

**ANNUAL REPORT**

Of

Company Name:   
190 E. Mesquite Blvd., Unit A

Mailing Address: Mesquite NV  
89027

Docket No.:   
For the Year Ended:

**RECEIVED  
BY EMAIL**  
August 3, 2021, 11:06 AM  
**ARIZONA CORPORATION COMMISSION  
UTILITIES DIVISION**

**WASTEWATER UTILITY**

To

Arizona Corporation Commission

**Due on April 15th**

Email: Util-Compliance@azcc.gov, mail or deliver the completed Annual Report to:  
Arizona Corporation Commission  
Compliance Section - Utilities Division  
1200 West Washington Street  
Phoenix, Arizona 85007

Application Type:   
Application Date:

ARIZONA CORPORATION COMMISSION  
WASTEWATER UTILITY ANNUAL REPORT  
Sunrise Utilities, L.L.C.

A Class  Utility

For the Calendar Year Ended: 12/31/20

Primary Address:   
City:  State:  Zip Code:

Telephone Number:

Date of Original Organization of Utility:

Person to whom correspondence should be addressed concerning this report:

Name:   
Telephone No. :   
Address:   
City:  State:  Zip Code:   
Email:

Name:   
Telephone No. :   
Address:   
City:  State:  Zip Code:   
Email:

Name:   
Telephone No. :   
Address:   
City:  State:  Zip Code:   
Email:

Name:   
Telephone No. :   
Address:   
City:  State:  Zip Code:   
Email:

Name:   
Telephone No. :   
Address:   
City:  State:  Zip Code:   
Email:

Ownership:

Counties Served:

<b>Important changes during the year</b>
--

No	For those companies not subject to the affiliated interest rules, has there been a change in ownership or direct control during the year?
	If yes, please provide specific details in the box below.

No	Has the company been notified by any other regulatory authorities during the year, that they are out of compliance?
	If yes, please provide specific details in the box below.

Utility Plant in Service (Wastewater)							
Account No.	Description	Beginning Year Original Cost	Current Year Additions	Current Year Retirements	Adjusted Original Cost	Accumulated Depreciation	OCLD (OC less AD)
351	Organization	\$0	\$0	\$0	\$0	\$0	\$0
352	Franchises	\$0	\$0	\$0	0	\$0	0
353	Land and Land Rights	\$0	\$0	\$0	0	\$0	0
354	Structures and Improvements	\$0	\$0	\$0	0	\$0	0
355	Power Generation Equipment	\$0	\$0	\$0	0	\$0	0
360	Collections Wastewater - Force	\$0	\$0	\$0	0	\$0	0
361	Collections Wastewater - Gravity	\$0	\$0	\$0	0	\$0	0
362	Special Collecting Structures	\$0	\$0	\$0	0	\$0	0
363	Services to Customers	\$0	\$0	\$0	0	\$0	0
364	Flow Measuring Devices	\$0	\$0	\$0	0	\$0	0
365	Flow Measuring Installations	\$0	\$0	\$0	0	\$0	0
366	Reuse Services	\$0	\$0	\$0	0	\$0	0
367	Reuse Meters & Meter Installations	\$0	\$0	\$0	0	\$0	0
370	Receiving Wells	\$0	\$0	\$0	0	\$0	0
371	Pumping Equipment	\$0	\$0	\$0	0	\$0	0
374	Reuse Distribution Reservoirs	\$0	\$0	\$0	0	\$0	0
375	Reuse Trans. And Distr. Equipment	\$0	\$0	\$0	0	\$0	0
380	Treatment and Disposal Equipment	\$0	\$0	\$0	0	\$0	0
381	Plant Sewers	\$0	\$0	\$0	0	\$0	0
382	Outfall Sewer Lines	\$0	\$0	\$0	0	\$0	0
389	Other Plant and Misc. Equipment	\$0	\$0	\$0	0	\$0	0
390	Office Furniture and Equipment	\$0	\$0	\$0	0	\$0	0
390.1	Computer & Software	\$0	\$0	\$0	0	\$0	0
391	Transportation Equipment	\$0	\$0	\$0	0	\$0	0
392	Stores Equipment	\$0	\$0	\$0	0	\$0	0
393	Tools, Shop and Garage Equipment	\$0	\$0	\$0	0	\$0	0
394	Laboratory Equipment	\$0	\$0	\$0	0	\$0	0
395	Power Operated Equipment	\$0	\$0	\$0	0	\$0	0
396	Communication Equipment	\$0	\$0	\$0	0	\$0	0
397	Miscellaneous Equipment	\$0	\$0	\$0	0	\$0	0
398	Other Tangible Plant	\$0	\$0	\$0	0	\$0	0
	<b>Totals</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Instructions:** Fill out the Grey Cells with the relevant information. Input 0 or none if there is nothing recorded in that account or there is no applicable information to report.

