

ARIZONA CORPORATION COMMISSION

APPLICATION FOR AN EXTENSION CERTIFICATE OF CONVENIENCE AND NECESSITY

WATER AND/OR SEWER

General Information:

The attached forms have been prepared by the Utilities Division of the Arizona Corporation Commission to assist Applicants filing for an extension to the area covered by an existing Certificate of Convenience and Necessity. The information required in this application corresponds to the provisions of Arizona Revised Statutes Section 40-101 et. seq., and the Arizona Administrative Code R14-2-402.C and R14-2-602.B.

Use of the attached form is suggested unless an attorney uses a formal pleading format. The information requested in this application must be included within the pleading.

Attachment "A" is an example of a letter of transmittal addressed to the Utilities Division Docket Control Center. Please add information to the letter indicating the purpose and reasons for the application. This format should be used unless you are using a Company letterhead. Place this letter at the beginning of the application. Keep this instruction sheet for your information. Do not attach it to the application.

Instructions:

1. Complete the forms accurately and attach all required documents. This will expedite the processing of the application.
2. Complete all the items that apply to your utility. If an item requested does not apply, mark it "not applicable" (N/A). If you do not complete an item, your application could be delayed.
3. If the space provided is insufficient, put the information on a separate sheet of paper and clearly label the information.
4. If an item is to be filed at a later date, mark the item "to be late filed by" and give the date by which it will be filed.
5. Have the application notarized.

6. Submit an original and thirteen (13) copies of this application.
7. **NOTICING:** Notice of the application should be provided to all property owners in the proposed extension area, as well as to all customers and property owners in the existing certificated area. If there are fewer than 100 property owners in the extension area and/or customers in the existing area, notice should be mailed to them within 15 days after the application is filed. If there are more than 100 property owners in the extension area and/or customers in the existing area, notice should be given by mail or by publication at least once in a newspaper of general circulation in the service area within 15 days after the application is filed. The notice shall include the applicants intent to file the application along with the proposed date of filing and is to state that if the applicant is awarded, the applicant will be the exclusive provider to the service area. The notice shall include the type of service being provided, the Legal name, physical address, mailing (if different), and telephone number of the applicant along with the physical address and toll-free numbers of the Commission for both the Phoenix and Tucson Offices of the Consumer Service Section. Proof of notice should be filed with the Commission within 10 days after the notice was mailed or published. Hearings will always be held pursuant to law. The Hearing Officer will specify any additional notice in a Procedural Order. Attachment "C" is a form of notice to be provided in accordance with the above instruction.
8. If you plan to finance the plant through debt (long term loans) or equity (stock issuance), a separate financing application must be made with separate notice to the public. A requirement sheet for filing a financing application, and a form of notice, will be sent to you at your request. You may download a copy of the financing application at: <http://www.azcc.gov/divisions/utilities/forms/financeApp.pdf>

Filing:

When you have completed the application, mail or deliver it to:

Docket Control Center
Arizona Corporation Commission
1200 W. Washington Street
Phoenix, Arizona 85007

ARIZONA CORPORATION COMMISSION

**APPLICATION FOR AN
EXTENSION
CERTIFICATE OF CONVENIENCE AND NECESSITY**

WATER AND/OR SEWER

A. The legal name, mailing address and telephone number of the Applicant (Company) is:

B. If the applicant operates under a “d.b.a.” or under a name other than the Applicant (Company) name listed above, specify:

C. List the full name, mailing address and telephone number of the management contact:

D. List the full name, mailing address and telephone number of the attorney for the Applicant:

E. List the full name, mailing address and telephone number of the operator certified by the Arizona Department of Environmental Quality who is or will be working for the Applicant:

F. List the full name, mailing address and telephone number of the on-site manager of the utility:

G. The Applicant is a:

<input type="checkbox"/> Corporation: <input type="checkbox"/> "C", <input type="checkbox"/> "S", <input type="checkbox"/> Non-Profit <input type="checkbox"/> Arizona, <input type="checkbox"/> Foreign	<input type="checkbox"/> Partnership <input type="checkbox"/> Limited, <input type="checkbox"/> General <input type="checkbox"/> Arizona, <input type="checkbox"/> Foreign
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Limited Liability Company (LLC)
<input type="checkbox"/> Other (Specify)	

