# RESOLUTION NO. 2018-03R

## A RESOLUTION OF IVINS CITY, UTAH, ADOPTING THE MUNICIPAL WASTEWATER PLANNING PROGRAM

**NOW THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF IVINS CITY, STATE OF UTAH, INFORMS THE WATER QUALITY BOARD THE FOLLOWING ACTIONS WERE TAKEN BY THE IVINS CITY COUNCIL:**

1. Reviewed the attached Municipal Wastewater Planning Program Report for 2017.

**Effective Date: This Resolution shall become effective immediately upon adoption by the City Council.**

**PASSED AND ADOPTED BY THE IVINS CITY COUNCIL, STATE OF UTAH, ON THIS ___ DAY OF APRIL, 2018 BY THE FOLLOWING VOTE:**

| | AYE | NAY | ABSTAIN | ABSENT |
|---|---|---|---|---|
| Dennis Mehr | ____ | ____ | ____ | ____ |
| Cheyne McDonald | ____ | ____ | ____ | ____ |
| Jenny Johnson | ____ | ____ | ____ | ____ |
| Miriah Elliott | ____ | ____ | ____ | ____ |
| Ron Densley | ____ | ____ | ____ | ____ |

_____
Chris Hart, Mayor

ATTEST:

_____
Kari Jimenez
City Recorder

UTAH DEPARTMENT of ENVIRONMENTAL QUALITY
WATER QUALITY

# Municipal Wastewater Planning Program (MWPP) Annual Report

# 2017

*Please Select the Appropriate Facility from the Dropdown Menu*

| | |
|---|---|
| Facility Name: | IVINS |
| Facility Class and Grade | COLLECTION II - - |
| Owner Name: | IVINS |
| Name and Title of Contact Person: | CHARLES R GILLETTE<br>PUBLIC WORKS DIR./CITY ENG. |
| Phone: | 435-634-0689 |
| E-mail: | CGILLETTE@IVINS.COM |

SUBMIT BY APRIL 16, 2018

Electronic Submittal:
https://deq.utah.gov/ProgramsServices/services/submissions/index.htm

NOTE: This questionnaire has been compiled for your benefit to assist you in evaluating the technical and financial needs of your wastewater systems. If you received financial assistance from the Water Quality Board, annual submittal of this report is a condition of that assistance. Please answer questions as accurately as possible to give you the best evaluation of your facility. If you need assistance please call Beth or Judy, Utah Division of Water Quality: (801) 536-4300.

**Definitions**

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

[1]**Asset Management** – Any combination of management tools applied to physical assets of the sewer system with the objective of providing the required level of service in the most cost-effective manner. It incorporates asset lifecycle management tools, including depreciation, with the accountant's cost allocation process.

[2]**Capital Facility Plan** – An engineering report detailing the planning procedures including a comprehensive analysis to establish the need, scope, basis, viability and implementation schedule of proposed sewer system projects.

[3]**Capital Improvements** - Addition of a permanent structural change or the restoration of a property that renews or improves its value, increases its useful life, or adapts it to new uses.

[4]**Capital Improvement Reserve Fund** - A fund or account established for capital improvement projects.

[5]**Debt Service** – A payment of interest and principal, usually due annually, made in repayment of a loan or bond obligation.

[6]**Debt Service Reserve Fund** - A fund or account established for use in making up deficiencies in bond repayment funds.

[7]**Equivalent Residential Connection (ERC)** - A unit of wastewater that incurs the same cost for operations and maintenance as the average volume of domestic waste discharged from a single family residence in the sewer system service area

[8]**Impact Fee** – A fee established by ordinance to be imposed on new development for payment of capital costs associated with providing public services to the new development.

[9]**Operation and Maintenance Costs** - The total annual cost for management, operations and maintenance of sewer systems including labor and benefits, general and administrative overhead, materials, supplies, utilities, fuel, tools, etc. These costs do not include capital improvements costs or debt service. Repair and replacement costs for fixed assets may be included.