Sunrise Utilities, L.L.C.  
 Annual Report  
 Depreciation Expense for the Current Year (Wastewater)  
 12/31/20

Depreciation Expense for the Current Year (Wastewater)								
Account No.	Description	Beginning Year Original Cost	Current Year Additions	Current Year Retirements	Adjusted Original Cost	Fully Depreciated/Non-depreciable Plant	Depreciation Percentages	Depreciation Expense
351	Organization	\$0	\$0	\$0	\$0	\$0		\$0
352	Franchises	0	0	0	0	\$0		0
353	Land and Land Rights	0	0	0	0	\$0		0
354	Structures and Improvements	0	0	0	0	\$0		0
355	Power Generation Equipment	0	0	0	0	\$0		0
360	Collections Wastewater - Force	0	0	0	0	\$0		0
361	Collections Wastewater - Gravity	0	0	0	0	\$0		0
362	Special Collecting Structures	0	0	0	0	\$0		0
363	Services to Customers	0	0	0	0	\$0		0
364	Flow Measuring Devices	0	0	0	0	\$0		0
365	Flow Measuring Installations	0	0	0	0	\$0		0
366	Reuse Services	0	0	0	0	\$0		0
367	Reuse Meters & Meter Installations	0	0	0	0	\$0		0
370	Receiving Wells	0	0	0	0	\$0		0
371	Pumping Equipment	0	0	0	0	\$0		0
374	Reuse Distribution Reservoirs	0	0	0	0	\$0		0
375	Reuse Trans. And Distr. Equipment	0	0	0	0	\$0		0
380	Treatment and Disposal Equipment	0	0	0	0	\$0		0
381	Plant Sewers	0	0	0	0	\$0		0
382	Outfall Sewer Lines	0	0	0	0	\$0		0
389	Other Plant and Misc. Equipment	0	0	0	0	\$0		0
390	Office Furniture and Equipment	0	0	0	0	\$0		0
390.1	Computer & Software	0	0	0	0	\$0		0
391	Transportation Equipment	0	0	0	0	\$0		0
392	Stores Equipment	0	0	0	0	\$0		0
393	Tools, Shop and Garage Equipment	0	0	0	0	\$0		0
394	Laboratory Equipment	0	0	0	0	\$0		0
395	Power Operated Equipment	0	0	0	0	\$0		0
396	Communication Equipment	0	0	0	0	\$0		0
397	Miscellaneous Equipment	0	0	0	0	\$0		0
398	Other Tangible Plant	0	0	0	0	\$0		0
	<b>Subtotal</b>	\$0	\$0	\$0	\$0	\$0		\$0

Contribution(s) in Aid of Construction (Gross)  
 Less: Non Amortizable Contribution(s)  
 Fully Amortized Contribution(s)  
 Amortizable Contribution(s)  
 Times: Proposed Amortization Rate  
**Amortization of CIAC**

**\$0**

Less: Amortization of CIAC

**DEPRECIATION EXPENSE**

**Instructions:** Fill out the Grey Cells with the relevant information. Input 0 or none if there is nothing recorded in that account or there is no applicable information to report.

