## State Waterboard 2024 EAR

#### Return to Home

## CA2210906 MARIPOSA PINES MUTUAL

To view last year's report, click  $\underline{\text{here}}.$ 

1 Intro	2 Contacts	3 Population	4 Connections	5 Sources	6 Supply-Delivery	7 Recycled	8a Customer Charges	8b Income	8c Affordability	9 Rpts./Plans
10 Backflow	11 Certification	12 Improvements	13 Complaints	14 Treatment	15 Distribution & Storage	16 Emergency	17 Conservation	18 Climate Change	Finalize	

# California State Water Resource Control Board 2024 electronic Annual Report (eAR) to the Division of Drinking Water for the year ending December 31, 2024 [Section 116530 Health & Safety Code]

	[Section 116550 Health & Safety Code]	
A. WATER SYSTEM INFO	RMATION	
Water System Number:	CA2210906	
Water System Name:	MARIPOSA PINES MUTUAL	
Water System Classification:	Community	
Related Regulating Agency:	DISTRICT 11 - MERCED	
	O Pick one	
	C Local Government C State or Federal Government	
Water System Ownership	Privately owned, PUC-regulated, for profit water company	
water System Switchship	Privately owned, non-PUC-regulated (Community Water System)	
	• Privately owned Mutual Water Company or Association	
	Privately owned business (non-community)	
If the address recorded is a I	PO Box or similar, please update to a physical address that would most accurately describe	
the location of the water syst	em.	
Physical location	7126 Hites Cove Road	
Address 1 Address 2		
Address 2 City	MARIPOSA	
Zip Code	95338	
General Office Phone:		
(with area code)		
Web site address:		
	e Mandatory Questions and must be answered to complete this report. Based on previous answers nissed responses to Mandatory and Conditionally Mandatory questions will be shown in the Finalize S	
B. DISADVANTAGED COM	MUNITY FEE REDUCTION APPLICATION & DETERMINATION - For State Regulated	PWSs Only
		•
To <b>continue receiving</b> a reduc	ed annual fee you must read and check the box below:	
	ou are a community water system who is serving a disadvantaged community (DAC) as define tions <u>and</u> have submitted documentation to the State Water Resource Control Board certifying	
the foregoing is true and co section 64300 of the Califo	erjury under the laws of the State of California as a duly authorized representative of the publ orrect: the public water system for which this report is being submitted served a disadvantaged ornia Code of Regulations) for the year in which this report is applicable, and, if requested to d ornay include an income survey, that the public water system served a disadvantaged commun.	d community (as defined in Title 22, Division 4, Chapter 14.5, to so by the State Board, will provide documentation to the Stat
If you have questions about the	DAC fee reduction, please contact our Customer Support team at <a href="mailto:DDW-EAR@waterboards.ca.go">DDW-EAR@waterboards.ca.go</a>	<u>v</u> .
DAC Certification Form proces the Statewide Median Househo	for fiscal year 2025-2026 the process of how a water system will receive a DAC fee reduction is project. The State Water Board plans to assess whether your water system qualifies as a DAC water system did Income—using the annual Drinking Water Needs Assessment. Please note that these proposed changes due to the new regulations, the Division will notify you directly.	m—defined as serving a population with an income below 80% of
REPORT STARTED BY		
Name: Tom Atkins Title: Vice President Work phone: 2097422333 Cell phone: 2096171808 Email address: mariposapinesw	ater@gmail.com	
	ment boxes throughout this electronic annual report will be made publicly available WITH Toeople with your water system's login credentials will have access to this comment box. You I report process.	
PRIVATE COMMENTS:		

# 2. Public Water System Contacts

CA2210906 MARIPOSA PINES MUTUAL To view last year's report, click here.

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.

The Division of Drinking Water will be send important information to the Administrative Contact email address. The Administrative Contact's address, business phone number, and email will be publicly accessible at: <a href="https://sdwis.waterboards.ca.gov/PDWW/">https://sdwis.waterboards.ca.gov/PDWW/</a>

EXISTING CONTACTS: To edit a contact, select the "Edit Contact" checkbox, this will allow for editing all fields except the contact name. To indicate an individual should no longer be associated with the water system, select the "Remove Contact" checkbox.

NEW CONTACTS: To add a new contact for the water system scroll down to subsection B, "ADD NEW CONTACT HERE" header and enter the contact information for the new contact. All contacts must have a form of communication provided and at least one role type selected.

A. EXISTING CONTACTS Contact Record	Phone Type -	Phone Number & Extension	Contact Type <sub>a</sub> (Modify with checkbox)		
Contact 1 First Name, Middle Initial TOM Last Name	Business Home	(209) 742-2333	Remove Contact 1	☐ Edit Contact 1	
Title	Facsimile		☐ Financial	☐ Emergency	
BOARD MEMBER  Address 1  7126 Hites Cove Road Address 2	Mobile		Designated Operator In Charge	Sampler / Water Quality	
City MARIPOSA State CA Zip Code 95338	Emergency		☐ Contract Operator	▼ Legal	
Email 1 Atkins@sti.net			☐ Owner	☐ Funding	
Email 2			☐ Carbon Copy	<u> </u>	
Contact 2 First Name, Middle Initial HEATH	Business	(209) 966-4461	Remove Contact 2	Edit Contact 2	
Last Name  HARRIS	Home		☐ Administrative	☐ Operator	
Title OPERATOR	Facsimile		☐ Financial	☐ Emergency	
Address 1 P. O. Box 529 Address 2	Mobile	(209) 617-2384	□ Designated Operator In Charge	Sampler / Water Quality	
City MARIPOSA State CA Zip Code 95338	Emergency		☐ Contract Operator	┌ Legal	
Email 1 yosemitewelltesting@hotmail.com			☐ Owner	☐ Funding	
Email 2			☐ Carbon Copy		
Contact 3 First Name, Middle Initial LINDA	Business	(209) 742-2705	Remove Contact 3	Edit Contact 3	
Last Name PEREZ	Home		☐ Administrative	☐ Operator	
Title TREASURER	Facsimile			☐ Emergency	
Address 1  [7078 Hites Cove Road]  Address 2	Mobile	(408) 274-1938	Designated Operator In Charge	Sampler / Water Quality	
City  MARIPOSA  State  CA  Zip Code	Emergency		Contract Operator	□ Legal	

