



## Utility Committee Meeting

### AGENDA

February 3, 2009

---

#### I. CALL TO ORDER

#### II. MATTERS BEFORE COMMITTEE

1. [Discussion / Approval - Disposal of PCB Contaminated Transformers](#)
2. [Discussion - Green Power Regulation](#)
3. [Discussion / Approval - GEFA Loan Application - Water Plant Upgrade](#)

#### III. ADJOURN



## Utility Committee Meeting

### AGENDA

February 3, 2009

**Item:**

Discussion / Approval - Disposal of PCB Contaminated Transformers

**Department:**

**Additional Information:**

**Financial Impact:**

**Budgeted Item:**

**Recommendation / Request:**

Viewing Attachments Requires Adobe Acrobat. [Click here](#) to download.

Attachments / click to download

[Contaminated Transformer Info](#)

# PCB Analytical Test Results

Solomon Corporation Laboratory  
201 Polymer Dr.  
Decatur, TN 37322  
Phone: 423-334-2666, Ext. 422

Monroe Municipal Utilities  
Attn: Accounts Payable  
PO Box 1249  
Monroe, GA 30655

Salesperson: Keith Kenney  
Date Sampled: 1/15/2009  
Analysis Date: 1/15/2009  
Date Reported: 1/16/2009  
Method: US EPA Method 8082  
Reporting Limit: 2.0 ppm

<u>KVA</u>	<u>Manufacturer</u>	<u>Serial Number</u>	<u>Location</u>	<u>Company #</u>	<u>Unit Marking</u>	<u>Lab #</u>	<u>PCB Content (ppm)</u>
250.0	GE	H255666-68P			R-1	463920	1040
250.0	GE	F586772-66P			R-2	463921	1360
250.0	GE	F586770-66P			R-3	463922	1420
15.0	WH	64AK9426			R-4	463923	<2
15.0	GE	K966322Y73AA			R-6	463924	<2
25.0	GE	M186230YDNA			R-9	463925	<2
15.0	GE	L144181Y73AA			R-10	463926	<2
37.5	GE	M2Y9654YGNA			R-11	463927	<2
10.0	GE	F457883-63Y			R-14	463928	<2
10.0	GE	H579459-67Y			R-15	463929	<2
10.0	GE	F402691-63Y			R-16	463930	<2
225.0	RTE	691021861			R-19	463931	<2
150.0	GE	L713645YHMA			R-20	463932	<2

13 Units Reported

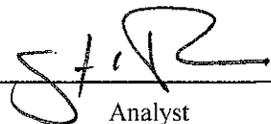
Sample Identification reported as submitted by client

H - Sample exceeded holding time

U - Date of collection unknown

E - Estimated concentration

M - Reporting limit higher than normal  
due to matrix interference

  
\_\_\_\_\_  
Analyst

Item # 1



# SOLOMON CORPORATION

Powerful Transformer Solutions

Established 1971

Hwy 58 S. Industrial Park  
Decatur, TN 37322

www.solomoncorp.com

FAX 785-655-2502  
Toll Free 800-234-2867

## TRANSFORMER REPAIR REPORT

CUSTOMER: Monroe Municipal Utilities  
Monroe, GA

PICKUP DATE: 1/15/2009 PO#: \_\_\_\_\_

Please call with any questions:  
Daresa Zvolanek 888-949-2666, ext 423  
FAX 423-334-2662

Please check the appropriate column (repair or junk), sign and return to Solomon Corporation.