Sunrise Utilities, L.L.C.  
Annual Report  
Balance Sheet Assets  
12/31/20

<b>Balance Sheet Assets</b>				
	<b>Assets</b>		Balance at Beginning of Year (2020)	Balance at End of Year (2020)
<b>Account No.</b>	<b>Current and Accrued Assets</b>			
131	Cash		\$0	\$0
132	Special Deposits		\$0	\$0
135	Temporary Cash Investments		\$0	\$0
141	Customer Accounts Receivable		\$0	\$0
142	Other Accounts Receivable		\$0	\$0
143	Accumulated Provision for Uncollectable Accounts		\$0	\$0
146	Notes Receivable from Associated Companies		\$0	\$0
151	Plant Material and Supplies		\$0	\$0
162	Prepayments		\$0	\$0
173	Accrued Utility Revenue		\$0	\$0
174	Miscellaneous Current and Accrued Assets		\$0	\$0
	<b>Total Current and Accrued Assets</b>		<b>\$0</b>	<b>\$0</b>
	<b>Deferred Debits</b>			
186.1	Deferred Rate Case Expense		\$0	\$0
	<b>Total Deferred Debits</b>		<b>\$0</b>	<b>\$0</b>
	<b>Fixed Assets</b>			
101	Utility Plant in Service*		\$0	\$0
103	Property Held for Future Use		\$0	\$0
105	Construction Work in Progress		\$0	\$0
108	Accumulated Depreciation (enter as negative)*		\$0	0
121	Non-Utility Property		\$0	\$0
122	Accumulated Depreciation - Non Utility		\$0	\$0
	<b>Total Fixed Assets</b>		<b>\$0</b>	<b>\$0</b>
	<b>Total Assets</b>		<b>\$0</b>	<b>\$0</b>

**Instructions:** Fill out the Grey Cells with the relevant information. Input 0 or none if there is nothing recorded in that account or there is no applicable information to report.

Note these items feed automatically from the adjusted end of year balance from AR4.

Sunrise Utilities, L.L.C.  
 Annual Report  
 Balance Sheet Liabilities and Owners Equity

<b>Balance Sheet Liabilities and Owners Equity</b>				
	<b>Liabilities</b>		Balance at Beginning of Year (2020)	Balance at End of Year (2020)
<b>Account No.</b>	<b>Current Liabilities</b>			
231	Accounts Payable		\$0	\$0
232	Notes Payable (Current Portion)		\$0	\$0
234	Notes Payable to Associated Companies		\$0	\$0
235	Customer Deposits		\$0	\$0
236	Accrued Taxes		\$0	\$0
237	Accrued Interest		\$0	\$0
241	Miscellaneous Current and Accrued Liabilities		\$0	\$0
253	Other Deferred Credits		\$0	\$0
	<b>Total Current Liabilities</b>		<b>\$0</b>	<b>\$0</b>
	<b>Long Term Debt</b>			
224	Long Term Debt (Notes and Bonds)		\$0	\$0
	<b>Total Long Term Debt</b>		<b>\$0</b>	<b>\$0</b>
	<b>Deferred Credits</b>			
252	Advances in Aid of Construction		\$0	\$0
255	Accumulated Deferred Investment Tax Credits		\$0	\$0
271	Contributions in Aid of Construction		\$0	\$0
272	Less: Amortization of Contributions		\$0	\$0
281	Accumulated Deferred Income Tax		\$0	\$0
	<b>Total Deferred Credits</b>		<b>\$0</b>	<b>\$0</b>
	<b>Total Liabilities</b>		<b>\$0</b>	<b>\$0</b>
	<b>Capital Accounts</b>			
201	Common Stock Issued		\$0	\$0
211	Other Paid-In Capital		\$0	\$0
215	Retained Earnings		\$0	\$0
218	Proprietary Capital (Sole Props and Partnerships)		\$0	\$0
	<b>Total Capital</b>		<b>\$0</b>	<b>\$0</b>
	<b>Total Liabilities and Capital</b>		<b>\$0</b>	<b>\$0</b>

**Instructions:** Fill out the Grey Cells with the relevent information. Input 0 or none if there is nothing recorded in that account or there is no applicable information to report.