95338				
95338 Email 1 mariposapineswater@gmail.com			☐ Owner	☐ Funding
Email 2			Carbon Copy	
Contact 4				
First Name,		(209) 742-7130	Remove Contact 4	☐ Edit Contact 4
Middle Initial	Business			
ROY	**			
Last Name	Home		✓ Administrative	☐ Operator
LEACH				
Title				
PRESIDENT	Facsimile		☐ Financial	☐ Emergency
Address 1				
7126 HITES COVE RD.	Mobile	(209) 640-2666	☐ Designated Operator In Charge	Sampler / Water Quality
Address 2			Cikiigc	Quality
City				
MARIPOSA				
State CA	Emergency		Contract Operator	☐ Legal
Zip Code				
95338				
Email 1			☐ Owner	☐ Funding
kqleach@sti.net				
Email 2			Carbon Copy	
0.1.5				
Contact 5 First Name,		(209) 966-4461	E Pour o Contact 5	E PP Compage
Middle Initial	Business	(209) 900-4401	Remove Contact 5	Edit Contact 5
DEBBIE				
	Home			
Last Name ANDRE			☐ Administrative	☐ Operator
THE				
Title	Facsimile		☐ Financial	☐ Emergency
Address 1				
P.O. Box 1808	Mobile		Designated Operator In	Sampler / Water
Address 2			Charge	Quality
City MARIPOSA				
State	E		Courtment On another	□ I and
State CA Zip Code	Emergency		Contract Operator	☐ Legal
Zip Code				
95338				
Email 1 yosemitefalls@sti.net			☐ Owner	☐ Funding
Email 2			Carbon Copy	
Contact 6				
First Name,		(408) 310-9648	☐ Remove Contact 6	Edit Contact 6
Middle Initial	Business			
TERRY	Home			
Last Name	Tione		☐ Administrative	☐ Operator
BURLEY			1 Zeitanistettive	operator
Title	Facsimile		☐ Financial	
COORDINATOR	1 desirine		1 iikiikkii	Litergency
Address 1			E Project 10	E 61 /W
7037 HITES COVE RD	Mobile		☐ Designated Operator In Charge	Sampler / Water Quality
Address 2			G.	
City				
MARIPOSA				
State CA	Emergency		Contract Operator	☐ Legal
Zip Code			1	
95338				
Email 1 revcab@sti.net			☐ Owner	☐ Funding
Email 2				

Contact 7 First Name, Middle Initial	Business		Remove Contact 7	Edit Contact 7
Last Name	Home		Administrative	☐ Operator
Title	Facsimile		☐ Financial	☐ Emergency
Address 1 Address 2	Mobile		Designated Operator In Charge	Sampler / Water Quality
City State Zip Code	Emergency		☐ Contract Operator	□ Legal
Email 1			☐ Owner	☐ Funding
Email 2			☐ Carbon Copy	<u> </u>
			I	
Contact 8 First Name, Middle Initial	Business		☐ Remove Contact 8	Edit Contact 8
Last Name	Tione		☐ Administrative	☐ Operator
Title	Facsimile		☐ Financial	☐ Emergency
Address 1 Address 2	Mobile		Designated Operator In Charge	Sampler / Water Quality
City State Zip Code	Emergency		Contract Operator	┌ Legal
Email 1	<u> </u>	l	☐ Owner	☐ Funding
Email 2			☐ Carbon Copy	
	ADD NEW CONT	ACTS HERE .		
B. NEW CONTACT Contact Record	Phone Type	Phone Number & Extension	Contact T (Pick all that	Гуре t apply)
New 1 First Name, Middle Initial Last Name	Business		☐ Administrative	☐ Operator
Title	Home		☐ Financial	☐ Emergency
Address 1 Address 2	Facsimile Mobile		☐ Operator In Charge	Sampler / Water Quality
City State Zip Code	Emergency		☐ Contract Operator	Legal
Email 1			☐ Owner	☐ Funding
Email 2			☐ Carbon Copy	
Add Additional Contact			(pick all that	apply)
New 2 First Name,				

Middle Initial  Last Name	Business	☐ Administrative	☐ Operator
Tite	Home	☐ Financial	☐ Emergency
Address 1 Address 2	Facsimile Mobile	☐ Operator In Charge	Sampler / Water Quality
City State Zip Code	Emergency	Contract Operator	□ Legal
Email 1		☐ Owner	☐ Funding
Email 2		☐ Carbon Copy	
Add Additional Contact		(pick all that	apply)
New 3 First Name, Middle Initial Last Name	Business	☐ Administrative	☐ Operator
Title	Home	☐ Financial	☐ Emergency
Address 2	Facsimile Mobile	☐ Operator In Charge	Sampler / Water Quality
City State Zip Code	Emergency	Contract Operator	┌─ Legal
Email 1		☐ Owner	☐ Funding
Email 2		☐ Carbon Copy	
Add Additional Contact		(pick all that	apply)
New 4 First Name, Middle Initial Last Name	Business	☐ Administrative	☐ Operator
Title	Home	☐ Financial	☐ Emergency
Address 1 Address 2	Facsimile Mobile	☐ Operator In Charge	Sampler / Water Quality
City State Zip Code	Emergency	Contract Operator	Γ Legal
Email 1		☐ Owner	☐ Funding
Email 2		☐ Carbon Copy	
COMMENTS (Note: Comments will be made publicly available):			

# 3. Population Served

Total Population in DDW Records:					
284 7/3/2015					
Population Type = Population Count Begin Date MM DD	Annual O	perating Perio	d =		
End Date  MM DD  Residential 284 01 01 01 12 31 Transient 0					
Method Used to Determine Population:  CPick one C Most recent United States census data C Multiplied number of service connections by 3.3 C Determined total number of dwelling units and multiplied by 2. C Other	8				
If population is based on "Other", identify the methods or source List the names of communities served by the system identifying be COMMENTS (Note: Comments will be made publicly available)	oth incorporated and unincorpora	ated areas:			
CA2210906 MARIPOSA PINES MUTUAL  To viewlast year's report, click here.					
4. Number of Service Connections					
A. Active Service Connections:					
Total Active Potable Water Connections currently in Division of	Drinking Water database:	87			
The total number of Service Connections as of December 3	1, 2024 must be reported as o	either <u>Unmet</u>	<u>ered</u> or	Metered for	each Service Con
ТҮРЕ	1	Pot UnmeteredM			
Single-family Residential: single family detached dwellings		89	0	89 87	
Multi-family Residential:  Apartments, condominiums, town houses, duplexes and m	obile home parks	0	0		
Commercial/Institutional:  Retail establishments, office buildings, laundries, schools, p nursing homes, hotels, churches, campgrounds  If you are a wholesaler; Enter the number of service connections are a wholesaler.	_	0	0		

Industrial All	: manufacturing				0	0			
	oe Irrigation: rks, play fields, c	emeteries, media	n strips, golf courses		0	0			
	ral Irrigation: igation of comme	ercially-grown cro	pps		0	0			
			ons and fire hydrants. These for compliance purposes.	connections are not					
Total Act	ive Connections*	k			89		89	87	
* Calcula	ted field								
B. Numb	er of Inactive (	Connections (all	types)						
			been physically disconnected ( as should be considered as "Act		m the 0				
COMM	IENTS (Note:	Comments will l	be made publicly available):	Includes 2 new home	s built, but	t not occ	cupied y	et	
CA2210	906 MARIPOS	A PINES MUT	UAL						
To view	last year's repo	ort, click <u>here</u> .							
5. So	urce Invei	ntory							
Section A	4								
(A) Sm	all Water Syste	m Source Type							
sources in	table A3. You	may view these so		Watch. You may sugge	st inventory	updates	s for groi	undwa	efilled for groundwater sources in table A1, and for surface water ter sources in table A2, and for surface water in table A4. For an ey.
A1. Gro	oundwater Sour	ce Inventory - I	Existing =						
		•	ty Source Type, Availability						
003	WELL 04	A	Well Permanent						
005	WELL 03	A	Well Permanent						
		ce Inventory - U							
			scribe any changes. An example rce Name as displayed in table.		tivity or ava	ailability.	Must in	clude o	comment describing change listed.
To add a of the rov		the green plus sig	gn in the upper right corner of th	e table. To remove a rov	v, select the	e trash ca	an at the	end of	f a row. Save changes by selecting the green check mark at the en
	D Name Activi Reported	ity Comments							
A3. Sur	face Water Sou	urce Inventory-	Existing -						
	D Source Nam Reported	e Source Activi	ty Source Type, Availability						
A4. Sur	face Water Sou	urce Inventory -	Updated						
			scribe any changes. An example rce Name as displayed in table.		tivity or ava	ailability.	Must in	clude o	comment describing change listed.
To add a of the roy		the green plus sig	gn in the upper right corner of th	e table. To remove a rov	v, select the	e trash ca	an at the	end of	fa row. Save changes by selecting the green check mark at the er
	D Name Activi	ity Comments							
	rce Inventory	Comment							
Section	R Sauma Mata	wing and Wall N	Aonitoring						
Secuon I	o. Source Mete	ering and Well N	TOTH WITHING I						