CERTIFICATION: \_\_\_\_\_  
Date Customer Signature

	KVA	MFG	SERIAL NUMBER	PRIMARY	SECONDARY	TYPE	TAPS	ARRESTOR	GO #	BREAKDOWN	PRICE	REPAIR REPLACE	JUNK
1	10	GE	F457883-63Y	2400/4160Y x 7200/12470Y	120/240	1 PH. POLE, CNV.	NONE	NONE	NONE	R/C REPAIR	\$295.00	_____	_____
2	10	GE	H579459-67Y	7200/12470Y	120/240	1 PH. POLE, CNV.	-10%	NONE	NONE	R/C REPAIR	\$295.00	_____	_____
3	10	GE	F402691-63Y	2400/4160Y x 7200/12470Y	120/240	1 PH. POLE, CNV.	NONE	NONE	NONE	R/C REPAIR	\$295.00	_____	_____
4	15	SOL	F901547-64Y	2400/4160Y x 7200/12470Y	120/240	1 PH. POLE, CNV.	NONE	NONE	NONE	WARRANTY UNIT		_____	_____
5	15	GE	L144181Y73AA	7200/12470Y	120/240	1 PH. POLE, CNV.	NONE	NONE	NONE	R/C REPAIR	\$290.00	_____	_____
6	15	WH	64AK-9426	2400/4160Y	120/240	1 PH. POLE, CNV.	-10%	NONE	NONE	R/C REPAIR	\$290.00	_____	_____
7	15	GE	K966322Y-73AA	7200/12470Y	120/240	1 PH. POLE, CNV.	NONE	NONE	NONE	R/C REPAIR	\$290.00	_____	_____
8	15	GE	N449249YCUA	7200/12470Y	120/240	1 PH. POLE, CNV.	NONE	NONE	NONE	UNIT IS DBR (Damaged Beyond Repair) CREDIT: \$30.00 REPLACEMENT: \$475.00 NET COST	\$445.00	_____	_____
9	25	GE	P270059-YRB	7200/12470Y	120/240	1 PH. POLE, CNV.	NONE	NONE	NONE	R/C REPAIR	\$340.00	_____	_____
10	25	GE	M186230YDNA	7200/12470Y	120/240	1 PH. POLE, CNV.	NONE	NONE	NONE	R/C REPAIR	\$330.00	_____	_____
11	25	GE	P688721-YWD	7200/12470Y	120/240	1 PH. POLE, CNV.	NONE	NONE	NONE	R/C REPAIR	\$380.00	_____	_____
12	37.5	GE	M249654YGNA	7200/12470Y	120/240	1 PH. POLE, CNV.	NONE	NONE	NONE	R/C REPAIR	\$450.00	_____	_____
13	50	GE	M05C12418	7200/12470Y	120/240	1 PH. POLE, CNV.	NONE	NONE	NONE	UNIT IS DBR (Damaged Beyond Repair) CREDIT: \$100.00 REPLACEMENT: \$815.00 NET COST	\$715.00	_____	_____
14	25	GE	M99H14328	12470Y/7200 x 24940Y/14400	240/120	1 PH. PAD	NONE	NONE	NONE	UNIT IS DBR (Damaged Beyond Repair) CREDIT: \$50.00 REPLACEMENT: \$1,045.00 NET COST	\$995.00	_____	_____

Item # 1

KVA	MFG	SERIAL NUMBER	PRIMARY	SECONDARY	TYPE	TAPS	ARRESTOR	CO #	BREAKDOWN	PRICE	REPAIR REPLACE	JUNK	
15	37.5	GE	P268058-YRB	12470Y/7200	240/120	1 PH. PAD	NONE	NONE	NONE	R/C REPAIR	\$600.00		
16	150	GE	L713645HMA	12470Y/7200	480Y/277	3 PH. PAD	NONE	NONE	NONE	UNIT FAILED TTR R/W REPAIR NEW COPPER WINDINGS	\$4,620.00		
17	225	RTE	691021861	12470Y/7200	208Y/120	3 PH. PAD	±5%	NONE	NONE	R/C REPAIR	\$3,410.00		
18	250	GE	H255666-68P	7200/12470Y	120/240	1 PH. POLE, CNV.	±5%	NONE	NONE	UNIT IS DBR (Damaged Beyond Repair) 1040 PPM 1640 lbs @ \$1.05/lb DISPOSAL CHARGE: \$1,722.00			X
19	250	GE	F586772-66P	2400/4160Y x 7200/12470Y	120/240	1 PH. POLE, CNV.	NONE	NONE	NONE	UNIT IS DBR (Damaged Beyond Repair) 1360 PPM 1720 lbs @ \$1.05/lb/ DISPOSAL CHARGE: \$1,806.00			X
20	250	GE	F586770-66P	2400/4160Y x 7200/12470Y	120/240	1 PH. POLE, CNV.	NONE	NONE	NONE	UNIT IS DBR (Damaged Beyond Repair) 1420 PPM 1720 lbs @ \$1.05/lb/ DISPOSAL CHARGE: \$1,806.00			X