H. If Applicant is a corporation:

1. List full names, titles and mailing addresses of all Officers and Directors:

Officers

Directors

2. Attach a copy of the corporation's "Certificate of Good Standing" issued by the Corporation's Division of the Arizona Corporation Commission.
3. Attach a certified copy of the Articles of Incorporation.
4. Attach a certified copy of the corporation's By-Laws.
5. If a for-profit corporation, indicate the number of shares of stock authorized for issue:
6. If stock has been issued, indicate the number of shares issued and date of issue:

I. If the Applicant is a partnership:

1. List the full name and mailing address of the general partners:

2. List the full name, address and telephone number of the managing partners:

3. Attach a copy of the Partnership's Articles of Partnership.

- If the Applicant is a foreign limited partnership, provide a copy of the Partnership's "Certificate of Registration" filed with the Arizona Secretary of State.

J. If the Applicant is a Limited Liability Company:

1. List the full name and mailing address of all the Applicant's managers or, if management is reserved to the members, the Applicant's members:

2. Attach a copy of the Articles of Organization.

K. List the legal name and mailing address of each other utility in which the applicant has an ownership interest:

L. Provide a compliance status report from the Arizona Department of Environmental Quality (“ADEQ”), dated no more than 30 days of the CC&N extension application, for each water and wastewater systems as identified by a separate ADEQ Public Water & Wastewater System Identification number.

Attach a legal description of the requested service area, expressed in terms of **CADASTRAL** (quarter section description) or **Metes and Bounds** survey. References to parcels and docket numbers will not be accepted.

Attach a detailed map using the form provided as Attachment "B". Shade and outline the area requested. Also, indicate any other utility within the general area using different colors.

M. List the name of each county in which the requested extension area is located and a description of the area’s location in relation to the closest municipality, which shall be named:

N. Attach a complete description of the facilities proposed to be constructed, including a preliminary engineering report with specifications in sufficient detail to describe each water system and the principal components of each water system (e.g., source, storage, transmission lines, distribution lines, etc.) to allow verification of the estimated costs provided under R14-2-402 subsection (B)(5)(o) and verification that the requirements of the Commission and the Arizona Department of Environmental Quality can be met.

O. Provide the estimated total construction cost of the proposed offsite and onsite facilities, including documentation to support the estimates, and an explanation of how the construction will be financed, such as through debt, equity, advances in aid of construction, contributions in aid of construction, or a combination thereof.

- P. Explain the method of financing utility facilities. Refer to the instructions, item no. 7. (Use additional sheets if necessary):

Attach financial information in a format similar to Attachment "C". Include current assets and liabilities, an income statement, estimated revenue and expenses and the estimated value of the applicant's utility plant in service for the first five years following approval of the application.

- S. Provide a detailed description of the proposed construction timeline for facilities with estimated starting and completion dates and, if construction is to be phased, a description of each separate phase of construction.
- T. Provide a copy of any requests for service from persons who own land within the proposed extension area, which shall identify the applicant by name.
- U. Provide maps of the proposed extension area identifying:
1. The boundaries of the area, with the total acreage noted;
 2. The land ownership boundaries within the area, with the acreage of each separately owned parcel within the area noted;
 3. The owner of each parcel within the area;
 4. Any municipality corporate limits that overlap with or are within five miles of the area;
 5. The service area of any public service corporation, municipality, or district currently providing water or wastewater service within one mile of the area, with identification of the entity providing service and each type of service being provided;
 6. The location within the area of any known water service connections that are already being provided service by the applicant;
 7. The location of all proposed developments within the area;
 8. The proposed location of each water system and the principal components described in R14-2-402 subsection (B) (5) (n); and
 9. The location of all parcels for which a copy of a request for service has been submitted.
- V. Provide a copy of each notice to be sent, as required, to a municipal manager or administrator.
- W. A copy of each notice sent, as required, to a landowner not requesting service.
- X. For each landowner not requesting service, provide either the written response received from the landowner or, if no written response was received, a description of the actions by the applicant to obtain a written response.

Y. Attach proposed Tariffs using either the water or sewer format of Attachment "D", unless the Utilities Division, prior to the filing of this application, approves another form.

