quality Degradation	Salt-water intrusion into aquifers	Choose an item <input type="text" value="--Pick one--"/>
	Altered water quality during storm events (turbidity shifts, debris flows)	Choose an item <input type="text" value="--Pick one--"/>
	Surface water quality issues related to eutrophication, algal blooms, invasive species	Choose an item <input type="text" value="--Pick one--"/>
Flooding Sea Level Rise	High flow events and flooding	Choose an item <input type="text" value="--Pick one--"/>
	Inundation due to sea level rise, high tides, and/or coastal storm surges	Choose an item <input type="text" value="--Pick one--"/>
	Aging flood protection infrastructure (levees), or insufficient impoundment capacity	Choose an item <input type="text" value="--Pick one--"/>
	Peak demand volume surges (due to extreme heat, temperature trends, etc.)	Choose an item <input type="text" value="--Pick one--"/>

Extreme Heat	Increases in agricultural water demand or energy sector needs	Choose an item --Pick one--
Fire Other Impacts	Increased fire risk and altered vegetation, e.g., wildfires	Choose an item --Pick one--
	Disruption of power supply	Choose an item --Pick one--
	Other <input type="text"/>	Choose an item --Pick one--

C. ADAPTATION MEASURES

Identify measures to increase resiliency and reduce vulnerabilities based on identified water system sensitivities. Indicate status for all projects that your organization has completed or plans to implement to increase resiliency of the water system to climate change? Adaptation measures planned or achieved for reasons other than climate change should be put in the "Other" box along with the reason for the measure. USEPA's Adaptation Strategies Guide for Water Utilities provides examples of adaptation: <https://www.epa.gov/crwu/learn-how-plan-extreme-weather-events> ⓘ

Install new and deeper drinking water wells, or modify existing wells to increase pumping capacity	Choose an item --Pick one--
Develop local supplemental water supply, enhanced treatment, or increased storage capacity (e.g. recycled water, storm runoff for groundwater recharge, desalination, new reservoir)	Choose an item --Pick one--
Interconnection with other utilities (transfers, mutual aid agreements with neighboring utilities)	Choose an item --Pick one--
Relocate facilities, construct or install redundant facilities	Choose an item --Pick one--
Modify facilities (e.g., install barrier or levee, raise a wall, seal a door, elevate construction)	Choose an item --Pick one--
Conservation measures (demand management, enhanced communication and outreach)	Choose an item --Pick one--
Fire prevention – brush management, partnerships	Choose an item --Pick one--
Alternative or backup energy supply	Choose an item --Pick one--
On-site energy generation	Choose an item --Pick one--
Enhance monitoring program, budget for additional testing and treatment, chemicals	Choose an item --Pick one--
Other <input type="text"/>	Choose an item --Pick one--

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16. LEAD SERVICE LINE REPLACEMENT



ONLY FOR COMMUNITY WATER SYSTEMS

Your water system classification is:

Section 116885 of the California Health and Safety Code, Lead Service Lines in Public Water Systems, added to the Health and Safety Code by Senate Bill 1398 (2016) and amended by Senate Bill 427 (2017), requires all community water systems (CWS) to compile an inventory of known partial or total lead user service lines in use in its distribution system by July 1, 2019. All CWSs will need to provide DDW an inventory form through this 2019 electronic annual report (eAR) explaining how the inventory was determined and the results. DDW is utilizing this 2019 electronic annual report (eAR) to gather and update this information.

IMPORTANT: In the 2017 electronic Annual Report, all CWSs were required to submit the lead service line inventory to the DDW. The INVENTORY TABLE below were PRE-FILLED with information provided in the 2017 eAR, please review the table below and take this opportunity to make changes and update your inventory. All pipe materials that does not apply to your system must not be left blank. You must enter zero, otherwise errors will be generated at the end of the eAR report.

The inventory must include all user service lines that are active and those that are reasonably expected to become active in the future. Also, Section 116885 requires that CWS identify areas that may have lead user service lines in use, and/or identify any areas within the CWS distribution system that the CWS cannot identify the material that is being used for the service line. If a CWS indicates the existence of lead user service lines or unknown material user service lines or lead/unknown fittings associated with user service lines, by July 1, 2020, the CWS will need to submit to DDW a timeline to replace all lead and unknown material user service lines. Please include the updated information on your user service line inventory below so DDW can track the progress of your system. For additional information, please visit

https://www.waterboards.ca.gov/drinking_water/certfic/drinkingwater/lead_service_line_inventory_pws.html

If you have questions about completing this section of the report, please contact David.Pimentel@Waterboards.ca.gov or call (916) 323-0572.

If your water system is a wholesaler and your system contain no user service lines, you are not required to complete this form. Please check this box: ☐ Is Wholesaler

Date lead service line inventory was completed (MM/DD/YYYY):

A. User service line inventory:

"User service line" means the pipe, tubing, and fittings connecting a water main to an individual water meter or service connection.