REPAIR PRICE INCLUDES: INITIAL TESTING, NEW GASKETS, NEW PRESSURE RELIEF, NEW NO-PCB MINERAL OIL, FINAL TESTING, SANDING, PAINTING, FREIGHT, 36-MONTH WARRANTY



## Utility Committee Meeting

### AGENDA

February 3, 2009

---

**Item:**

Discussion - Green Power Regulation

**Department:**

**Additional Information:**

**Financial Impact:**

**Budgeted Item:**

**Recommendation / Request:**

Viewing Attachments Requires Adobe Acrobat. [Click here](#) to download.

Attachments / click to download

---



## Utility Committee Meeting

### AGENDA

February 3, 2009

**Item:**

Discussion / Approval - GEFA Loan Application - Water Plant Upgrade

**Department:**

**Additional Information:**

**Financial Impact:**

**Budgeted Item:**

**Recommendation / Request:**

Viewing Attachments Requires Adobe Acrobat. [Click here](#) to download.

Attachments / click to download

[GEFA Loan Application Info](#)

**GEFA LOAN APPLICATION FORM PART I**  
**PROJECT DESCRIPTION**

\*Please fill out completely. Items left blank may cause delays in the review and approval process.

City of Monroe, GA  
Applicant name

Julian L. Jackson, City Administrator  
Name & title of contact person for this project

215 N. Broad St., PO Box 1249  
Street address or post office box

Monroe, GA 30655  
City, state and zip code

( 770 ) 267-7536      ( 770 ) 267-2319  
Telephone number      Fax number

cityman@monroega.gov      586000926  
E-mail address      Federal EIN

<p><b>Applicant: Please check the appropriate loan program:</b></p> <p><input checked="" type="checkbox"/> Georgia Fund (State funds)</p> <p><input type="checkbox"/> State Revolving Fund (SRF-Federal funds)</p> <p><input type="checkbox"/> Water Supply Grant (State funds)</p> <p><input type="checkbox"/> Environmental Emergency (State funds)</p> <p><input type="checkbox"/> Waste Water Reuse Grant (State funds)</p> <p><input type="checkbox"/> Construction Loan - interim financing (State funds)</p> <p><input type="checkbox"/> Sewer Grants (State funds)</p>
<p><b>For GEFA and EPD use:</b></p> <p>Project number:</p> <p>GEFA amount requested:</p> <p>Date received by GEFA:</p> <p>Date received by EPD:</p> <p>EPD initial approval:</p>

Please place a check mark in the space(s) next to the project type(s) which best describe your project:

WATER SUPPLY (water)	<input type="checkbox"/> plant construction	<input type="checkbox"/> emergency project
	<input checked="" type="checkbox"/> plant rehabilitation	<input type="checkbox"/> water tank
	<input type="checkbox"/> line construction	<input type="checkbox"/> well
	<input type="checkbox"/> line rehabilitation	<input type="checkbox"/> reservoir (raw water storage)
	<input type="checkbox"/> other: _____	

WATER QUALITY (sewer)	<input type="checkbox"/> plant construction	<input type="checkbox"/> pump station
	<input type="checkbox"/> plant rehabilitation	<input type="checkbox"/> emergency project
	<input type="checkbox"/> line construction	<input type="checkbox"/> CSO tunnel
	<input type="checkbox"/> line rehabilitation	<input type="checkbox"/> non-point source
	<input type="checkbox"/> other: _____	

**Consent Order** Will this project eliminate a Notice of Violation (NOV), Administrative Order, Consent Order, Court Order, etc? If yes, provide a copy of the violation.

**WaterFirst or Signature Community Designation** If your community has been designated a WaterFirst Community or a Signature Community by the Georgia Department of Community Affairs (DCA), please provide documentation of the award(s).