[10]**Plan of Operations** – A plan summarizing the operational and financial requirements that the sewer system must meet to achieve its goals and purpose. The minimum requirements are established I UAC R137-3-1.8

[11]**Rate Study** – A study that establishes the user charge(s) of a sewer system based on the required level of service and its cost.

[12]**Repair and Replacement Costs** - The annual cost to renew or replace fixed assets of the sewer system. Fixed assets are generally land, buildings and equipment. These are often major major costs not included in operations and maintenance budgets.

[13]**Repair and Replacement Sinking Fund** - A fund or account established for renewal or replacement of fixed assets.

[14]**Sewer Revenues** - Income from user charges and other fees or taxes collected to pay the cost of sewer systems.

[15]**Sewer System** - The collective of sewerage systems and treatment works operated by the public utility or sponsor.

[16]**User Charge** - A fee established by ordinance and used to pay the cost of sewer systems. Different fees may be established for one or more classes of users. For purposes of this survey, user charge means the annual average fee charges per sewer connection.

**Instructions**

Save this file to your local computer. The digital MWPP form is built in Microsoft excel. Please contact Beth or Judy if you cannot find your facility name or having trouble downloading your digital MWPP form.
You will need to fill all the yellow boxes with the appropriate information. Several of the questions are Yes/No questions that require you to select the yellow cell and then click the small arrow drop down button to be able to select the appropriate answer. You may move through the worksheet by simply pressing tab to move from box to box. Hitting Enter within the form may cause you to skip over questions. Please be sure to verify that all yellow boxes have been filled with the appropriate information. Begin filling out the form by selecting the name of your facility from the dropdown menu. Please be sure to select the correct facility from the dropdown menu. DWQ will only accept one form from each facility. Once you have entered all the appropriate information in all the yellow boxes the MWPP form is complete and you are ready to submit the completed MWPP package back to DWQ. Please be sure to save your completed form. Please do not submit your form until you have the date the MWPP was presented to your Board or Council completed. You may not submit a second form with the date at a later time. DWQ will only accept one form from each facility. If you experience any trouble or have any questions please contact DWQ Engineering Section Staff.

# Financial Evaluation Section

Form completed by:
CHARLES R GILLETTE
May Receive Continuing Education /units (CEUs)

*Complete the following table:* **IVINS**

| Part I: OPERATION AND MAINTENANCE | |
|---|---|
| **Question** | **Answer** |
| | Amount |
| What was the User Charge[16] for 2017? | $ 22.11 |
| | Yes/No |
| Are property taxes or other assessments applied to the sewer systems[15]? | No |
| Are sewer revenues[14] sufficient to cover operations & maintenance costs[9], and repair & replacement costs[12] (OM&R) ***at this time*** ? | Yes |
| Are projected sewer revenues sufficient to cover OM&R costs for the ***next five years*** ? | Yes |
| Does the sewer system have sufficient staff to provide proper OM&R? | Yes |
| Has a repair and replacement sinking fund[13] been established for the sewer system? | No |
| Is the repair & replacement sinking fund sufficient to meet anticipated needs? | No |

*Complete the following table:* **IVINS**

| Part II: CAPITAL IMPROVEMENTS | |
|---|---|
| **Question** | **Answer** |
| | YES/NO |
| Are sewer revenues sufficient to cover all costs of current capital improvements[3] projects? | Yes |
| Has a Capital Improvements Reserve Fund[4] been established to provide for anticipated capital improvement projects? | Yes |
| Are projected Capital Improvements Reserve Funds sufficient for the ***next five years*** ? | Yes |
| Are projected Capital Improvements Reserve Funds sufficient for the ***next ten years*** ? | No |
| Are projected Capital Improvements Reserve Funds sufficient for the ***next twenty years*** ? | No |