--Pick one--YesNo--Pick one--

1. Are your water sources metered?

Do you have equipment on hand to monitor groundwater levels at all your wells?      Check this box if you have funding available to achieve this	<ul><li>Yes</li><li>No</li><li>Not Applicable (no wells)</li></ul>
3. Do you routinely monitor the <i>static</i> water levels in your wells?	<ul><li>Pick one</li><li> Yes</li><li> No</li><li> Not Applicable (no wells)</li></ul>
4. Do you routinely monitor the <i>pumping</i> water levels in your wells?	<ul><li>Pick one</li><li> Yes</li><li> No</li><li> Not Applicable (no wells)</li></ul>
5. Are these levels recovering, declining or steady?:	<ul> <li>Pick one</li> <li>Recovering</li> <li>Declining</li> <li>Steady</li> <li>Not Applicable (no wells)</li> <li>Don't Know</li> </ul>

Section C. Standby Source Use

If a standby source was used in 2024, provide the following information.

To add a new row, select the green plus sign in the upper right corner of the table. To remove a row, select the trash can at the end of a row. Save changes by selecting the green check mark at the end of the row.

Name of the Standby Source used in 2024:	No. of days the Standby Source was in operation:	customers	Was the Division of Drinking Water notified? (Y/N)	Describe the reason the Standby Source was used:			
Nothing Reported							
COMMENTS (Note: Comments will be made publicly available):							

CA2210906 MARIPOSA PINES MUTUAL

To view last year's report, click here.

## 6. Water Supply and Delivery

This section has been relocated to the SAFER Clearinghouse and is a required technical report submission. To complete this required report visit the SAFER Clearinghouse located at: <a href="https://wbappsrv.waterboards.ca.gov">https://wbappsrv.waterboards.ca.gov</a>.

Note: If you do not have a SAFER Clearinghouse account, you will need to create one.

CA2210906 MARIPOSA PINES MUTUAL

To view last year's report, click here.

#### 7. Recycled Water Use

Does your water system have recycled water in its service area (provided by your water system or another utility)?

C --Pick one-C Yes
No
C Don't Know

# CA2210906 MARIPOSA PINES MUTUAL

To view last year's report, click here.

# 8. Customer Charges

About water rates and financial data; Senate Bill 200 (2019) updated Section 116530 (a) of California's Health and Safety Code allowing for the State Water Board to request information regarding financial capacity. Technical, managerial and financial capacity of a water system are critical components of its sustainability and resiliency. California Health and Safety Code Section 116530 now states:

(a) A public water system shall submit a technical report to the state board as part of the permit application or when otherwise required by the state board. This report may include, but not be limited to, detailed plans and specifications, water quality information, physical descriptions of the existing or proposed system, information related to technical, managerial, and financial capacity and sustainability, and information related to achieving the goals of Section 106.3 of the Water Code, including affordability and accessibility.

A. Water Rates and Charges

⊙ Yes
CPick one C Residential
A.2 Select applicable customer types:  Non-Residential (typically includes commercial, industrial, institutional customers etc.)  Both
A.2.1 Is your billing frequency for your Residential and Non-Residential customers the same?  Output  Output
A.2.2 Is your most common Residential water rates structure the same as your most common Non-Residential rate structure? (This does not include the number of tiers associated with the rate structures)  CPick one C Yes C No
A1. Residential Water Rates and Charges
A1.1 Please select the most common rate structure used to charge Residential customers:
Single or Flat Rate – Average, static rate charged per billing cycle independent of water usage.
Base Rate — Base rates are the charges applied for receiving drinking water service regardless of the amount of water consumed. Base rates are usually fixed amounts and may include charges like sourcewater protection fees, service fees, etc.
<u>Usage Rate</u> – Rates that are charged based on the amount of volume or water consumed.
Fixed or Uniform - Rates that remain unchanged per billing cycle throughout the year.
<u>Variable</u> - Rates that are changed depending on water usage.
© Single or Flat Rate (Often Unmetered) © Base Rate (Fixed) + Usage Rate (Uniform) © Base Rate (Fixed) + Usage Rate (Variable) © Base Rate (Variable) + Usage Rate (Uniform) © Base Rate (Variable) + Usage Rate (Variable) © Allocation Based (California Water Code Sections 370-374; Specifically, California Water Code Section 372) © Other (text box)
A1.1a. Other Notes  A1.2 Comments on rate structure, explain allocation rate if applicable: Residential = \$70.00; Vacant land = \$33.00
A1.3. Please select your billing frequency for Residential customers:  CPick one monthly bi-monthly quarterly quarterly annually Other: In text below, provide the average number of days between billing
Al.3a
CPick one C Gallons (Gal)  A1.4. Please select the metric or unit of measure (UOM) used in Residential Water Rates: C Gallons (Gal) C Hundred Cubic Feet Thousand Gallons C Million Gallons C Acre Feet
A1.5. Please select any variances or factors used to determine or adjust residential water rates or allocations:  Agricultural use (non-commercial)
Agricultural use (non-commercial or commercial)  . Drought factor
☐ Elevation
☐ Evaportive Coolers ☐ Fire protection - water to irrigate vegetation
☐ Home-based business
☐ Livestock or large animals ☐ Lot size
☐ Medical needs
Meter size  Minimizer of high langua of total dissaland calida  Minimizer of high langua of total dissaland calida
<ul> <li>✓ Mitigation of high levels of total dissolved solids</li> <li>✓ Occupancy (All-year)</li> </ul>
☐ Occupancy (Seasonal)
Pressure zone Soil compaction and dust control
Supplement ponds and lakes to sustain wildlife
Cother:
✓ None of the above  A1.6. Does your water system have multi-family AND single family billing classes?  Single-Family- Single family detached dwellings (houses).
Multi-Family- Apartments, condominiums, town houses, duplexes and mobile homes.  A 1.7 What is the purpose of time on leads of charges?
A1.7. What is the number of tiers or levels of charges?
A1.7a Residential C 4 C 5



Please complete the table below – taking into consideration the following:

• You have selected Billing Frequency, please submit your rate data based on this frequency.