Pipe Material	Estimated Number of Service Lines (Enter "0" if none)	Estimated Total Length of Service Lines (In feet), if applicable
A. Lead	<input type="text" value="0"/>	<input type="text"/>
B. Unknown material	<input type="text" value="0"/>	<input type="text"/>
C. Copper	<input type="text" value="0"/>	
D. Cast iron (ductile pipe)	<input type="text" value="0"/>	
E. Ductile iron	<input type="text" value="0"/>	
F. Galvanized steel	<input type="text" value="0"/>	
G. Polyvinyl chloride (PVC)	<input type="text" value="86"/>	
H. Polyethylene (PE)	<input type="text" value="0"/>	
I. High density polyethylene (HDPE)	<input type="text" value="0"/>	

J. Polybutylene (PB)	0
K. Transite/asbestos cement	0
L. Other materials not listed above:	
Identify material 1	
Identify material 2	
Identify material 3	
Identify material 4	
Total number of service lines inventoried* (calculated field)	86
Total number of service connections from Section 3 of the EAR	86
Fittings or fittings connecting a water main:	
M. Lead fittings NOT on a lead pipe (e.g., goosenecks, pigtails, and corporation stops)	0
N. Lead fittings ON a lead pipe (e.g., goosenecks, pigtails, and corporation stops)	0
O. Fittings of unknown material (e.g., goosenecks, pigtails, and corporation stops)	0
Total number of lead service lines** (calculated field)	0

*Total number of service lines inventoried (calculated field) = Sum of A through L

**Total number of lead service lines (calculated field) = Sum of A and M

To Update calculated field, click button below

B. Method(s) used to prepare the lead service line inventory in Part A (check all that apply):

- ☐ Tap Cards or tickets from initial service installation
☐ Plans from water main installation, rehabilitation, and replacement
☐ Records indicating when buildings were constructed
☐ Meter replacement records
☒ Distribution maps, drawings, or GIS
☒ Visual confirmation of pipe material by plumbers or utility crews during maintenance or installation activities
☒ Interviews with water system personnel and/or past employees
☐ Field investigations
☐ Other (describe below):

C. COMPLIANCE WITH LEAD SERVICE LINE REPLACEMENT REQUIREMENT - NEW

Select one of the following options which applies to all community water system

- If the CWS completed the requirement by reporting no lead or no unknown service lines or fittings in the both the **2017 and 2018** EAR (2017 AND 2018 EAR LSLR inventory table in subsection A. had rows A, B, M and equal to 0), Check the box below to indicate you have completed the requirement. Click OK in the two pop-up windows that open after the box is checked. No further action is required.
☐ No lead and no unknown material service lines or fittings.

- If the CWS reported lead or unknown material service lines or fittings in the **2017 and/or 2018** EAR LSLR section AND have since replaced or identified the materials (2019 EAR LSLR inventory table in subsection A. has rows A, B, M and O equal to 0), complete the LSLR certification form (the template can be found at the webpage linked below) then click [HERE](#) to upload the completed form. When you click on the HERE link, a new browser tab will open to the Replacement Timeline LTR or Certification Form upload page, after you have uploaded the document navigate back to this browser tab to complete the Finalize section of the EAR.

The LSLR certification form template and FAQs can be found on the [Lead Service Line Inventory Requirement for Public Water Systems webpage in the Resource and supplemental material section \(bottom of page\)](https://www.waterboards.ca.gov/drinking_water/certific/drinkingwater/lead_service_line_inventory_pws.html) at: https://www.waterboards.ca.gov/drinking_water/certific/drinkingwater/lead_service_line_inventory_pws.html

- If the CWS reported lead or unknown material service lines or fittings in the 2019 EAR LSLR section (rows A, B, M and/or O are NOT equal to 0), a Replacement Timeline letter and spreadsheet must be submitted. The completed letter and spreadsheet (Replacement Timeline LTR and SS) should be uploaded at the links provided in 3.a. and 3.b. When you click on the HERE link below in 3.a., a new browser tab will open which has the Replacement Timeline LTR upload location, after you have uploaded the document navigate back this browser tab and click the HERE link in 3.b. for a new browser tab to open with the upload page for the Replacement Timeline SS. You will need to return to this browser tab to complete the Finalize section of the EAR after the uploads are completed.
 - Click [HERE](#) to upload the Replacement Timeline LTR
 - Click [HERE](#) to upload the Replacement Timeline SS

The timeline spreadsheet template and FAQs on this requirement can be found on the [Lead Service Line Inventory Requirement for Public Water Systems webpage in the Resource and supplemental material section \(bottom of page\)](https://www.waterboards.ca.gov/drinking_water/certific/drinkingwater/lead_service_line_inventory_pws.html) at: https://www.waterboards.ca.gov/drinking_water/certific/drinkingwater/lead_service_line_inventory_pws.html

If you are not able to upload the Replacement Timeline documents before the 2019 EAR is due, submit the 2019 EAR report on or before the report due date. After the EAR is reviewed, District or LPA Staff will return the EAR for revisions that will allow you to upload the required documents by the July 1, 2020 deadline. You can request your District or LPA Office return the EAR for revision if you are ready to upload the documents before the review is completed.

Intro	Contacts	Population	Connections	Sources	Water Supplied	Water Rates and Deliveries	Water Quality	Treatment
Backflow	Certification	Improvements	Complaints	Distribution	Emergency	Conservation	Climate Change	LSLR
Acknowledge	Finalize							

Please indicate the total number of hours spent to complete this report. This information will be utilized to characterize the level of effort required to complete this report

☐ By checking this box you acknowledge that any information submitted in this report is publicly accessible and may be used by the State of California to determine compliance with applicable laws and regulations. Knowingly submitting false information in this report is a misdemeanor, and by submitting this information you certify that the contents are, to the best of your knowledge, complete and correct.

Intro	Contacts	Population	Connections	Sources	Water Supplied	Water Rates and Deliveries	Water Quality	Treatment
Backflow	Certification	Improvements	Complaints	Distribution	Emergency	Conservation	Climate Change	LSLR
Acknowledge	Finalize							

Disclosure: Be advised that Sections 116725 and 116730 of the California Health and Safety Code states that any person who knowingly makes any false statement on any report or document submitted for the purposes of compliance may be liable for a civil penalty not to exceed five thousand dollars (\$5,000) for each separate violation for each day that the violation continues. In addition, the violators may be prosecuted in criminal court and upon conviction, be punished by a fine of not more than \$25,000 for each day of the violation, or be imprisoned in county jail not to exceed one year, or both the fine and imprisonment.