*Complete the following table:* **IVINS**

| Part III: GENERAL QUESTIONS | |
|---|---|
| **Question** | **Answer** |
| | YES/NO |
| Are sewer revenues maintained in a dedicated purpose enterprise/district account? | Yes |

| | |
|---|---|
| Are you collecting 95% or more of your anticipated sewer revenue? | Yes |
| Are Debt Service Reserve Fund[6] requirements being met? | Yes |
| Do you have a written emergency response plan for sewer systems? | Yes |
| Do you have a written safety plan for sewer systems? | Yes |

*Complete the following table:* **IVINS**

| Part IV: FISCAL SUSTAINABILITY REVIEW | |
|---|---|
| **Question** | **Answer** |
| | YES/NO |
| Have you completed a Rate Study[11] within the last five years? | No |
| Do you charge Impact fees[8]? | Yes |
| Have you completed an Impact Fee Study in accordance with UCA 11-36a-3 within the last five years? | Yes |
| Do you maintain a Plan of Operations[10]? | Yes |
| Have you updated your Capital Facility Plan[2] within the last five years? | Yes |
| Do you use an Asset Management[1] system for your sewer systems? | Yes |
| Do you know the total replacement cost of your sewer system capital assets? | Yes |
| Do you fund sewer system capital improvements annually with sewer revenues at 2% or more of the total replacement cost? | No |
| Please enter the date that this MWPP package was presented to your Board or Council | 4/5/2018 |

*Provide your best estimate of the following costs:*

| Part IV: PROJECTED NEEDS | | | | |
|---|---|---|---|---|
| | 2018 | 2019 | 2020 | 2021 |
| Cost of projected capital improvements | $100,000 | $520,000 | $50,000 | $50,000 |
| | 2022 | 2023 | | |
| | $110,000 | $1,456,000 | | |

**FINANCIAL EVALUATION SECTION END**

# Collection System Section

Form completed by:
CHARLES R GILLETTE
May Receive Continuing Education /units (CEUs)

*Complete the following table:* **IVINS**

| Part I: SYSTEM AGE | |
|---|---|
| **Question** | **Answer** |
| What year was your collection system first constructed (approximately)? | 1990 |
| What year was the the oldest part of your collection system constructed, replaced, or renewed? | 1990 |

*Complete the following table:* **IVINS**

| Part II: DISCHARGES | |
|---|---|
| **Question** | **Answer** |
| | Number |
| How many days last year was there a sewage bypass, overflow or basement flooding in the system due to rain or snowmelt? | 0 |
| How many days last year was there a sewage bypass, overflow or basement flooding due to equipment failure (except plugged laterals)? | 0 |

*The Utah Sewer Management Program defines two classes of sanitary sewer overflows (SSOs):*

***Class 1** - a Significant SSO means a SSO or backup that is not caused by a private lateral*
*(a) affects more than five private structures;*
*(b) affects one or more public, commercial or industrial structure(s);*
*(c) may result in a public health risk to the general public;*
*(d) has a spill volume that exceeds 5,000 gallons, excluding those in single private structures; or*
*(e) discharges to Waters of the state.*

***Class 2** -a Non-Significant SSO means a SSO or backup that is not caused by a private lateral*

Below include the number of SSOs that occurred in year: *2017*

| | |
|---|---|
| Number of Class 1 SSOs in Calendar year | 0 |
| Number of Class 2 SSOs in Calendar year | 0 |

**Please indicate what caused the SSO(s) in the previous question.**

**N/A**

**Please specify whether the SSOs were caused by contract or tributary community, etc.**

**N/A**

*Complete the following table:* **IVINS**

| Part III: NEW DEVELOPMENT | |
|---|---|
| **Question** | **Answer** |
| | Yes/No |
| Did an industry or other development enter the community or expand production in the past two years, such that flow or wastewater loadings to the sewerage system increased by 10% or more? | No |
| Are new developments (industrial, commercial, or residential) anticipated in the next 2 - 3 years that will increase flow or $BOD_5$ loadings to the sewerage system by 25% or more? | No |
| Number of new residential sewer connections added in the last year | 127 |
| Number of new commercial/industrial connections in the last year | 1 |
| Equivalent residential connections[7] served | 3,698 |

