Municipal Wastewater Planning Program (MWPP) Annual Report for the year ending 2021 RIVER HEIGHTS CITY

Thank you for filling out the reqested information. Please let DWQ know when it is approved by the Council.

Please download a copy of your form by clicking "Download PDF" below.

Below is a summary of your responses

Download PDF

SUBMIT BY APRIL 15, 2022

Are you the person responsible for completing this report for your organization?

O No

This is the current information recorded for your facility:

Facility Name:	RIVER HEIGHTS CITY
Contact - First Name:	Clayten
Contact - Last Name:	Nelson
Contact - Title	Public Works Director

Co	ontact - Phone:	435-752-2646 x 2
C	ontact - Email:	cnelson@riverheights.org
Is this	information above	complete and correct?

Yes

O No

Your wastewater system is described as Collection & Financial:

Classification: COLLECTION

Grade: I

(if applicable)

Classification: -

Grade: -

Is this correct?

WARNING: If you select 'no', you will no longer have access to this form upon clicking Save & Continue. DWQ will update the information and contact you again.

Yes

O No

Click on a link below to view a previous year's examples of sections in the survey:

(Your wastewater system is described as Collection & Financial)

MWPP Collection System.pdf

MWPP Discharging Lagoon.pdf

MWPP Financial Evaluation.pdf

MWPP Mechanical Plant.pdf

MWPP Non-Discharging Lagoon.pdf

Will multiple people be required to fill out this form?

No		
Financial Evaluation S	Section	
rm completed by:		
ayten Nelson		
Part I: GENERAL QUES	STIONS	
	Yes	No
Are sewer revenues maintained in a dedicated purpose enterprise/district account?		0
	Yes	No
Are you collecting 95% or more of your anticipated sewer revenue?	•	0
Are Debt Service Reserve Fund ⁶ requirements being met?	•	0
/hat was the annual average User Charge ¹⁶ fo	r 2021?	
4.00		

O Ves

_	
	No

Part II: OPERATING REVENUES AND RESERVES

	Yes	No
Are property taxes or other assessments applied to the sewer systems 15?	0	•
	Yes	No
Are sewer revenues ¹⁴ sufficient to cover operations & maintenance costs ⁹ , and repair & replacement costs ¹² (OM&R) at this time?	•	0
Are projected sewer revenues sufficient to cover OM&R costs for the <i>next five years</i> ?	•	0
Does the sewer system have sufficient staff to provide proper OM&R?	•	0
Has a repair and replacement sinking fund ¹³ been established for the sewer system?	0	•
Is the repair & replacement sinking fund sufficient to meet anticipated needs?	0	•
Part III: CAPITAL IMPROVEMENTS RESERVES	S REVENU	ES AND
	Yes	No
Are sewer revenues sufficient to cover all costs of current capital improvements ³ projects?	•	0
Has a Capital Improvements Reserve Fund ⁴		

been established to provide for anticipated

capital improvement projects?	Yes	No
Are projected Capital Improvements Reserve Funds sufficient for the <i>next five years</i> ?	0	•
Are projected Capital Improvements Reserve Funds sufficient for the <i>next ten years</i> ?	0	•
Are projected Capital Improvements Reserve Funds sufficient for the <i>next twenty years</i> ?	0	
Part IV: FISCAL SUSTAINABI	LITY REVI	EW
	Yes	No
Have you completed a Rate Study ¹¹ within the	•	0
last five years?		
Do you charge Impact fees ⁸ ? 021 Impact Fee (if not a flat fee, use average o	f all collected	O I fees) =
Do you charge Impact fees ⁸ ?	O	O I fees) =
Do you charge Impact fees ⁸ ? O21 Impact Fee (if not a flat fee, use average o	O	O I fees) =
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Do you charge Impact fees ⁸ ? 021 Impact Fee (if not a flat fee, use average o 559.00 Have you completed an Impact Fee Study in accordance with UCA 11-36a-3 within the last	f all collected	
Do you charge Impact fees ⁸ ? 021 Impact Fee (if not a flat fee, use average of 559.00 Have you completed an Impact Fee Study in accordance with UCA 11-36a-3 within the last five years? Do you maintain a Plan of	Yes	

In what year was the Capital Facility Plan last updated?

Yes	No
O	
Yes	No
O	
Yes	No
0	
0	
set renewal*	cost as a
	Yes

Part V: PROJECTED CAPITAL INVESTMENT COSTS

	Cost	Purpose of Improvements		ts
	Please enter a valid numerical value	Replace/Restore		Increase Capacity
2022	30000			
2022 thru 2026	80000			
2027 thru 2031	40000			
2032 thru 2036	40000			
2037 thru 2041	40000			

This is the end of the Financial questions

To the best of my knowledge, the Financial section is completed and accurate.



Collections System Section

Form completed by:

May Receive Continuing Education /units (CEUs)

Clayten Nelson		

Part I: SYSTEM DESCRIPTION

What is the largest diameter pipe in the collection system (diameter in inches)?