**Note: Total liabilities and Capital must match total assets for the beginning and end of the year!**

<b>Wastewater Comparative Income Statement</b>			
Account No.	Calendar Year	Current Year 01/01/2020 -	Last Year 01/01/2019 -
	<b>Operating Revenue</b>		
521	Flat Rate Revenues	\$0	\$0
522	Measured Revenues	\$0	\$0
534	Rents from Wastewater Property	\$0	\$0
536	Other Wastewater Revenues	\$0	\$0
	<b>Total Revenues</b>	<b>\$0</b>	<b>\$0</b>
	<b>Operating Expenses</b>		
701	Salaries and Wages	\$0	\$0
704	Employee Pensions and Benefits	\$0	\$0
710	Purchased Wastewater Treatment	\$0	\$0
711	Sludge Removal Expense	\$0	\$0
715	Purchased Power	\$0	\$0
716	Fuel for Power Production	\$0	\$0
718	Chemicals	\$0	\$0
720	Materials and Supplies	\$0	\$0
720.1	Repairs and Maintenance	\$0	\$0
720.2	Office Supplies and Expense	\$0	\$0
721	Office Expense	\$0	\$0
731	Contractual Services -Engineering	\$0	\$0
732	Contractual Services - Accounting	\$0	\$0
733	Contractual Services - Legal	\$0	\$0
734	Contractual Services - Management Fees	\$0	\$0
735	Contractual Services - Testing	\$0	\$0
736	Contractual Services - Other	\$0	\$0
740	Rents - Building	\$0	\$0
742	Rents - Equipment	\$0	\$0
750	Transportation Expenses	\$0	\$0
757	Insurance - General Liability	\$0	\$0
758	Insurance - Worker's Compensation	\$0	\$0
759	Insurance - Other	\$0	\$0
760	Advertising Expense	\$0	\$0
766	Regulatory Commission Expense - Rate Case	\$0	\$0
767	Regulatory Commission Expense - Other	\$0	\$0
770	Bad Debt Expense	\$0	\$0
775	Miscellaneous Expense	\$0	\$0
403	Depreciation Expense (From Schedule AR4)		\$0
408	Taxes Other Than Income	\$0	\$0
408.11	Property Taxes	\$0	\$0
408.12	Payroll Taxes	\$0	\$0
409	Income Taxes	\$0	\$0
	<b>Total Operating Expenses</b>	<b>\$0</b>	<b>\$0</b>
	<b>Operating Income / (Loss)</b>	<b>\$0</b>	<b>\$0</b>
	<b>Other Income / (Expense)</b>		
414	Gain (Loss) on Dispositions	\$0	\$0
419	Interest and Dividend Income	\$0	\$0
421	Non-Utility Income	\$0	\$0
426	Miscellaneous Non-Utility (Expense)	\$0	\$0
427	Interest (Expense)	\$0	\$0
	<b>Total Other Income / (Expense)</b>	<b>\$0</b>	<b>\$0</b>
	<b>Net Income / (Loss)</b>	<b>\$0</b>	<b>\$0</b>

**Instructions:** Fill out the Grey Cells with the relevant information. Input 0 or none if there is nothing recorded in that account or there is no applicable information to report.