Please provide the basic information for each of the following questions.

1) **Project description** Give a detailed narrative of the proposed project. Attach a separate sheet if necessary along with a copy of the project engineering report (if available).

Upgrades to the existing water treatment plant will change the plant from a high pressure filtration system to a low pressure filtration system. This upgrade will allow the plant to treat 10 MGD (avg.)

2) **Project cost** Give an estimated cost outline for the entire project by line item.

Construction	\$ 3,300,000.00
Engineering	\$ 394,000.00
Other: <u>Construction Observation</u>	\$ 120,000.00
Other: <u>Contingencies</u>	\$ 186,000.00 (5.64%)
Total project cost	\$ 4,000,000.00

3) **Funding sources** Please list all funding sources which are proposed to be utilized to complete this project. List each source and funding amount. (If a commitment has been secured from any of these funding sources, list the commitment date and attach a copy of the commitment letter.)

Amount being requested from the Georgia Environmental Facilities Authority: \$ 4,000,000.00

Other funding source(s):	Date available:	Amount:
<u>NA</u>	<u>NA</u>	<u>\$ NA</u>
<u>NA</u>	<u>NA</u>	<u>\$ NA</u>
Total project funding		\$ 4,000,000.00

4) **Schedule** What is the proposed project schedule? If actual dates are available, please include them in the appropriate column.

ACTION	ACTUAL DATE(S)	PROPOSED DATE(S)	
Complete project planning	<u>01/01/09</u>	_____	<p>Please note that GEFA will only consider loan applications for projects that are within 6 months of issuing a "notice to proceed" (NTP). Applications with later estimated NTP dates should be submitted for funding closer to the NTP date so that current GEFA funds can be committed to projects that are ready to get underway.</p>
Initiated design	_____	<u>02/01/09</u>	
Plans & specs submitted to EPD	_____	<u>05/01/09</u>	
Bid opening	_____	<u>06/01/09</u>	
Notice of award	_____	<u>07/01/09</u>	
Notice to proceed with construction	_____	<u>08/01/09</u>	
Initiation of construction	_____	<u>08/01/09</u>	
Completion of construction	_____	<u>08/01/10</u>	

5) **Service Delivery Strategy** Is the proposed project consistent with, or at the least not inconsistent with, your HB489 Service Delivery Strategy? If yes, please attach a copy of the one or two pages from your Service Delivery Strategy that documents this.

YES

6) **Emergency Loan** Will this project assist the community in meeting an emergency public health or safety need? If yes, please explain the nature of the emergency and facilities that have failed and what repairs or additions are needed to protect the local health or environment.

NO

7) **Project engineer** Provide the following information:

Firm name Hofstadter and Associates, Inc.

Address 4571 Arkwright Road  
Macon, GA 31210

Engineer name Charlie Bridges

Phone # ( 478 ) 757-1169

Fax # ( 478 ) 471-1646

E-mail address charlie@hofstadter.com

8) **How you heard about GEFA** (check all that apply:)

- We have used GEFA loans before
- GEFA website - WWW.GEFA.ORG
- Conference:  ACCG  GRWA
- GMA  GWPCA  GEDA
- EPD representative
- Consulting engineer
- Other: \_\_\_\_\_

.....  
I certify that I am authorized to sign this application on behalf of our governing body.

\_\_\_\_\_  
Signature of authorized official

Julian L. Jackson  
Print or type name

City Administrator  
Title

\_\_\_\_\_  
Date

**NOTE: Attach a certified copy of the minutes or a resolution showing the governing body's approval of the submission of this application for a GEFA loan. Mail to:**

**Mr. Chris Clark, Executive Director  
Georgia Environmental Facilities Authority  
233 Peachtree Street, NE, Harris Tower - Suite 900  
Atlanta, Georgia 30303-1506**





Sonny Perdue  
Governor

GEORGIA ENVIRONMENTAL FACILITIES AUTHORITY

Chris Clark  
Executive Director

MEMORANDUM

TO: GEFA Loan Applicant

FROM: Beverly McElroy, Director of Environment Division

DATE: March 1, 2008

SUBJECT: Instructions for Application Submittal

---

This standard application will be used to evaluate all potential projects for funding. Applications will not be processed if any of the following information is not provided.

