Specialty Lines
UNDERWRITERS
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Public Entity Application
Sewer/Water Utility
Questionnaire E

Legal Name of Public Entity: _____ **Effective Date:** _____

A. **SEWER UTILITY**

1. Number of utility users: Industrial: _____ Commercial: _____ Residential: _____
2. Provide annual payroll (**less clerical**):
   Plant operation: $_____ Construction: $_____ Cleaning: $_____
3. Provide number of sewer miles: Storm: _____ Sanitary: _____
4. What type of facility is operated? ☐ Treatment Plant ☐ Lift Stations ☐ Pumps
5. If treatment plant is operated:
   a. Type of plant? ☐ Primary ☐ Secondary ☐ Tertiary
   b. What regulatory agency is responsible for monitoring (DEC, EPA, Health Department)? _____
   _____
   How often? _____
   c. How is influent input monitored for toxic or hazardous waste? _____
   _____
   d. How are chemicals labeled and where stored? _____
   e. What is done with residual by-product/sludge? _____
   _____
   f. Has plant ever been fined or received a citation? ..... ☐ Yes ☐ No
   If "yes," explain: _____
   g. Are any operations contracted? ..... ☐ Yes ☐ No
   If "yes," attach Certificate of Insurance and a copy of any hold harmless agreements.
6. How old is your system? _____ Year of last upgrade? _____
7. Is regular maintenance performed? ..... ☐ Yes ☐ No
   Are records kept for all repairs? ..... ☐ Yes ☐ No
8. Have you had any past/present incidents of sewer back-up to residential or commercial property? ☐ Yes ☐ No
   If "yes," please explain (include dates, cause and corrective action taken): _____
   _____
   _____
   _____

B. **WATER UTILITY**

1. General Information
   a. Annual payroll **(less clerical)**: $_____
   b. Number of gallons distributed annually: _____ Maximum annual capacity: _____
   c. Miles of pipe: _____ Total number of employees: _____
   d. Number of users: Residential: _____ Commercial: _____ Industrial: _____
   e. Number of: Water treatment plants: _____ Water tanks: _____ Water towers: _____
   f. Are all facilities fenced? ..... ☐ Yes ☐ No
   g. Is water provided to neighboring entities? ..... ☐ Yes ☐ No
      If "yes," describe and provide copies of contracts: _____
      _____
      _____
      _____

2. Source of water supply (lake, well, etc.): _____
   a. How old is your system? _____ Year of last upgrade? _____
   b. Composition of pipe?
      ☐ Lead _____% ☐ Cast iron _____% ☐ Asbestos _____%
      ☐ Plastic _____% ☐ Clay _____% ☐ Other _____%

3. a. Has utility completed monitoring for lead in drinking water? ..... ☐ Yes ☐ No
   b. Date completed: _____
   c. Test results:
      (1) Tap water monitoring: _____
      (2) Water quality monitoring: _____
      (3) Lead source water monitoring: _____
   d. If test results exceed the lead action level of 15 ppb, please comment on treatment techniques relating to (a) corrosion control, (b) source water, (c) public education, or (d) lead service line replacement as applicable:
      _____
      _____
      _____

4. How often is water tested? _____ By which regulatory agent? _____

5. Has system ever been cited or fined for non-compliance with required standards? ..... ☐ Yes ☐ No
   If "yes," please provide details, copy of non-compliance notice(s) and action(s) taken to correct problem(s):
   _____
   _____
   _____

6. Does entity contract any part of water operations (construction, maintenance, inspection, etc.)? ..... ☐ Yes ☐ No
   If "yes," provide certificates of insurance.

7. Does entity have a written disaster plan? ..... ☐ Yes ☐ No

8. Is there a process in place for handling customer complaints or reported problems? ..... ☐ Yes ☐ No