If your flat rate varies over the     Please report the most commo	year, plea		nount.	•		
Two or more tiers must be define Two or more tiers must be defined All selected tiers must be defined All selected tiers must be defined All tiers must be defined for eithe Metrics for Base Rate Structure One or more values for Base Rat Metrics for Usage Rate Structur One or more values for Cost per	d for the U I for the B I for the C or the Bas must be in te are misse must be	Usage Rate Structure. Sase Rate Structure. Sost per Unit of Measure (Use Rate Structure, Usage Rate structure, Usage Rate structure, Usage Rate structure, Usage Rate ascending order. In ascending order. In ascending order. In ascending order.		re, or both.		
Customer Class		Base Rate: Maximum		Usage Rate: Maximum		
& Billing Tiers		Volume of Water per Tier	*	Volume of Water per	Unit of Measure (UOM)	
DesidentialSingle family Tien 1	70.00			Tier	per Tier	
ResidentialSingle-family - Tier 1	70.00					
Tier 2						
Tier 3						
Tier 4						
Tier 5						
Tier 6						
Tier 7						
Multi-family - Tier 1						
Tier 2						
Tier 3						
Tier 4						
Tier 5						
Tier 6						
Tier 7						
						☐ No Change

A1.9 Did your rates change in the reporting year?*	1 cs, increment of materyear approved
The Su you must share a reporting your	increase
	▼ Yes, imposition of new or increased fee.
	☐ Yes, other:
A1.9a Other Notes	
A1.10. Date of most recent update to the rate structure (this does not include regularly scheduled rate changes, rather actual changes to your rate	08/01/2024
structure): MM/DD/YYYY	08/01/2024
A1.11. If you recently updated your rate structure, please briefly describe the changes that were made:	Flat rate increase
A1.12. Provide a direct link to a web page that explains water rates and fees, if available.	mariposapineswater.com

A1.13. Upload rate structure documentation.

A1.13. Upload rate structure documentation

Choose File No file selected

Upload

(Uploaded files:)

Delete MPMWC Rates 2024.docx

0%

A1.14 Comments on the allocation of ResidentialSingle-Family and Multi-Family rate.

A1.15 Does your residential customer bills include any non-drinking water charges (i.e. wastewater, stormwater, electricity, telecommunications, property tax etc.)? CYes

--Pick oneYesNo

# A2. RESIDENTIAL SERVICE CONNECTIONS

A2.1

What is the average charge\* for a brand-new ResidentialSingle-Family connection (based on the most common meter size)?

\* Also known as: Connection Fees; Advances in Construction, or Contributions in Aid for Construction.

750.00

☐ No service charge for brand new connections

A2.2

When was the connection charge\* for a brand-new Residential Single-Family connection last updated (based on the most common meter size reported above)? $_{\circ}$ 

\* Also known as: Connection Fees; Advances in Construction, or Contributions in Aid for Construction.

08/01/2024 A2.3

What is the one-time fee or deposit needed to create a new water service account for an existing ResidentialSingle-Family home (based on the most common meter size reported above)?

What is the average charge\* for a brand-new Multi-Family connection (based on the most common meter size)? \* Also known as: Connection Fees; Advances in Construction, or Contributions in Aid for Construction. A2.5. Check all costs covered by a new ResidentialSingle-Family and Multi-Family connection fee: 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 A2.6. Comments on ResidentialSingle-Family and Multi-Family connections (publicly available): A3. Non-Residential Water Rates & Charges O -- Pick one-Gallons (Gal) Hundred Cubic Feet (HCF) A3.1. Please select the metric or unit of measure (UOM) used for Non-Residential Water Rates: Thousand Gallons Million Gallons Acre Feet --Pick one-monthly o bi-monthly A3.2. Please select your billing frequency for Non-Residential customers? quarterly annually other A3.2a please provide average number of days between billing A3.3. Please select the most common rate structure used for to charge Non-Residential customers: Single or Flat Rate - Average, static rate charged per billing cycle independent of water usage. Base Rate - Base rates are the charges applied for receiving drinking water service regardless of the amount of water consumed. Base rates are usually fixed amounts and may include charges like sourcewater protection fees, service fees, etc. <u>Usage Rate</u> - Rates that are charged based on the amount of volume or water consumed. Fixed or Uniform - Rates that remain unchanged per billing cycle throughout the year. Variable - Rates that are changed depending on water usage. Single or Flat Rate (Often Unmetered) ○ Base Rate (Fixed) + Usage Rate (Uniform) ○ Base Rate (Fixed) + Usage Rate (Variable) Base Rate (Variable) + Usage Rate (Uniform) Base Rate (Variable) + Usage Rate (Variable) Allocation Based (California Water Code Sections 370-374; Specifically, California Water Code Section 372) Other (text box) A3.3a, Other Notes A3.4 Comments on Non-Residential rate structure: A3.5. Select all applicable Non-Residential connection types:\* Commercial (Retail, Offices, Gas Stations, etc.) Institutional (Schools, Hospitals, Hotels, etc.) Industrial (Manufacturing, Chemical, etc.) Landscape Irrigation (Parks, Gold Courses, etc.) Agricultural Irrigation (Crops, Aquaculture, etc.) A3.5a. Other Notes --Pick one--A3.6. Do your rates change for different levels of water consumption? C Yes No Tiers or Levels A3.6.1. What is the number of tiers or levels of charges? --Pick one O 1 O 2 O 3 A3.6.1a Commercial 0 4 0 5 O 6 • -- Pick one--

750.00

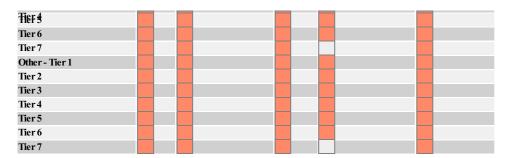
A3.6.1b Institutional	O 4
	O 5
	O 6
	0.7
	•Pick one
	0 1
	<b>O</b> 2
A3.6.1c Industrial	<b>O</b> 3
15.0.10 IRRESURI	<u> </u>
	<b>o</b> 5
	<u>o</u> 6
	<u> </u>
	OPick one
	O 1
	O 2
	© 3
A3.6.1d Landscape Irrigation	0 4
	<b>o</b> 5
	o 6
	o 7
	•Pick one
	0 1
	O 2
A3.6.1e Agriculture Irrigation	O 3
8 8	O 4
	O 5
	<u> </u>
	<u>o</u> 7
	<ul><li>Pick one</li></ul>
	O 1
	O 2
42 6 150d	O 3
A3.6.1fOther	O 4
	O 5
	O 6
	07

A3.7. Non-Residential Rates & Charges Table  $_{\scriptscriptstyle \odot}$ 

Please complete the table below – taking into consideration the following:

- You have selected Billing Frequency, please submit your rate data based on this frequency.
  If your flat rate varies over the year, please use the average flat rate amount.
  Please report the most common rate for the majority of your residential customers.

	Flat Rate	Base Rate Structure					ge Rate cture		
Customer Class & Billing Tiers		Top Metric/ Unit of Meas for Base Ra	sure (UOM)	Base	e Rate	Top Unit	Metric/ of Measure (UOM)	Cost of M	t per Unit Ieasure (UOM)
Commercial - Tier 1									
Tier 2									
Tier 3									
Tier 4									
Tier 5									
Tier 6									
Tier 7									
Institutional - Tier 1									
Tier 2									
Tier 3									
Tier 4									
Tier 5									
Tier 6									
Tier 7									
Industrial - Tier 1									
Tier 2									
Tier 3									
Tier 4									
Tier 5									
Tier 6									
Tier 7									
Landscape Irrigation - Tier 1									
Tier 2									
Tier 3									
Tier 4									
Tier 5									
Tier 6									
Tier 7									
Agricultural Irrigation - Tier 1									
Tier 2									
Tier 3									



## CA2210906 MARIPOSA PINES MUTUAL

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Total Drinking Water Cost to Customer ?  $\boldsymbol{0}$ 

Please make sure to complete the Customer Charges section before completing this section.