- All applicants must be designated as a "Qualified Local Government" by the Georgia Department of Community Affairs. Qualified Local Government status can be reviewed at: [www.georgiaplanning.com/planners/planreview/default2006.asp](http://www.georgiaplanning.com/planners/planreview/default2006.asp).
- All applicants in the 16-county Metro North Georgia Water Planning District area must meet the requirements of the three district plans. Plans can be reviewed at: [www.northgeorgiawater.com/html/index.htm](http://www.northgeorgiawater.com/html/index.htm)
- All applicants must be in compliance with all State Audit requirements. Compliance questions can be answered at: [www.audits.state.ga.us](http://www.audits.state.ga.us)
- All applicants must provide documentation of a Service Delivery Strategy (HB 489) agreement and provide documentation that the proposed project is in compliance with the agreement.
- All applicants must provide a resolution or meeting minutes in which the governing body approved the submittal of this application to GEFA.
- All applicants must provide an estimated monthly reimbursement schedule for the proposed project.
- If the potential project will eliminate a Consent Order, please provide documentation of the Consent Order.
- If the applicant has received a WaterFirst or Signature Community designation from the Georgia Department of Community Affairs, please provide award documentation.

Only applicants with projects that will issue a Notice to Proceed **within 6 months** of the application submittal date will be accepted. If the projected Notice to Proceed date is more than 6 months into the future, please submit application materials at a later date. **Applications are valid for 6 months** from the date of submittal to GEFA. Applications not presented to the GEFA Board of Directors within 6 months of receipt must be resubmitted.

If applying for a grant only, only Part I submission is required. Documentation of the funding balance must be provided with the application.

# GEORGIA ENVIRONMENTAL FACILITIES AUTHORITY

## GEFA LOAN APPLICATION FORM PART II

### FINANCIAL DOCUMENTATION

\*Please fill out completely. Items left blank may cause delays in the review and approval process.

**I. General Information**

A. City of Monroe  
Applicant name

B. Julian L. Jackson, City Administrator  
Name & title of contact person for this project

215 N. Broad Street, PO Box 1249  
Street address or post office box

Monroe, GA 30655  
City, state & zip code

( 770 ) 267-7536      ( 770 ) 267-2319  
Telephone number      Fax number

\_\_\_\_\_ E-mail address

Please check the appropriate loan program	
<input checked="" type="checkbox"/>	Georgia Fund (State funds)
<input type="checkbox"/>	State Revolving Fund (SRF-Federal funds)
<input type="checkbox"/>	Environmental Emergency (State funds)
<input type="checkbox"/>	Construction Loan - interim financing (State funds)
<input type="checkbox"/>	Sewer Grants (State funds)
<b>For GEFA's use:</b>	
Project # _____	
GEFA amount requested _____	
Date received by GEFA _____	

**C. Contact information for city/county/authority attorney, independent auditor and finance director.**

Attorney	Auditor	Finance Director
<u>Preston &amp; Malcom, PC</u> Name	<u>Mauldin &amp; Jenkins, LLC</u> Auditor Name, Firm Name	<u>Renee L. Prather, Finance Director</u> Name, Title
<u>110 Court Street</u> Street address or post office box	<u>200 Galleria Parkway, SE, Suite 1700</u> Street address or post office box	<u>PO Box 1249</u> Street address or post office box
<u>Monroe, GA 30655</u> City, state, & zip code	<u>Atlanta, GA 30339</u> City, state, & zip code	<u>Monroe, GA 30655</u> City, state, & zip code
<u>( 770 ) 267-2503</u> <u>( 770 ) 2849</u> Telephone      Fax number	<u>( 770 ) 955-8600</u> <u>( 678 ) 742-6788</u> Telephone      Fax number	<u>( 770 ) 266-5115</u> <u>( 770 ) 266-5114</u> Telephone      Fax number
<u>rpp@alcovylaw.com</u> E-mail address	<u>afraley@mjcpa.com</u> E-mail address	<u>rprather@monroega.gov</u> E-mail address

**II. CHECKLIST OF DOCUMENTS TO BE SUBMITTED AS PART OF THIS APPLICATION:**

(If you know the documents requested below are already on file at GEFA, you do not need to resubmit documentation. Write title and/or date as requested and the words "on file at GEFA".