**Full time equivalent employees**

	Direct Company	Allocated	Outside service	Total
President	\$0	0.0	0.0	0.0
Vice-president	0.0	0.0	0.0	0.0
Manager	0.0	0.0	0.0	0.0
Engineering Staff	0.0	0.0	0.0	0.0
System Operator(s)	0.0	0.0	0.0	0.0
Customer Service	0.0	0.0	0.0	0.0
Accounting	0.0	0.0	0.0	0.0
Business Office	0.0	0.0	0.0	0.0
Rates Department	0.0	0.0	0.0	0.0
Administrative Staff	0.0	0.0	0.0	0.0
Other	0.0	0.0	0.0	0.0
<b>Total</b>	0.0	0.0	0.0	0.0

**Instructions:** Fill out the Grey Cells with the relevant information. Input 0 or none if there is nothing recorded in that account or there is no applicable information to report. A full-time employee is based on 2080 total hours per year. Please calculate partial employees using 2080 hours.

<b>Supplemental Financial Data (Long-Term Debt)</b>				
	Loan #1	Loan #2	Loan #3	Loan #4
Date Issued	0.0	0.0	0.0	0.0
Source of Loan	0.0	0.0	0.0	0.0
ACC Decision No.	0.0	0.0	0.0	0.0
Reason for Loan	0.0	0.0	0.0	0.0
Dollar Amt. Issued	0.0	0.0	0.0	0.0
Amount Outstanding	0.0	0.0	0.0	0.0
Date of Maturity	0.0	0.0	0.0	0.0
Interest Rate	0.0	0.0	0.0	0.0
Current Year Interest	0.0	0.0	0.0	0.0
Current Year Principal	0.0	0.0	0.0	0.0

Meter Deposit Balance at Test Year End:	0.0
---	-----

Meter Deposits Refunded During the Test Year:	0.0
---	-----

***List all bonds, notes, loans, and other types of indebtedness in which the proceeds were used in the provision of public utility service. Indebtedness incurred for personal uses by the owner of the utility should not be listed. Input 0 or none if there is nothing to report for that cell.***

<b>Wastewater Utility Plant Description</b>
---

<u>Name of System:</u>	
<u>Wastewater Inventory Number (if applicable):</u>	
<u>Type of Treatment</u>	
<u>Design Capacity of Plant (Gallons per day)</u>	

<b>LIFT STATION FACILITIES</b>					
Location	Quantity of Pumps	Horsepower Per Pump	Rated Capacity Per Pump (GPM)	Wet Well Capacity (gals)	Year Constructed

<b>FORCE MAINS</b>		
Size	Material	Length (Feet)

<b>MANHOLES</b>	
Type	Quantity
Standard	
Drop	

<b>CLEANOUTS</b>
Quantity

**Note:** If you are filing for more than one system, please provide separate sheets for each system.

**Instructions:** Fill out the Grey Cells with the relevant information. Input 0 or none if there is nothing recorded in that account or there is no applicable information to report. Copy and paste this sheet as many times as is necessary.

Wastewater Utility Plant Description (Continued)					
GRAVITY MAINS			SERVICES/LATERALS		
Sizes (inches)	Material	Length (feet)	Size (inches)	Material	Quantity

For the following five items, list the utility owned assets in each category for each system.

<b>SOLIDS PROCESSING AND HANDLING FACILITIES</b>	
<b>DISINFECTION EQUIPMENT</b> (Chlorinator, Ultra-Violet, Etc.)	
<b>FILTRATION EQUIPMENT</b> (Rapid Sand, Slow Sand, Activated Carbon, Etc.)	
<b>STRUCTURES</b> (Buildings, Fences, Etc.)	
<b>Other</b> (Laboratory Equipment, Tools, Vehicles, Standby, Power Generators, Etc.)	

**Note:** If you are filing for more than one system, please provide separate sheets for each system.

**Instructions:** Fill out the Grey Cells with the relevant information. Input 0 or none if there is nothing recorded in that account or there is no applicable information to report. Copy and paste this sheet as many times as is necessary.