8(B) Income a
B0. Financial Reporting Period
Do. Financiai Reporting 1 error
B0.1 For the Total Income section of the EAR, water systems may report their data by fiscal year or calendar year. Please indicate if the information provided in this section represents your water system's fiscal or calendar year financial data?*
<ul><li>C Calendar Year</li><li>⊙ Fiscal Year</li></ul>
B0.2 Please select fiscal year start-date (mm/dd/yyyy)
08/01/2024
B1. Total Revenue Generated from Different Sources*
Instructions: Purpose of this section is to calculate total annual revenue generated. No revenue should be double counted.
*Mobile homes, parks, and other types of community water systems that do not charge their customers directly for water should provide their total revenues received from rent, fees, operating contracts, and/or any other source of revenue used to support the operations and maintenance of the water system in question B1.7
B1.1 Total revenue collected from Residential (Single and multi-family) customers' rates and charges that cover water services, including usage fares, and basic rates for the reporting year.*  78833.00
*Do not include any other charges (i.e. connection fees, service fees, etc.) associated with your water rates. Other charges for Residential customers will be recorded in B1.3.
You have reported \$0, please explain why:*
*Do not include any other charges (I.e. connection fees, service fees, etc.)
B1.3 Total revenue generated exclusively from other fees and charges* from all Residential customer types during the reporting year (includes single-family and multi-family customers).*
*Other fees and charges:
Include: Late fees, notice fees, penalties, shutoff fees, reconnection fees, and bounced check fees.
Do Not Include: Revenue generated by your water rates on your typical Non-Residential customer bill.
B1.5 Did you collect/receive revenue from interfund (from wastewater or stormwater utility) or governmental transfers (i.e. property taxes or fees, sales taxes or fees, etc. – typically from one
B1.6 Total revenue lost from interfund or governmental transfers (if \$0, enter \$0)*   0.00
Total interfund or governmental Revenue Gained (-):
B1.7 Total revenue generated from non-customer sources that have not already been accounted for (i.e. cell towers, lawsuits and settlements, energy generation, land leases, rent, interest income, other service fees, etc.)*
Total Other Revenue Gained (+):
B1.7a Other Notes
B1.8 Total Annual Revenue for the Reporting Year* 80773.00
You have reported \$0, please explain why:*
Drinking Water Charge: Water Bill ? 0
Please revisit and confirm your answers to questions in the Customer Charges section: A.1 through A.2.2a; and A.1.1 through A.1.8. This field is calculated by taking the rate data inputted from question A1.8 and converting it into dollars/month as well as converting the UOM into HCF. Depending on how you answered certain questions in the Customer Charges section, there may be some questions you do not see. If the information you provided is incorrect, please fix and the figures in this table will refresh.

Please revisit and confirm your answers to questions in the Customer Charges section: A.1 through A.2.2a; and A1.1 through A1.8. This section converts drinking water charges into dollars/month: The column auto-calculates by adding Drinking Water Charges to Other Charges from Interfund Transfer for each consumption volume (6, 9, 12, and 24 HCF). Depending on how you answered certain

questions in the Customer Charges section, there may be some questions you do not see. If the information you provided is incorrect, please fix and the figures in this table will refresh.

B1.9 Approximation of Total Residential Charges

Consumption	Drinking Water Charge: Water Bill	Other Charges from Interfund Transfer: Taxes / Fees	Total Drinking Water Cost to Customer: dollars/month	Provide Alternative Amount	Alternative Amount	Comments
6 HCF	70.00	0.00	70.00			
9 HCF	70.00	0.00	70.00			
12 HCF	70.00	0.00	70.00			
24 HCF	70.00	0.00	70.00			

B1.10 Days of cash-on-hand\* at the end of the reporting year:\*

\*How much cash your system has saved up, including reserve funds, that isn't earmarked for anything else (unrestricted cash) and estimates the number of days your system can pay its daily operation and maintenances costs before running out of this cash.

Number of Days 650
B1.11
Comments on water system revenues:
Comment

#### **B2.**Total Expenses

Instructions: Purpose of this section is to calculate total annual expenses. No expense should be double counted.

B2.1 Total annual operations and maintenance expenses\*

\* Expenses incurred during the system's normal operation. This can include salaries, benefits for employees, utility bills, system repair and maintenance, supplies (e.g., treatment chemicals), insurance, and water purchased for resale.

Total Operations and Maintenance Expenses (-): 78169.18

B2.2 Total annual expenses from investing or capital expenditures\*

\* Expenses incurred from purchase of property and equipment; construction of new assets (i.e. treatment, distribution etc.)

Total Investment Expenses (-): 0.00

B2.3 Total annual expenses from financing activities\*

\* Expenses incurred from retirement of long-term debt, purchase of securities, interest expenses etc.

Total Financing Activity Expenses (-): 0.00

B2.4 Total Other annual expenses\*

Total Other Expenses (-): 0.00
B2.4a Other Notes

B2.5 Total annual expenses\*

Total Annual Expenses (-): 78169.18 B2.6 Comments on Total Expenses:

Comment

CA2210906 MARIPOSA PINES MUTUAL

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Please make sure to complete the Customer Charges section before completing this section.

# 8(C) Affordability

#### C1. Shut-offs

Senate Bill 3 (2023) extended Senate Bill 998 requirements to all community water systems.

Community water systems shall report the number of annual discontinuations of residential service for inability to pay to the board and on the water system's internet website (if a website exists).

A community water system that serves 200 or more service connections shall have a written policy on discontinuation of residential service for nonpayment available in English, Spanish, Chinese, Tagalog, Vietnamese, Korean, and any other language spoken by at least 10 percent of the people residing in its service area.

A community water system that serves fewer than 200 service connections shall have a written policy on disconnection of residential service for nonpayment available in English, any language spoken by at least 10 percent of the people residing in its service area, and, upon request of a customer, in Spanish, Chinese, Tagalog, Vietnamese, and Korean.

"Residential service" means water service to a residential connection that includes single-family residences, multifamily residences, mobilehomes, including, but not limited to, mobilehomes in mobilehome parks, or farmworker housing,

"Urban and community water system" means a public water system that supplies water to more than 200 service connections.