**A. ACCOUNTING DATA:**

1. **AUDITS:** Due to physical space constraints, GEFA is no longer able to retain hard copies of annual audits. Hard copy audits will be discarded after use. GEFA requests the submittal of electronic audits. (List by year)

	electronic (enclosed)	electronic (at website)	hard copy (enclosed)
FY <u>04</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/> www. _____	<input type="checkbox"/>
FY <u>05</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/> www. _____	<input type="checkbox"/>
FY <u>06</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/> www. _____	<input type="checkbox"/>
FY <u>07</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/> www. _____	<input type="checkbox"/>

2. **UNAUDITED ACCOUNTING DATA:** If the audit for your most recently ended fiscal year is greater than 12 months old, please enclose interim summary-level financial statements (Statement of Revenues and Expenses). Also include cash reserve balances, as of the most recent month end, for the general fund and water/sewer enterprise fund(s). Please indicate if cash balances are reserved or restricted.

Enter the fiscal year covered by this unaudited data: FY 08

B. **BOND ORDINANCE:** If you have outstanding bond debt which was issued during last 3 years, please submit a copy of the most recent official statement or revenue bond ordinance in electronic format. Please include the name and the date of bond issuance below: **(Mail Documents)**

See attached \_\_\_\_\_ Date: \_\_\_\_\_

(If none, write in "NONE")

C. **AMORTIZATION SCHEDULE:** Copy of a complete amortization schedule (including principal and interest) for all revenue bond issues currently outstanding (or proposed as part of the project covered under this application) on the water/sewer system, if any. **(Mail Documents)**

D. **GEFA FUNDING METHOD:** The funding method to pay debt service costs of the project:

Name of fund(s): Water Rates

- Type of fund. Check one:
- 1. Service charges and fees only
  - 2. Service charges and general revenues combined
  - 3. General revenues only
  - 4. Local option sales tax or other dedicated revenue source

E. **DESIRED GEFA AMORTIZATION PERIOD:** GEFA loans are normally assigned amortization periods based on the loan principal as follows: Less than \$100,000 (10 years); \$100,000 - \$499,999 (15 years); \$500,000 and over (20 years).

If you would like an amortization period different from these guidelines, please indicate the preferred number of years:

- 5 Years     10 Years     15 Years     20 Years

F. **FINANCIAL DESIGN REPORTS:** If applicable to community, please check the appropriate documents and attach a copy of: **(Mail Documents)**

- Financial Reports Reviewing Economy, Demand and Costs
- Rate Study
- Current Year Operating Budget for Water/Sewer and General Operations
- Revenue and Expense Financial Forecasts for the Water/Sewer and/or other Applicable Fund
- Project Funding Plan and/or Capital Improvements Plan, together with any and all assumptions from which the report is based
- And other report(s) that define the customer base (number or customers, usage, etc.)

Number of documents enclosed ( 1 )      Name(s) and date(s) of documents enclosed:

Utility 2009 Approved Budget Report

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

G. **WATER/SEWER RATE STRUCTURE:** Copy of ordinance or other document which defines the water and/or sewer rates for your jurisdiction. Please write the title and effective date of the document enclosed:

Title: City Charter Article VI, Municipal Utilities Sec. 64      Effective date: 12/6/05

**(Mail Rate Structures)**

Current Rate Structure (Effective Dates):      \$ 02/01/06

Prior Rate Structure (Effective Dates):      \$ 01/01/05

Planned Future Rate Structure (Effective Dates):      \$ 01/09 & 01/10



**III. PROJECT FINANCIAL DESIGN**

A. **AMOUNT REQUESTED:** The principal amount of loan being requested of GEFA: \$ 4,000,000.00

**B. FORECASTED REVENUES & EXPENSES:**

By what amount are annual revenues and expenses projected to increase or decrease as a result of THIS PROJECT AND OTHER PLANNED CHANGES?