Attach the following permits (if any of these permits have not yet been obtained, please provide the status of their application):

1. The franchise from either the City or County for the area requested.
2. The Arizona Department of Environmental Quality (or its designee's) approval to construct facilities.
3. (SEWER ONLY) Copy of the Aquifer Protection Permit issued by ADEQ.
4. The Arizona State Land Department approval. (If you are including any State land in your requested area this approval is needed.)
5. Any U.S. Forest Service approval. (If you are including any U.S. Forest Service land in your requested area this approval is needed.)
6. (WATER ONLY) If the area requested is within an Active Management Area, attach a copy of the utility's Designation of an Assured Water Supply, or the developer's Certificate of Assured Water Supply issued by the Arizona Department of Water Resources, whichever applies.
 - a. If the area requested is outside an Active Management Area, attach the developer's Adequacy Statement issued by the Arizona Department of Water Resources, if applied for by the developer.
 - b. If the area requested is outside an Active Management Area and the developer does not obtain an Adequacy Statement, provide sufficient detail to prove that adequate water exists to provide water to the area requested.
7. Provide a copy of your estimated property taxes. This may be obtained by contacting the Arizona Department of Revenue, Division of Property Valuation and Equalization. You must provide them with a five (5) year projection of the original cost of the plant, depreciation expense, the location of the property and the school district.

Z. Indicate the estimated number of customers, by class, to be served in each of the first five years of operation. Include documentation to support the estimates.

Residential:

First Year _____ Second Year _____ Third Year _____ Fourth Year _____ Fifth Year _____

Commercial:

First Year _____ Second Year _____ Third Year _____ Fourth Year _____ Fifth Year _____

Industrial:

First Year _____ Second Year _____ Third Year _____ Fourth Year _____ Fifth Year _____

Irrigation:

First Year _____ Second Year _____ Third Year _____ Fourth Year _____ Fifth Year _____

AA. Indicate the projected annual water consumption or sewerage treatment, in gallons, for each of the customer classes for each of the first five years of operation:

Residential:

First Year _____
Second Year _____
Third Year _____
Fourth Year _____
Fifth Year _____

Industrial:

First Year _____
Second Year _____
Third Year _____
Fourth Year _____
Fifth Year _____

Commercial:

First Year _____
Second Year _____
Third Year _____
Fourth Year _____
Fifth Year _____

Irrigation:

First Year _____
Second Year _____
Third Year _____
Fourth Year _____
Fifth Year _____

BB. Indicate the total estimated annual operating revenue for each of the first five years of operation:

Residential:

First Year _____
Second Year _____
Third Year _____
Fourth Year _____
Fifth Year _____

Industrial:

First Year _____
Second Year _____
Third Year _____
Fourth Year _____
Fifth Year _____

Commercial:

First Year _____
Second Year _____
Third Year _____
Fourth Year _____
Fifth Year _____

Irrigation:

First Year _____
Second Year _____
Third Year _____
Fourth Year _____
Fifth Year _____

P. Indicate the total estimated annual operating expenses for each of the first five years of operation:

Residential:

First Year _____
Second Year _____
Third Year _____
Fourth Year _____
Fifth Year _____

Industrial:

First Year _____
Second Year _____
Third Year _____
Fourth Year _____
Fifth Year _____

Commercial:

First Year _____
Second Year _____
Third Year _____
Fourth Year _____
Fifth Year _____

Irrigation:

First Year _____
Second Year _____
Third Year _____
Fourth Year _____
Fifth Year _____

DD. Attach an itemized list of the major components of the water or sewer system (see Attachment C-3).

EE. Indicate the total estimated cost to construct utility facilities: _____

FF. Provide a description of how water and/or wastewater service is to be provided in the proposed extension area and the name of each water and wastewater service provider for the area, if any.

GG. Provide a letter from each wastewater service provider identified under subsection (B)(5)(aa), confirming the provision of wastewater service for the proposed service area or extension area.