Wastewater Flows					
Month	Number of Services	Total Monthly Sewage Flow (Gallons)	Sewage Flow on Peak Day	Purchased Power Expense <sup>1</sup>	Purchased Power (kWh) <sup>2</sup>
January					
February					
March					
April					
May					
June					
July					
August					
September					
October					
November					
December					
	<b>Totals</b>	<b>0</b>	<b>0</b>	<b>\$0</b>	<b>0</b>

Provide the following information as applicable per wastewater system:

Method of Effluent Disposal	
Groundwater Permit Number	
ADEQ Aquifer Protection Permit ("APP") Number	
ADEQ Reuse Permit Number	
EPA NPDES Permil Number	
APP Effluent Treatment Requirement (Class)?	
Permitted Flow Rate	
Permitted Organic Capacity	
Hydraulic Capacity	
Type of Biological Treatment	

In the space below, list all violations within the past 12 months:

**Note:** If you are filing for more than one system, please provide separate sheets for each system.

<sup>1</sup> Enter the total purchased power costs for the power meters associated with this system.  
<sup>2</sup> Enter the total purchased kWh used by the power meters associated with this system.

**Instructions:** Fill out the Grey Cells with the relevent information. Input 0 or none if there is nothing recorded in that account or there is no applicable information to report.

**Other Wastewater System Information**

**Provide a calculation used to determine the value of one wastewater equivalent residential connection (ERC).**

Use one of the following methods:

- (a) If actual flow data are available from the preceding 12 months, divide the total annual single family residence (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.
- (b) If no historical flow data are available, use:  
 $ERC = ( \text{Total SFR gallons treated (Omit 000)} / 365 \text{ days} / 280 \text{ gallons per day} )$

For wastewater only utilities:

Subtract all general use and other non residential customer gallons from the total gallons treated. Divide the remainder (SFR customers) by 365 days to reveal single family residence customer gallons per day.

**NOTE:** Total gallons treated includes both treated and purchased treatment.

ERC   
Method used:

What is the present system connection capacity (in ERCs \*) using existing lines?

What is the future system connection capacity (in ERCs \*) upon service area buildout?

Describe any plans and estimated completion dates for any enlargements or improvements of this system.

If the utility uses reuse as a means of effluent disposal, attach a list of the reuse end users and the amount of reuse provided to each, if known.

If the utility does not engage in reuse, has a reuse feasibility study been completed?

If so, when?

Sunrise Utilities, L.L.C.  
 Annual Report  
 Utility Shutoffs / Disconnects  
 12/31/20

Utility Shutoffs / Disconnects	
Name of System:	0
Wastewater Inventory Number (if applicable):	0

Month	Termination without Notice R14-2-609.B	Termination with Notice R14-2-609.C	Other
January			
February			
March			
April			
May			
June			
July			
August			
September			
October			
November			
December			
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>

**Other (description):**

**Instructions:** Fill out the Grey Cells with the relevent information. Input 0 or none if there is nothing recorded in that account or there is no applicable information to report.

Sunrise Utilities, L.L.C.  
Annual Report  
Property Taxes  
12/31/20

**Property Taxes**

Amount of actual property taxes paid during Calendar Year 2020 was

\$0

If no property taxes paid, explain why.

No real estate owned

**Instructions:** Fill out the Grey Cells with the relevant information. Input 0 or none if there is nothing recorded in that account or there is no applicable information to report.



Verification and Sworn Statement (Taxes)

Verification: State of Arizona I, the undersigned of the  
(state name)

County of (county name): Mohave  
Name (owner or official) title: David Rall-Manager  
Company name: Sunrise Utilities, L.L.C.

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION.

FOR THE YEAR ENDING: 12/31/20

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

Sworn Statement:

[Empty lines for Sworn Statement]

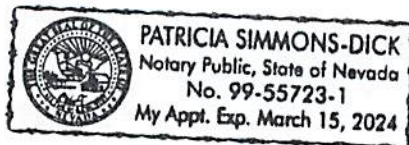
David Rall  
signature of owner/official

702-813-1093  
telephone no.