C1.1.1.	What is the average amount owed at the time of shut-off? ${\scriptscriptstyle\square}\$$	
	Data not collected. System will begin collecting. Grace period 202	3 and 2024 eAR

C1.3. What is the average duration of the shut-offs (in days) for continuously occupied ResidentialSingle-Family and Multi-Family service accounts? Occupied Unoccupied Unknown Total Accounts Accounts Accounts C1.3a.1 1 Day C1.3a.2 2-3 Days C1.3a.3 Residential Accounts 4-7 Days C1.3a.4 8-30 Days C1.3a.5 1 month or more C1.3b.1 1 Day C1.3b.2 2-3 Days C1.3b.3 Single Family Accounts 4-7 Days C1.3b.4 8-30 Days C1 3b 5 1 month or more C1.3c.1 1 Day C1.3c.2 C1.3c.3 Multi-Family Accounts 4-7 Days C1 3c 4 8-30 Days C1.3c.5 1 month or more Data not collected. System will begin collecting. Grace period 2023 and 2024 eAR. C1.4 How many of these shut-offs are returned to service within one-day (or 24 hours)? Data not collected. System will begin collecting. Grace period 2023 and 2024 eAR. --Pick one- Single family C1.4.1 This answer covers: Multi-family Single and multi-family O -- Pick one-O Yes C1.7 Do you offer an extended repayment or other customer payment assistance plan? C1.7.1.How many occupied ResidentialSingle-Family and Multi-Family customer accounts participated in your extended payment of other customer payment assistance plan? C1.7.1a Residential Accounts C1.7.1b. Single-Family Accounts C1.7.1c. Multi-family Accounts 0 Data not collected. System will begin collecting. Grace period 2023 and 2024 eAR. C1.8. What is the number of residential accounts (single-family, multi-family, and mixed use that include residential) that were missing one or more required water bill payments at the end of your year? C1.8.1. What is the sum of outstanding uncollected residential (single-family, multi-family, and mixed use that include residential) bills at the end of your most recent year? C1.9. Comments on Shut-offs (publicly available): C1.10 Does your water system transfer customer arrearages (unpaid water bill debt) to a third-party after a certain period of delinquency?\* O -- Pick one--Yes, to the County (Teeter Plan) Yes, to a third-party debt collector (not County) • No, customer arrearages are not transferred away from the water system C1.11: Enter website address where the number of annual single-family and multi-family residential service connections/accounts water shut-off information (refer to question C.1.1) for the inability to pay is posted: C1.12: Check the box, if you do not have a website available. C1.13: Does your water system have a written policy on discontinuation of residential services for inability to pay? C -- Pick one--No C1.14: Enter website address where written policy is posted: C1.15: Check the box, if you do not have a website available. C1.16 Enter the language(s) the written policy is provided to customers in: C2.1 In the reporting year, did you offer any of the following types of bill assistance to customers? Low-income water rate assistance Flexible payment terms Alternative payment terms Temporary assistance Special medical need Other types of assistance

C2.2 Please provide the following about each type of bill assistance offered:

Number of accounts Utilized Average	ge Bill
C2.2a Low-income water rate assistance*	
C2.2b Flexible payment terms C2.2c Alternative payment terms	
C2.2d Temporary assistance	
C2.2e Special medical need	
C2.2f Other types of assistance	
C2.3. How is low-income water rate assistance program funded?   C2.4. How much funding was allocated to your low-income water rate assistance.	ce program in the reporting year?
C2. 1. 110W HZEN REMEMBER WAS UNSCHOOL TO YOUR DW HECHE WHICH I HE HIS BREAK	CPick one
C2.7 Does your system partner with an outside entity (e.g. United Way) to prov	o No
C2.8 Do you offer bill forgiveness under certain circumstances? Yes No	
Comment:	
C2.8.1 Number of accounts: 1 Information Not Collected	
C2.8.2 Average Amount Forgiven: 3500.00	
☐ Information Not Collected  C2.9 Comments on Affordable Drinking Water Assistance (publicly available):  [	
CA2210906 MARIPOSA PINES MUTUAL	
To viewlast year's report, click <u>here</u> .	
9. Regulatory Reports/Plans (aka Water Quali	ty)
A. (NEW) BACTERIOLOGICAL SAMPLE SITING PLAN (BSSP)	
	mark 121 - 2 December 1 2011 Oct 1 1 2022 1 - 1 21 DECEMBER 2 2 4 DECEMBER 2
On July 1, 2021, the California Revised Total Coliform Rule (RTCR) became et can be found at:	

## CA2210906 MARIPOSA PINES MUTUAL

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## 10. Backflow-Cross Connection Control

## A. Backflow Assemblies and Air Gaps

		Total	Namela	Namahan	Namelagu	Namel or
	Total Number Reported in 2023	Number in System in 2024	Number Installed in 2024	Number Tested in 2024	Number Failed in 2024	Number Repaired/ Replaced
Backflow Assemblies on the Service Connections or Meter (Reduced Pressure Principle and Double Check Valve assemblies)	0	0	0	0	0	0
Backflow Assemblies On-site but not on the Service Connections or Meter (Reduced Pressure Principle and Double Check Valve assemblies)	0	0	0	0	0	0
Air-gap Separation	0	0	0			
No. of Inactive Backflow Prevention Assemblies in water	system in 2024:	0				
D. Come Comment's a Control December						
B. Cross Connection Control Program						
Are cross-connection control surveys regularly conducted	on the system?	O	Pick one Yes No			
Date of last cross-connection control survey done on the cross Connection Control Program Coordinator	system:					
Name: Business Phone:	Email Address:					
List the name of trainings or certifications received:  Certification Number (if applicable):						
Describe any <u>cross-connection</u> incidents that occurred du	ring 2024:					
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11. Operator Certification						
11. Operator Certification  Please list the State Certified Drinking Water Operator applicable in the reporting year of this report.	ors employed by your water system tha	t supervise and	direct the op	eration of you	r distribution	system and w
Please list the State Certified Drinking Water Operator	ors employed by your water system tha	t supervise and	direct the op	eration of you	r distribution	system and w
Please list the <b>State Certified Drinking Water Operate</b> applicable in the reporting year of this report.	ors employed by your water system tha	t supervise and	direct the op	eration of you	r distribution	system and w
Please list the State Certified Drinking Water Operate applicable in the reporting year of this report.  A. DISTRIBUTION SYSTEM CERTIFIED OPERATORS			direct the op	eration of you	r distribution	system and w
Please list the State Certified Drinking Water Operate applicable in the reporting year of this report.  A. DISTRIBUTION SYSTEM CERTIFIED OPERATORS  Your <u>Distribution System</u> Classification is: <b>D1</b>	ors have the minimum level required		direct the op	eration of you	r distribution	system and w
Please list the State Certified Drinking Water Operate applicable in the reporting year of this report.  A. DISTRIBUTION SYSTEM CERTIFIED OPERATORS  Your <u>Distribution System</u> Classification is: D1   Do your Chief and Shift <u>Distribution System</u> Operate Pick one	ors have the minimum level required	12	direct the op	eration of you	r distribution	system and w
Please list the State Certified Drinking Water Operate applicable in the reporting year of this report.  A. DISTRIBUTION SYSTEM CERTIFIED OPERATORS  Your Distribution System Classification is: D1   Do your Chief and Shift Distribution System Operate Pick one  Yes  No  Not Applicable (transient non-community water system)	n) nave a designated Chief Distribution Op ne): Heath Harris	12	direct the op	eration of you	r distribution	system and w

\*Click here to download, update, and/or upload an Excel spreadsheet of your water system's certified distribution operators.\*

Distribution Operator Name
(First name Last name)

Grade of Distribution Chief, Shift Distribution Operator
Operator
or Neither Number
(D1, D2, D3, D4, or D5)
(C, S or X)

Chief, Shift Distribution Operator
Operator
Operator
Office (Shift Distribution Operator Number Expiration Date (MM/DD/YYYY)