What is the average depth of the collection system (in feet)?
11
What is the total length of sewer pipe in the system (length in miles)?
8.1
How many lift/pump stations are in the collection system?
0
What is the largest capacity lift/pump station in the collection system (design capacity in gallons per minute)?
NA
Do seasonal daily peak flows exceed the average peak daily flow by 100 percent or more?
Yes
• No
What year was your collection system first constructed (approximately)?
1978
In what year was the largest diameter sewer pipe in the collection system constructed, replaced or renewed? (If more than one, cite the oldest)
1978

PART II: DISCHARGES

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 obstruction or problem that: (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 obstruction or problem that does not meet the Class 1 SSO criteria.
Below include the number of SSOs that occurred in year: 2021
Number Number of Class 1 SSOs in Calendar

Number of Class 2 SSOs in Calendar

year

year	Number
Please indicate what caused the SSO(s) in th	ne previous question.
Please specify whether the SSOs were caused community, etc.	d by contract or tributary
Part III: NEW DEVEL	OPMENT
Did an industry or other development enter the production in the past two years, such that flotthe sewerage system increased by 10% or m	ow or wastewater loadings to
Yes No	
Are new developments (industrial, commerci in the next 2 - 3 years that will increase flow of sewerage system by 25% or more?	
Yes No	
Number of new commercial/industrial conne	ections in the last year
Number of new residential sewer connections	s added in the last year

654			
F	Part IV: OPERATOR	CERTIF	FICATION
How many colle	ction system operators	do you en	nploy?
2			
Approximate po	pulation served		
2200			
considered to be	ministrative Rules requine in Direct Responsible Cat the Facility's Grade.	•	
	,		
List the designa	ted Chief Operator/DRC	for the Co	ellection System below:
List the designa	ted Chief Operator/DRC	for the Co	ellection System below:
List the designa	 I	1	,
List the designa	Name	1	Email
hief Operator/DRC List all other Col	Name First and Last Name	Grade	Email Please enter full email address cnelson@riverheights.org responsibilities in the

SLS ¹⁷ Grade I:	Name		
Collection Grade I:	separate by comma		
Collection Grade II:			
Collection Grade III:			
Collection Grade IV:			
List all other Collection System operators by certification grade, separate names by commas:			
		N	ame
		separate	by comma
SLS ¹⁷ Grade I:			
Collection Grade I:		Came	eron Reed
Collection Grade II:			
Collection Grade III:			
Collection Grade IV:			
No Current Collection Certification:			
Is/are your collection DRC operator(grade for this facility? • Yes • No	s) currentl	y certified at tl	he appropriate
Part V: FACILIT	Y MAINT	TENANCE	
		Yes	No
Have you implemented a preventative maintenance program for your collect system?			0

Have you updated the collection system

	operations and maintenance manual within the past 5 years?	@	
	Do you have a written emergency response plan for sewer systems?	•	0
	Do you have a written safety plan for sewer systems?	•	0
•	Is the entire collections system TV inspected at least every 5 years?	•	0
	Is at least 85% of the collections system mapped in GIS?		0
	Part VI: SSMP EVALU	JATION	
		Yes	No
	Has your system completed a Sewer System Management Plan (SSMP)?	•	0
	Has the SSMP been adopted by the permittee's governing body at a public meeting?		0
	Has the completed SSMP been public noticed?		0
	During the annual assessment of the SSMP, were any adjustments needed based on the performance of the plan?	0	
[Date of Public Notice		
	02/24/2016		

During 2021, was any part of the SSMP audited as part of the five year audit?



(SECAP) as defined by the Utah Sewer Management Program? Yes No Part VII: NARRATIVE EVALUATION This section should be completed with the system operators. Describe the physical condition of the sewerage system: (lift stations, etc. included) Good What sewerage system capital improvements does the utility need to implement in the next 10 years?
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What sewerage system capital improvements ³ does the utility need to
majorania in and next to years.
New building for O&M equipment
What sewerage system problems, other than plugging, have you had over the last year?
none
Is your utility currently preparing or updating its capital facilities plan ² ?
● Yes
O No

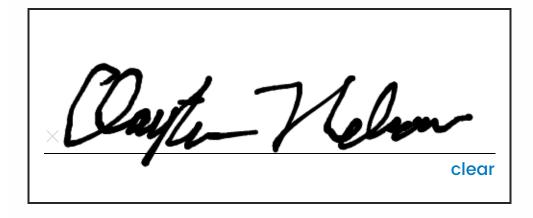
Does the municipality/district pay for the continuing education expenses of

No

operators?
100% Covered
O Partially cover
O Does not pay
Is there a written policy regarding continuing education and training for wastewater operators?
Yes
○ No
Any additional comments?
This is the end of the Collections System questions
To the best of my knowledge, the Collections System section is completed and accurate.

Yes

I have reviewed this report and to the best of my knowledge the information provided in this report is correct.



Has this been adopted by the council? If no, what date will it be presented to the council?	
○ Yes	
No	
What date will it be presented to the council? Date format ex. mm/dd/yyyy 04/05/2022	
Please log in.	
Email	
PIN	

NOTE: This questionnaire has been compiled for your benefit to assist you in evaluating the technical and financial needs of your wastewater systems. Completion of the collection section meets the annual reporting requirement for the USMP. 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 send an email to wqinfodata@utah.gov and we will contact you as soon as possible. You may also visit our Frequently Asked Questions page.

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