HH. Provide plans for or a description of water conservation measures to be implemented in the proposed service area or extension area, including, at a minimum:

- i. A description of the information about water conservation or water saving measures that the utility will provide to the public and its customers;
- ii. A description of how the applicant will work with each wastewater service provider identified under subsection (B)(5)(aa) to encourage water conservation;
- iii. A description of the sources of water that will be used to supply parks, recreation areas, golf courses, greenbelts, ornamental lakes, and other aesthetic water features;
- iv. A description of any plans for the use of reclaimed water;
- v. A description of any plans for the use of recharge facilities;
- vi. A description of any plans for the use of surface water; and
- vii. A description of any other plans or programs to promote water conservation;

- II. Provide a backflow prevention tariff that complies with Commission standards, if not already on file.
- JJ. Provide a curtailment tariff that complies with Commission standards, if not already on file.
- KK. Provide a copy of a Physical Availability Determination, Analysis of Adequate Water Supply, or Analysis of Assured Water Supply issued by the Arizona Department of Water Resources for the proposed service area or extension area or, if not yet obtained, the status of the application for such approval;

(Signature of Authorized Representative)

(Type or Print Name Here)

(Title)

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20_____

NOTARY PUBLIC

My Commission Expires _____

ATTACHMENT "A"

EXAMPLE ONLY

(Company Name)
(Mailing Address)
(City or Town and Zip Code)

(Date)

Docket Control Center
Arizona Corporation Commission
1200 W. Washington St.
Phoenix, Arizona

Attached is an application by (Name of Company) for (indicate the type of application this is for). The purpose of this application is to (explain the purpose for and reasons behind the application).

(Type Name Here and Sign)

ATTACHMENT "B"

COUNTY	SECTION	TOWNSHIP	RANGE

6	5	4	3	2	1
7	8	9	1 0	1 1	1 2
1 8	1 7	1 6	1 5	1 4	1 3
1 9	2 0	2 1	2 2	2 3	2 4
3 0	2 9	2 8	2 7	2 6	2 5
3 1	3 2	3 3	3 4	3 5	3 6

Type or Print Description Here:

ATTACHMENT "C"

PROFORMA BALANCE SHEET (WATER)

ASSETS

Current Assets

Cash \$ _____

Accounts Receivable _____

Other _____

Total Current Assets _____

Fixed Assets

Utility Plant in Service _____

(Less) Accumulated Depreciation _____

Net Plant in Service _____

Other _____

TOTAL ASSETS \$ _____

LIABILITIES AND CAPITAL

Current and Accrued Liabilities

Accounts Payable \$ _____

Notes Payable _____

Accrued Taxes _____

Accrued Interest _____

Other _____

Total Current and Accrued Liabilities _____

Long-Term Debt \$ _____

Other _____

Deferred Credits

Advances in Aid of Construction \$ _____

Contributions in Aid of Construction _____

Accumulated Deferred Income Tax _____

Total Deferred Credits \$ _____

TOTAL LIABILITIES \$ _____

CAPITAL ACCOUNT

Common Stock \$ _____

Preferred _____

Paid in Capital _____

Retained Earnings _____

Total Capital \$ _____

TOTAL LIABILITIES AND CAPITAL \$ _____

COMPANY NAME	
Name of System:	ADEQ Public Water System Number:

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Sustained Well Production w/ Presently Installed Pump (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled

* Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity

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

Company Name:	Test Year Ended:
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WATER COMPANY PLANT DESCRIPTION CONTINUED

MAINS		
Size (in inches)	Material	Length (in feet)
2		
3		
4		
5		
6		
8		
10		
12		

CUSTOMER METERS	
Size (in inches)	Quantity
5/8 x 3/4	
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, please list the utility owned assets in each category.

TREATMENT EQUIPMENT:

STRUCTURES:

OTHER:

WATER USE DATA SHEET

NAME OF COMPANY	
ADEQ Public Water System Number:	

MONTH/YEAR (12 Months of Test Year)	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
TOTAL	N/A		*

Is the water utility located in an ADWR Active Management Area ("AMA")?

YES NO

Does the Company have an ADWR gallons per capita day ("GPCD") requirement?

YES NO

If Yes, please provide the GPCD amount: _____

Note: If you are filing for more than one system, please provide separate data sheets for each system. For explanation of any of the above, please contact the Engineering Supervisor at 602-542-7277.