Enter appropriate amounts below for the next three fiscal years and explain the rationale for any assumptions used: 1) additional customers 2) rate increase 3) other revenues 4) increase (decrease) in operating and maintenance (O&M) costs 5) debt service for issuance of new debt.

	FY( )	FY( )	FY( )
<b>1. New Customers/Revenue:</b>			
Projected number of new customers each year (not cumulative)	# <u>0</u>	# <u>0</u>	# <u>0</u>
Residential	# _____	# _____	# _____
Commercial	# _____	# _____	# _____
Industrial	# _____	# _____	# _____
Other (e.g. Apt. Complexes, Malls)	# _____	# _____	# _____
Projected New Service Revenue (not cumulative)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Projected New Tap/Connection/Impact Fees Available for Operations (not cumulative)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
<b>2. Rate increase:</b>			
Projected new revenue each year (not cumulative)	\$ _____	\$ _____	\$ _____
Projected % increase	_____ %	_____ %	_____ %
<b>3. Additional Increases to Revenue</b> (not cumulative):			
Other _____	\$ _____	\$ _____	\$ _____
Regular Population Growth (not cumulative)	\$ _____	\$ _____	\$ _____
SPLOST (Referendum Attached)	\$ _____	\$ _____	\$ _____
<b>4. O&amp;M Expenses Increases:</b> (not cumulative)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
<b>5. New "Non-GEFA" debt service:</b>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>

Indicate the source and principal amount of other loan funds that will be used for this project (i.e. USDA, local bond issue, bank financing).

\$ 0 Source: \_\_\_\_\_

\$ 0 Source: \_\_\_\_\_

**IV. WATER/SEWER SYSTEM OPERATIONS INFORMATION – Current Customer Base Analysis**

Complete the following information as of the last day of the last month preceding the submission date of this application. If the answer for any block is "NONE", put NONE or 0- rather than leaving it blank.

	WATER		SEWER	
	A. inside jurisdiction	B. outside Jurisdiction	C. inside jurisdiction	D. outside jurisdiction
1. # of customers <b>RESIDENTIAL</b>	5191	2380	4971	681
	Average use per residential customer: <u>4,000</u> gal/mo.		Average use per residential customer: <u>4,000</u> gal/mo.	
2. # of customers <b>COMMERCIAL</b>	765	87	706	37
	Average use per commercial customer: <u>12,000</u> gal/mo.		Average use per commercial customer: <u>9,000</u> gal/mo.	
3. # of customers <b>INDUSTRIAL</b>	1	1	1	0
	Average use per industrial customer: <u>1,763.0</u> gal/mo.		Average use per industrial customer: <u>1,170.0</u> gal/mo.	
4. # of customers with <u>un</u> -metered service	40	0	0	0

**V. FINANCIAL INFORMATION**

A. **FISCAL YEAR:** Fiscal year ending date: 12/31  
(month - day)

B. **PROPERTY TAX COLLECTIONS:** Property tax collections for the last 3 audited years:

	FY <u>05</u>	FY <u>06</u>	FY <u>07</u>
Property Taxes Collected	\$ <u>1,953.18</u>	\$ <u>2,083.50</u>	\$ <u>2,073.11</u>
Property Taxes Levied	\$ <u>2,004.76</u>	\$ <u>2,104.22</u>	\$ <u>2,290.70</u>

C. **PROPERTY VALUES:** Assessed and market (100%) value of taxable real and personal property (Including public utilities, but not automobiles) for the most recent audited year.

	FY <u>07</u>
Assessed Value	\$ <u>345,922.8</u>
Fair Market Value	\$ <u>864,807.2</u>

Please mail the completed forms and attachments to:

**Mr. Chris Clark, Executive Director**  
Georgia Environmental Facilities Authority  
233 Peachtree Street, NE, Harris Tower - Suite 900  
Atlanta, Georgia 30303-1506

