

FILLING OUT THIS SURVEY WILL DO SEVERAL THINGS:

- IT WILL HELP SET THE AMOUNT OF FUNDING AVAILABLE TO NEBRASKA;
- IT HELPS STATE REGULATORS UNDERSTAND THE COST ASSOCIATED WITH CHANGES;
- IT HELPS TO DEVELOP THE ANNUAL INTENDED USE PLAN (IUP); AND
- IT MAKES YOUR COMMUNITY ELIGIBLE TO RECEIVE ASSISTANCE.

**FILLING THIS SURVEY OUT WILL NOT OBLIGATE THE COMMUNITY TO A PROJECT
IN THE UPCOMING STATE FISCAL YEAR**

BE SURE TO FILL-OUT ALL FIELDS IN ORDER TO TAKE FULL ADVANTAGE OF ALL PRIORITY RANKING POINTS AVAILABLE IN THE UPCOMING INTENDED USE PLAN (IUP)

SECTION 1 - COMMUNITY INFORMATION:

COMMUNITY NAME:		DATE:		PHONE:	
FORM COMPLETED BY, NAME & TITLE:		AWIN SUSTAINABILITY RISK:		<input type="checkbox"/> Low (0-10)	<input type="checkbox"/> Moderate (11-15)
NPDES (WASTEWATER) PERMIT ID: NE		LAST FACILITY PLAN (FP)/PRELIMINARY ENGINEERING REPORT (PER) CREATED IN (YYYY):			
CURRENT RESIDENTIAL SEWER BASE RATE:	\$	PER MONTH	ADDITIONAL CHARGE:	\$	PER
COMMERCIAL/INDUSTRIAL SEWER BASE RATE:	\$	PER MONTH	ADDITIONAL CHARGE:	\$	PER
TYPE OF WASTEWATER TREATMENT FACILITY IS:		<input type="checkbox"/> Mechanical Plant	<input type="checkbox"/> Lagoon	<input type="checkbox"/> Lagoon with Land Apply	<input type="checkbox"/> Private Septic Systems

SECTION 2 - COMPLIANCE: PLEASE CHECK (*) YES OR NO

COMPLIANCE SCHEDULE IN NPDES PERMIT	<input type="checkbox"/> yes	<input type="checkbox"/> no
NOTICE OF VIOLATION (NOV)	<input type="checkbox"/> yes	<input type="checkbox"/> no
CONSENT ORDER	<input type="checkbox"/> yes	<input type="checkbox"/> no
ADMINISTRATIVE ORDER (AO)	<input type="checkbox"/> yes	<input type="checkbox"/> no
REFERRAL TO ATTORNEY GENERAL (AG)	<input type="checkbox"/> yes	<input type="checkbox"/> no

SECTION 3 – GENERAL INFORMATION: PLEASE CHECK (*) YES OR NO

WE ARE CURRENTLY UNDERTAKING OR JUST FINISHED A PROJECT AND DON'T HAVE ANY NEW PROJECTS IN MIND.	<input type="checkbox"/> yes	<input type="checkbox"/> no
DO YOU HAVE A SEWER ASSET MANAGEMENT PLAN OR A CAPITAL IMPROVEMENT PLAN IN USE?	<input type="checkbox"/> yes	<input type="checkbox"/> no

SECTION 4 – SEWER CONNECTIONS:

# OF USERS	RESIDENTS	COMMERCIAL & INDUSTRIAL
TOTAL SEWER CONNECTIONS:		
CLUSTER SYSTEMS:		
ONSITE SEPTIC SYSTEMS:		

SECTION 5 - CONSIDERATIONS: PLEASE CHECK (X) YES OR NO

IS THERE A PUBLIC HEALTH PROBLEM?	<input type="checkbox"/> yes <input type="checkbox"/> no	DO YOU HAVE A WATER QUALITY PROBLEM?	<input type="checkbox"/> yes <input type="checkbox"/> no
ARE YOU INTERESTED IN CWSRF FUNDING?	<input type="checkbox"/> yes <input type="checkbox"/> no	WHEN DO YOU PLAN TO START CONSTRUCTION?	