** Gallons pumped cannot equal or be less than the gallons sold.*

PROFORMA INCOME STATEMENT (WATER)

	<u>YR ONE</u>	<u>YR TWO</u>	<u>YR THREE</u>
REVENUE:			
Water Sales	_____	_____	_____
Establishment Charges	_____	_____	_____
Other Operating Revenue	_____	_____	_____
Total Operating Revenue	\$ _____	\$ _____	\$ _____
OPERATING EXPENSES:			
Salaries and Wages	\$ _____	\$ _____	\$ _____
Purchased Water	_____	_____	_____
Power Costs	_____	_____	_____
Water Testing	_____	_____	_____
Repairs and Maintenance	_____	_____	_____
Office Supplies Expense	_____	_____	_____
Outside Services	_____	_____	_____
Rents	_____	_____	_____
Transportation Expense	_____	_____	_____
Taxes Other than Property and income	_____	_____	_____
Depreciation	_____	_____	_____
Health and Life Insurance	_____	_____	_____
Income Taxes	_____	_____	_____
Property Tax	_____	_____	_____
Miscellaneous Operating	_____	_____	_____
Total Operating Expense	\$ _____	\$ _____	\$ _____
OPERATING INCOME OR (LOSS)	\$ _____\$	_____	\$ _____
OTHER INCOME/EXPENSES:			
Interest Income	\$ _____	\$ _____	\$ _____
Other Income	_____	_____	_____
Other Expenses	_____	_____	_____
Interest Expenses	_____	_____	_____
TOTAL OTHER INCOME/EXPENSE	\$ _____	\$ _____	\$ _____
NET INCOME (LOSS)	\$ _____	\$ _____	\$ _____

PROFORMA UTILITY PLANT IN SERVICE (WATER)
FIRST YEAR

	ORIGINAL COST	ACCUM. DEPRC.	ORIG. COST LESS DEPREC.
Organization	\$ _____	\$ _____	\$ _____
Franchises	_____	_____	_____
Land and Land Rights	_____	_____	_____
Wells and Springs	_____	_____	_____
Electric Pumping Equip.	_____	_____	_____
Water Treat. Equip.	_____	_____	_____
Distribution Reservoirs and Standpipes	_____	_____	_____
Transmission & Dist. Mains	_____	_____	_____
Services	_____	_____	_____
Meters	_____	_____	_____
Hydrants	_____	_____	_____
Other Plant Structures and Improvements	_____	_____	_____
Office Furniture and Fixtures	_____	_____	_____
Transportation Equipment	_____	_____	_____
Tools and Work Equipment	_____	_____	_____
Laboratory Equipment	_____	_____	_____
Power Operated Equipment	_____	_____	_____
Communication Equipment	_____	_____	_____
Other Tangible Plant	_____	_____	_____
 TOTAL PLANT IN SERVICE	 \$ _____	 \$ _____	 \$ _____

ATTACHMENT "C"

PROFORMA BALANCE SHEET (SEWER)

ASSETS

Current Assets

Cash \$ _____

Accounts Receivable _____

Other _____

Total Current Assets _____

Fixed Assets

Utility Plant in Service _____

(Less) Accumulated Depreciation _____

Net Plant in Service _____

Other _____

TOTAL ASSETS \$ _____

LIABILITIES AND CAPITAL

Current and Accrued Liabilities

Accounts Payable \$ _____

Notes Payable _____

Accrued Taxes _____

Accrued Interest _____

Other _____

Total Current and Accrued Liabilities _____

Long-Term Debt \$ _____

Other _____

Deferred Credits

Advances in Aid of Construction \$ _____

Contributions in Aid of Construction _____

Accumulated Deferred Income Tax _____

Total Deferred Credits \$ _____

TOTAL LIABILITIES \$ _____

CAPITAL ACCOUNT

Common Stock \$ _____

Preferred _____

Paid in Capital _____

Retained Earnings _____

Total Capital \$ _____

TOTAL LIABILITIES AND CAPITAL \$ _____

PROFORMA INCOME STATEMENT (SEWER)