Nothing Reported  Distribution Operator Solve of Distribution Chief, Shift Distribution Operator Distribution Certification  Operator or Neither Number  (First name Last name)  (D1, D2, D3, D4, or D5) (C, S or X)  (MM/DD/YYYY)	
B. TREATMENT PLANT CERTIFIED OPERATORS	
Your Highest <u>Treatment System</u> Classification is: There are no facilities subject to the Certified Treatment Plant Operator requirements a	
Do your Chief and Shift <u>Treatment Plant</u> Operators have the minimum level required?	
cPick one c Yes	
No treatment facility except precautionary disinfection	
☐ Check this box if your public water system does not have a designated Chief Treatment Operator.	
Name of Chief Treatment Operator (First name Last name): Heath Harris	
Grade of Chief Treatment Operator (T1, T2, T3, T4 or T5):  T2  T3  T4  T5	
Treatment Operator Number (3, 4 or 5 digits):  Treatment Certification Expiration Date (MM/DD/YYYY):  06/01/2027	
If your public water system has additional certified treatment plant operators, enter their information in the table below.	
*Click here to download, update, and/or upload an Excel spreadsheet of your water system's certified water treatment operators.*	
Treatment Operator Name (First name Last name)  Grade of Treatment Chief, Shift Treatment Operator Treatment Certification or Neither!  Number Expiration Date (MM/DD/YYYY)	
Nothing Reported  1 Use "C" for Chief Operator and "S" for Shift Operator. If neither, put an "X". Do not leave blank.	
esc e si cheropetato ani si si si si ma opetato. Tribilita, paran A. Do ist tave stant.	
COMMENTS (Note: Comments will be made publicly available):	
CA2210906 MARIPOSA PINES MUTUAL	
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12. Water System Improvements	
The California Waterworks Standards (Section 64556) requires an amended permit for any of the following improvements or modifications. Check modifications during 2024 or the future for which a permit was <u>not</u> obtained or amended.	call boxes that apply for any improvements or
☐ Addition of a new distribution reservoir ☐ Modification or extension of the existing distribution system ☐ Adding a new source ☐ Changing the status of an existing source (for example, active to standby) ☐ Changing or altering a source, such that the quality or quantity of water supply could be affected ☐ Addition or change in treatment, including design capacity and process ☐ Expansion of the existing service area by 20 percent or more of the number of service connections specified in your current permit ☐ Other	
COMMENTS (Note: Comments will be made publicly available):	
· · / · ·	
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To viewlast year's report, click <u>here</u> .	
13. Complaints Reported (Written or Verbal)	

No. of Complaints
Type of Complaint

Customers

No. of Complaints
No. of reported to reported to the Division of Corrective Action taken

Drinking Water or Local County Staff

Taste and Odor Color	0	0	0			
Turbidity	0	0	0			
Visible Organisms	0	0	0			
Pressure (High or Low)	0	0	0			
Water Outages	0	0	0			
Illnesses (Waterborne)	0	0	0			
Other (Specify)	0	0	0			
Total No. of Complaints*	0	0	0			
*Calculated field						
	e: Comments will be made of the made of th	de publicty available):				
Section 14 To	reatment Plants	<b>,</b>				
	(treatment plant inventory			tment plants are not listed), and Ta	able B for Surface Water tr	eatment. You may also view your
		select the blue pencil sy	mbol at the end of each rov	v. To cancel the edit, select the red	X at the end of a row. Sa	ve changes by selecting the green
check mark at the end of		,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
			uld contact your regulating ag	ency representative or by clicking "Ema	ail for help on this page" at the	bottom of this page.
WSF ID Treatment I Name	ter Date of Is Plant Operations Plan	Operations an Current? (Y/N)				
Did the water system has following? Select all that	ive any incidents in 2024 t t apply.	hat substantially affected	I the ground water treatmer	t plant(s) performance AND/OR 1	nad significant modifications	s or maintenance due to any of the
☐ Treatment plant unp ☐ Treatment plant unp ☐ Shortage of treatment ☐ Change in treatment	availability  I/well operations cess failure, including pow lanned shutdown lasting m lanned staffing shortages at chemicals plant design capacity ultiple treatment processes	nore than 5 days				
B. SURFACE WATE	R TREATMENT					
To edit the operations p		select the blue pencil sy	mbol at the end of each rov	v. To cancel the edit, select the rec	X at the end of a row. Sa	ve changes by selecting the green
If you have questions or co	oncerns about your treatment	facility inventory, you sho	uld contact your regulating ag	ency representative or by clicking "Em	ail for help on this page" at the	bottom of this page.
WSF ID Treatment F Name Nothing Reported	ter Date of Plant Operations Plan	Operations lan Current? (Y/N)				
Did the water system has following? Select all that		that substantially affected	I the surface water treatmen	t plant(s) performance AND/OR	had significant modification	s or maintenance due to any of the
☐ Treatment plant unp ☐ Treatment plant unp ☐ Shortage of treatment ☐ Change in treatment	rce water availability be water(s) used cess failure, including pow lanned shutdown lasting m lanned staffing shortages nt chemicals plant design capacity ultiple treatment processes	ore than 5 days				

#### C. CHEMICAL ADDITIVES

Please complete the following table for each chemical used by this water system. Only include chemicals that your water system adds. If you are not sure whether a chemical you are using meets this standard, contact the manufacturer or distributor of the chemical.

The table below is prefilled with direct chemical additives reported on site from previous year eAR. To add a new row, select the green plus sign in the upper right corner of the table. To edit a row, select the pencil image to the right of the row. To remove a row, select the trash can image at the end of a row. Make sure to save changes by selecting the green check mark at the end of the row.

\*Click here to upload an Excel spreadsheet of your water system's direct chemical additives.\*

Name of Chemical		Purpose of using chemical	Chemical is ANSI/NSF Standard 60 certified (Y/N)	Use initiated in 2024 (Y/N)
Nothing R	eported			

#### D. 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.

D.1. Does your water system have procedures to ensure all future equipment and materials meet this standard?

O Yes
O No
O NA

If you have any questions on the requirements related to indirect additives, you may contact your local regulatory agency.

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

CA2210906 MARIPOSA PINES MUTUAL

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#### 15. Distribution System and Storage Tanks

#### A. 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	0	0	0	
Main Breaks/Leaks	2	2	2	Repaired
Water Outages	0	0	0	
Boil Water Orders	0	0	0	
Total*	2	2	2	

# Comments on SYSTEM PROBLEMS (publicly available):

B. INFRASTRUCTURE AND PIPELINE MATERIALS

# Pipe Material in Distribution System

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

Pipeline Material	Percentage of distribution pipe system composed of the materials selected	Average Age (in years)
✓ Plastic (Including Poly Vinyl Chloride and HDPE)	90	56
Steel		
Cast Iron		
Galvanized Iron		
Ductile Iron		
Cement Concrete		
✓ Asbestos Cement	10	56
Other		

Please describe other pipeline materials in your distribution system:

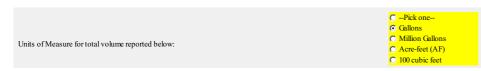
#### C1. DEAD-END FLUSHING PROGRAM

If unknown, please enter 0 and explain why in the comments box.