SUBSCRIBED AND SWORN TO BEFORE ME A NOTARY PUBLIC  
IN AND FOR THE COUNTY

THIS 02 DAY OF Clark  
Aug. 2021  
(month) and (year)

MY COMMISSION EXPIRES 03/15/2024  
(date)



[Signature]  
(signature of notary public)

Verification and Sworn Statement

Verification:

State of Arizona I, the undersigned of the  
(state name)

County of (county name): Mohave  
Name (owner or official) title: David Rall-Manager  
Company name: Sunrise Utilities, L.L.C.

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION.

FOR THE YEAR ENDING: 12/31/20

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

Sworn Statement: IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING THE CALENDAR YEAR WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

\$0

(The amount in the box above includes

\$0 in sales taxes

billed or collected)

signature of owner/official

702-913-1093

telephone no.

SUBSCRIBED AND SWORN TO BEFORE ME A NOTARY PUBLIC  
IN AND FOR THE COUNTY

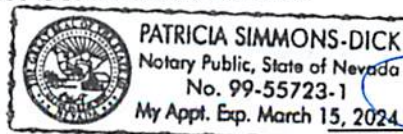
THIS 02

DAY OF

Clark  
(county name)  
Aug. 2021  
(month) and (year)

MY COMMISSION EXPIRES

03/15/24  
(date)



(signature of notary public)

**Verification and Sworn Statement (Residential Revenue)**

**Verification:**

State of Arizona I, the undersigned of the  
(state name)

County of (county name): Mohave  
Name (owner or official) title: David Rall-Manager  
Company name: Sunrise Utilities, L.L.C.

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION.

FOR THE YEAR ENDING: 12/31/20

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

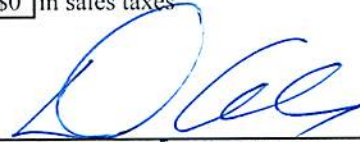
**Sworn Statement:** IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING THE CALENDAR YEAR WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

\$0

(The amount in the box above includes

\$0 in sales taxes  
billed or collected)



signature of owner/official

0 702-813-1093

telephone no.

SUBSCRIBED AND SWORN TO BEFORE ME A NOTARY PUBLIC  
IN AND FOR THE COUNTY

Clark  
(county name)

THIS

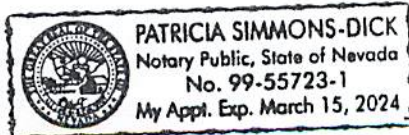
02

DAY OF

Aug. 2021  
(month) and (year)

MY COMMISSION EXPIRES

03/15/2024  
(date)



(signature of notary public)

for Income Tax Statement of Certification

Verification:

State of Arizona I, the undersigned of the  
(state name)

County of (county name): Mohave  
Name (owner or official) title: David Rall-Manager  
Company name: Sunrise Utilities, L.L.C.

FOR THE YEAR ENDING: 12/31/20

Sworn Statement: IN ACCORDANCE WITH THE REQUIREMENTS OF DECISION NO. 77084, BECAUSE THE UTILITY REQUIRES THE GROSS UP OF ADVANCES AND CONTRIBUTIONS, I HEREBY STATE THAT THE UTILITY A NET INCREASE IN CURRENT INCOME TAX EXPENSE OR A DECREASE IN DEFERRED TAX ASSET FOR A CARRY FORWARD ACCORDING TO GAAP IN AN AMOUNT EQUAL TO OR GREATER THAN THE AMOUNT OF THE REQUIRED GROSS UP PAID BY DEVELOPERS IN THE PERIOD COVERED BY THIS ANNUAL REPORT.



signature of owner/official

702-913-1093

telephone no.

SUBSCRIBED AND SWORN TO BEFORE ME A NOTARY PUBLIC  
IN AND FOR THE COUNTY

Clark

(county name)

THIS

02

DAY OF

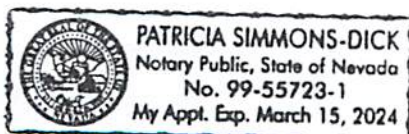
aug. 2021

(month) and (year)

MY COMMISSION EXPIRES

03/15/2024

(date)



(signature of notary public)