	<u>YR ONE</u>	<u>YR TWO</u>	<u>YR THREE</u>
REVENUE:			
Flat Rate Revenues	\$ _____	\$ _____	\$ _____
Measured Revenues	_____	_____	_____
Established Charges	_____	_____	_____
Other Operating Revenue	_____	_____	_____
Total Operating Revenue	\$ _____	\$ _____	\$ _____
OPERATING EXPENSES:			
Salaries and Wages	\$ _____	\$ _____	\$ _____
Purchased Sewer Treatment	_____	_____	_____
Sludge Removal Expense	_____	_____	_____
Purchased power for Pumping Treatment	_____	_____	_____
Sewage Treatment and Testing	_____	_____	_____
Repairs and Maintenance	_____	_____	_____
Office Supplies Expense	_____	_____	_____
Outside Services	_____	_____	_____
Rents	_____	_____	_____
Transportation Expense	_____	_____	_____
General Insurance	_____	_____	_____
Depreciation	_____	_____	_____
Health and Life Insurance	_____	_____	_____
Income Taxes	\$ _____	\$ _____	\$ _____
Property Tax Taxes Other than Property &Income Miscellaneous Operating	\$ _____	\$ _____	\$ _____
Total Operating Expense	_____	_____	_____
OPERATING INCOME OR LOSS	_____	_____	_____
OTHER INCOME/EXPENSES:			
Interest Income	\$ _____	\$ _____	\$ _____
Other Income	\$ _____	\$ _____	\$ _____
Other Expenses			
Interest Expenses			

TOTAL OTHER INCOME/EXPENSE

NET INCOME (LOSS)

PROFORMA UTILITY PLANT IN SERVICE (SEWER)
FIRST YEAR

PLANT	ORIGINAL COST	ACCUM. DEPRC.	ORIG. COST LESS DEPREC.
Organization	\$ _____	\$ _____	\$ _____
Franchises	_____	_____	_____
Land and Land Rights	_____	_____	_____
Structure and Improvements	_____	_____	_____
Collection Sewers/Collecting Structures/Force Mains	_____	_____	_____
Service to Customers	_____	_____	_____
Flowing Measuring Devices and Installations	_____	_____	_____
Receiving Wells	_____	_____	_____
Electric Pumping Equip	_____	_____	_____
Treatment Disposal Equipment	_____	_____	_____
Plant	_____	_____	_____
Outfall Sewer Lines	_____	_____	_____
Other Plant Structures and Improvements	_____	_____	_____
Office Furniture and Fixtures	_____	_____	_____
Transportation Equipment	_____	_____	_____
Tools and Work Equipment	_____	_____	_____
Laboratory Equipment	_____	_____	_____
Power Operated Equipment	_____	_____	_____
Communication Equipment	_____	_____	_____
Miscellaneous Equipment	_____	_____	_____
Other Tangible Plant	_____	_____	_____
TOTAL PLANT IN SERVICE	\$ _____	\$ _____	\$ _____

ATTACHMENT "D"
WATER TARIFF SCHEDULE

RATES AND CHARGES

<u>CUSTOMER/MINIMUM CHARGE</u>		<u>SERVICE LINE & METER</u>	
<u>PER MONTH</u>		<u>INSTALLATION CHARGES</u>	
<u>METER CHARGE GALLONS</u>		<u>METER CHARGE</u>	
5/8 X 3/4"	\$ _____ FOR _____	5/8 X 3/4"	\$ _____
3/4"	\$ _____ FOR _____	3/4"	\$ _____
1"	\$ _____ FOR _____	1"	\$ _____
1 1/2"	\$ _____ FOR _____	1 1/2"	\$ _____
2"	\$ _____ FOR _____	2"	\$ _____
3"	\$ _____ FOR _____	3"	\$ _____
4"	\$ _____ FOR _____	4"	\$ _____
5"	\$ _____ FOR _____	5"	\$ _____
6"	\$ _____ FOR _____	6"	\$ _____

COMMODITY CHARGE (EXCESS OF MINIMUM):

\$ _____ PER _____ GALLONS

FLAT RATE \$ _____ PER MONTH

SERVICE CHARGES:

- | | |
|---|----------------|
| 1. ESTABLISHMENT (R14-2-403.D.1) | \$ _____ |
| 2. ESTABLISHMENT/AFTER HOURS (R14-2-403.D.2) | \$ _____ |
| 3. RECONNECTION/DELINQUENT (R14-2-403.D.1) | \$ _____ |
| 4. NSF CHECK (R14-2-409.F.1) | \$ _____ |
| 5. METER REREAD/IF CORRECT (R14-2-408.C.2) | \$ _____ |
| 6. METER TEST/IF CORRECT (R14-2-408.F.1) | \$ _____ |
| 7. DEFERRED PAYMENT (R14-2-409.G.6) | \$ _____ |
| 8. DEPOSIT INTEREST (R14-2-403.B.3) | _____ % |
| 9. DEPOSIT (R14-2-403.B.7) | PER RULE |
| 10. REESTABLISHMENT W/N 12 MOs (R14-2-403.D.1) | MONTHS OFF THE |
| SYSTEM TIMES THE MINIMUM | |
| 11. <u>OTHER RATES & CHARGES APPROVED BY ORDER:</u> | |

IN ADDITION TO THE COLLECTION OF ITS REGULAR RATES AND CHARGES, THE COMPANY SHALL COLLECT FROM ITS CUSTOMERS THEIR PROPORTIONATE SHARE OF ANY PRIVILEGE, SALES OR USE TAX

ATTACHMENT "D"
SEWER TARIFF SCHEDULE

UTILITY: _____

PAGE ____ OF ____

RATES AND CHARGES

FLAT RATE

RESIDENTIAL \$ _____ PER MONTH
COMMERCIAL \$ _____ PER MONTH

BASED ON WATER USAGE

RESIDENTIAL MINIMUM \$ _____ FOR _____ GALLONS
EXCESS OF MINIMUM \$ _____ FOR _____ GALLONS

COMMERCIAL MINIMUM \$ _____ FOR _____ GALLONS
EXCESS OF MINIMUM \$ _____ FOR _____ GALLONS

EFFLUENT SALES: (if applicable)
\$ _____ PER _____ GALLONS

SERVICE LINE CONNECTION CHARGE \$ _____

SERVICE CHARGES:

- | | | |
|----|---|----------|
| 1. | ESTABLISHMENT (R14-2-603.D.1) | \$ _____ |
| 2. | RECONNECTION/DELINQUENT (R14-2-603.D.1) | \$ _____ |
| 3. | DEPOSIT (R14-2-603.B.7) | \$ _____ |
| 4. | DEPOSIT INTEREST (R14-2-603.B.3) | _____ % |
| 5. | REESTABLISHMENT W/N 12 MONTHS (R14-2-603.D.1) | \$ _____ |
| 6. | NSF CHECK (R14-2-608.E.1) | \$ _____ |
| 7. | LATE PAYMENT PENALTY (R14-2-608.F.1) | \$ _____ |

OTHER CHARGES AS SPECIFIED BY ORDER:

ATTACHMENT "E"

PUBLIC NOTICE OF AN APPLICATION
FOR A CERTIFICATE OF CONVENIENCE AND NECESSITY
BY [name of Company]

[Name of Company] has filed with the Arizona Corporation Commission ("Commission") an application for authority to provide [specific type of service] service to an area in which records indicate that you are a property owner. If the application is granted, [name of Company] would be the exclusive provider of [type of service] service to the proposed area. [Name of company] will be required by the Commission to provide this service under the rates and charges and terms and conditions established by the Commission. The granting of the application would not necessarily prohibit an individual from providing service to themselves from individually owned facilities on their property. The application is available for inspection during regular business hours at the offices of the Commission in [Phoenix at 1200 West Washington Street/Tucson at 400 West Congress, North Building, Room 218], and at [name of Company and address].

The Commission will hold a hearing on this matter. As a property owner you may have the right to intervene in the proceeding. If you do not want to intervene, you may appear at the hearing and make a statement on your own behalf. You may contact the Commission at the address and telephone number listed below for the date and time of the hearing and for more information on intervention. You may not receive any further notice of the proceeding unless requested by you.

If you have any questions or concerns about this application, have any objections to its approval, or wish to make a statement in support of it, you may contact the Consumer Services Section of the Commission at [1200 West Washington Street, Phoenix, Arizona 85007 or call 1-800-222-7000/400 West Congress, North Building, Room 218, Tucson, Arizona 85701 or call 1-800-535-0148].