Total No.	No. with	No. Flushed	Frequency of
in System	Blowoffs	in 2024	Flushing
0			

Comments on DEAD-END FLUSHING PROGRAM (publicly available):

## C2. ALL FLUSHING OPERATIONS



			O	No Flushing
Total Volume in units of m not just dead-end flushing	easure selected above; include all t	ypes of flushing,	10	0000
Comments on ALL FLUSHI	NG OPERATIONS (publicly availab	ole):		
D. VALVE EXERCIS	SE PROGRAM =			
If unknown, please enter 0 a	nd explain why in the comments bo	ox.		
Total No. in System	Size Range of Valves	No. Exercised in 2024	Frequency of	Valve Exercising
32	4"	10	An	nually
Comments on VALVE EXER	CISE PROGRAM (publicly available	le):		
E. STORAGE TANK	/RESERVOIR INSPECTIO	ON/CLEANING PROGRAM	1.	
*If you have many storage tank  *Tank name Capacity Capa  Tank 2 65000 Gallot  Tank 3 65000 Gallot  Tank 1 65000 Gallot	ve a row, select the trash can at the sand completing the table below will take city Units   Year   Date of last inspection   1S   2002   03/17/2022   3/1   1S   1998   03/17/2022   3/1	cleaning or coated 7/2022 12:00:00 AM 7/2022 12:00:00 AM 22-03-17T07:00:00.000Z	ecting the green check mand upload.*  d Corrosion Materia	ark at the end of the row.
CA2210906 MARIPOSA P To viewlast year's report, c  16. Emergency P		onse .		
A.3. During a power ou such that it meets curre	all ensure continuous operations d tage, with your current backup elee nt water quality requirements and i		dequate backup electrica r system maintain contine emand?	Isupply.  C -Pic one- c Yes C No C In progres
	e backup source of water supply, o nd is sufficient to meet average dai	or a water system intertie, that can m ily demand?	naintain continuous opera	tions and meets current
• Yes	or for water loss due to leakages?			
<ul><li>No</li><li>A.6 Do you have the source</li><li>✓ Yes</li><li>No</li></ul>	, treatment, and distribution syster	n capacity to meet fire flow requirem	ænts?	
B. EMERGENCY RESPONSE	PLANS			
		ORE PERSONS SHOULD REVIEW FFICIENT TO ADDRESS POSSIBI		IOS.
for the restoration of water s	ncy Response Plan (ERP) that addrervice for your water system?	resses the procedures		<ul><li>C -Pick one</li><li> Yes</li><li> No</li></ul>
exercised in the last year, ple	mergency notification plan (ENP) w	vas last exercised with a tabletop or	other activity? If the ENF	has not been
C. WATER PARTNERSHIPS  C.2. Do you have an active a	nembership in a mutual aid organiz	ation?*		
○ Yes ⊙ No	1			
	nents will be made publicly availab	le): -		
CA2210906 MARIPOSA P	INES MUTUAL	_		
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Section questions are for one water system per Urban Water Supplier.

CA2210906 MARIPOSA PINES MUTUAL

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# 18. Climate Change Adaptation and Resiliency for Water Utilities

A. CLIMATE THREATS, SENSITIVITY, AND MAGNITUDE OF IMPACTS * A minimum of one climate threat must be identified by checking the corresponding box					
	Groundwater depletion (decreasing well levels, overdrafted groundwater basins, reduced groundwater recharge, etc.)	Choose an item CPick one- C High or Already Experiencing Medium Sensitivity None to Low Sensitivity			
<b>▼</b> Drought	Decreased surface water storage (decreasing lake, reservoir, and/or river levels)	Choose an item CPick one C High or Already Experiencing Medium Sensitivity None to Low Sensitivity			
	Reduction in surface water (decreases in seasonal runoff, and/or loss of snowmelt)	Choose an item CPick one C High or Already Experiencing Medium Sensitivity None to Low Sensitivity			
	Reliance on surface water diverted from the Delta, imported from Colorado River, or other climate-sensitive areas	Choose an item CPick one C High or Already Experiencing Medium Sensitivity None to Low Sensitivity			
	Salt-water intrusion into aquifers	Choose an item  -Pick one- High or Already Experiencing Medium Sensitivity None to Low Sensitivity			
☐ Water Quality Degradation	Altered water quality during storm events (turbidity shifts, debris flows)	Choose an item CPick one C High or Already Experiencing Medium Sensitivity None to Low Sensitivity			
	Surface water quality issues related to eutrophication, algal blooms, invasive species	Choose an item CPick one C High or Already Experiencing Medium Sensitivity None to Low Sensitivity			
☐ Flooding ☐ Sea Level Rise	High flow events and flooding	Choose an item -Pick one- High or Already Experiencing Medium Sensitivity None to Low Sensitivity			
	Inundation due to sea level rise, high tides, and/or coastal storm surges	Choose an item    -Pick one-    High or Already Experiencing    Medium Sensitivity    None to Low Sensitivity			
	Aging flood protection infrastructure (levees), or insufficient impoundment capacity	Choose an item CPick one C High or Already Experiencing C Medium Sensitivity None to Low Sensitivity			
✓ Extreme Heat ✓ Fire	Peak demand volume surges (due to extreme heat, temperature trends, etc.)	Choose an item CPick one C High or Already Experiencing   Medium Sensitivity   None to Low Sensitivity			
	Increases in agricultural water demand or energy sector needs	Choose an item CPick one C High or Already Experiencing C Medium Sensitivity None to Low Sensitivity			
	Increased fire risk and altered vegetation, e.g., wildfires	Choose an item CPick one- C High or Already Experiencing Medium Sensitivity None to Low Sensitivity			
	Disruption of power supply	Choose an item CPick one C High or Already Experiencing Medium Sensitivity None to Low Sensitivity			
☐ Other	Other	Choose an item   Pick one    High or Already Experiencing			

		O Medium Sensitivity O None to Low Sensitivity				
□ None	Active Water Resource Threat Monitoring	Choose an item C -Pick one C Yes No C Idon't know				
B. ADAPTATION MEASURES						
Install new and deeper drinking water v	wells, or modify existing wells to increase pumping capacity	Choose an item C —Pick one— C Completed In Progress Plan to Implement Will not Implement N/A				
Develop local supplemental water supp	oly, enhanced treatment, or increased storage capacity (e.g. recycled water, storm runoff for groundwater recharge, desalination, new reservoir)	Choose an item  - Pick one— Completed In Progress Plan to Implement Will not Implement N/A				
Interconnection with other utilities (tra	ns fers, mutual aid agreements with neighboring utilities)	Choose an item  - Pick one- Completed In Progress Plan to Implement Will not Implement N/A				
Relocate facilities, construct or install 1	redundant facilities	Choose an item C —Pick one— C Completed In Progress Plan to Implement Will not Implement N/A				
Modify facilities (e.g., install barrier or	levee, raise a wall, seal a door, elevate construction)	Choose an item				
Conservation measures (demand mana	Choose an item    Pick one     Completed     In Progress     Plan to Implement     Will not Implement     N/A					
Fire prevention – brush management, p	Choose an item					
Alternative or backup energy supply	Choose an item  —Pick one— Completed In Progress Plan to Implement Will not Implement N/A					
On-site energy generation	Choose an item      Pick one—     Completed     In Progress     Plan to Implement     Will not Implement     N/A					
Enhance monitoring program, budget f	or additional testing and treatment, chemicals	Choose an item CPick one C Completed In Progress Plan to Implement Will not Implement N/A				
Other		Choose an item				

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

To view last year's report, click here.

#### 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.

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

y by checking this boxyou 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. \*

#### REPORT SUBMITTED BY

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