*Complete the following table:* **IVINS**

| Part IV: OPERATOR CERTIFICATION | |
|---|---|
| **Question** | **Answer** |
| How many collection system operators do you employ? | 7 |
| Approximate population served | 8,400 |

*State of Utah Administrative Rules requires all public system operators considered to be in Direct-Responsible-Charge (DRC) to be appropriately certified at lease at the Facility's Grade.*

What is the current grade of the collection system DRC operator(s)?

| | |
|---|---|
| Shiloh Pentz | IV |
| Chuck Gillette | IV |
| [Names] | [Grade] |
| [Names] | [Grade] |
| [Names] | [Grade] |
| [Names] | [Grade] |

Facility Class & Grade

| | |
|---|---|
| COLLECTION | II |
| - | - |

List all other collection operators in your system by their certification.
*Note: Enter all names even if the list isn't visible within the cell.*

| | |
|---|---|
| Not Certified | Brycson Brackett |
| Small Lagoons | [Names] |
| Collection I | [Names] |

| | |
|---|---|
| Collection II | bler, Page Bowler, Justin I |
| Collection III | [Names] |
| Collection IV | att Cooper, Tom Jorgense |

| | Yes/No |
|---|---|
| Is/are your DRC operator(s) currently certified at the appropriate grade for this facility? | Yes |

*Complete the following table:* **IVINS**

| Part V: FACILITY MAINTENANCE | |
|---|---|
| **Question** | **Answer** |
| | Yes/No |
| Have you implemented a preventative maintenance program for your collection system? | Yes |
| Have you updated the collection system operations and maintenance manual within the past 5 years? | No |

*Complete the following table:* **IVINS**

| Part VI: SSMP EVALUATION | |
|---|---|
| **Question** | **Answer** |
| | Yes/No |
| Has your system completed a Sewer System Management Plan (SSMP)? | Yes |
| Has the completed SSMP been public noticed? | Yes |
| Date of Public Notice | 1/21/16 |
| Has the SSMP been adopted by the permittee's governing body at a public meeting? | Yes |
| During the annual assessment of the SSMP, were any adjustments needed based on the performance of the plan? | No |
| If yes, what components of the plan were changed (i.e. line cleaning, CCTV inspections, manhole inspections and/or SSO events)? | |
| **N/A** | |

| | Yes/No |
|---|---|
| During 2017, was any part of the SSMP audited as part of the five year audit? | No |
| If yes, what part of the SSMP was audited and were changes made to the SSMP as a result of the audit? | |
| N/A | |

| | Yes/No |
|---|---|
| Have you completed a System Evaluation and Capacity Assurance Plan (SECAP) as defined by the Utah Sewer Management Program? | Yes |

*Complete the following table:*

**This section should be completed with the system operators.**

**IVINS**

| Part VII: NARRATIVE EVALUATION |
|---|
| **Question** |
| Describe the physical condition of the sewerage system: (lift stations, etc. included) |
| **Overall condition is in fair to good condition, with no major deficiencies. No part of the system is older than 28 years.** |
| What sewerage system capital improvements[3] does the utility need to implement in the next 10 years? |
| **Identified in the 2016 Sewer Master Plan** |
| What sewerage system problems, other than plugging, have you had over the last year? |
| **Typical odor problems.** |
| Is your utility currently preparing or updating its capital facility plan[2]? |
| **The last one was completed in 2016 and the next one is scheduled for 2021.** |

| | **Select Answer** |
|---|---|
| Does the municipality/district pay for the continuing education expenses of operators? | 100% covered |

| |
|---|
| Is there a written policy regarding continuing education and training for wastewater operators? |
| **Yes** |

Any additional comments?

COLLECTION SYSTEM SECTION END

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