**EXCLUSIVE SERVICE AREA DECLARATION FORM**

**EASTERN CONNECTICUT WUCC**

**INSTRUCTIONS:**

Please answer all questions in Sections 1 and 2 and Sections A through H. Please feel free to attach additional sheets if necessary, or expand the size of answer boxes if necessary.

For additional information regarding the exclusive service area declaration process, or if you have questions, please contact any of the Eastern WUCC Officers, or contact Mr. Scott Bighinatti of Milone & MacBroom, Inc. at 203-271-1773 x204 or sbighinatti@mminc.com.

Kindly return this form completed and signed, and with any pertinent attachments, to Mr. Scott Bighinatti of Milone & MacBroom, Inc., 99 Realty Drive, Cheshire, Connecticut, 06410 via mail, fax (203-272-9733), or email (listed above).

**SECTION 1. DECLARANT INFORMATION**

Water Utility or Municipality Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing or Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Town, State, Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary Contact Person & Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Secondary Contact Person & Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 2. DESCRIPTION OF AREA CLAIMED BY DECLARANT AS EXCLUSIVE SERVICE AREA**

All area within the municipal boundaries of Ashford, Brooklyn, Canterbury, Chaplin, Eastford, Hampton, Killingly, Plainfield, Pomfret, Putnam, Scotland, Sterling, Thompson, Union, Windham, and Woodstock, with the exception of those parcels of land currently served by public water systems, are open to declarants as proposed exclusive service area boundaries.

1. Please provide a written description in the box below of your proposed exclusive service area boundary. If you are claiming only a portion of land within any of the above municipalities, please provide a general description of the limits of your proposed exclusive service area. For example, “all of town A” or “the portion of town B as generally bounded by street C, street D, street E, and the municipal boundary with town F”. Attach additional pages if necessary.
2. If you are only claiming a portion of a municipality, please attach a clear delineation of your proposed exclusive service area boundary on a map for each portion of a municipality you are claiming.

**SECTION A. SUPPORTING INFORMATION RELATED TO EXISTING WATER SERVICE AREA**

Please answer the following questions. Attach additional sheets, if necessary.

1. Do you currently own and operate a public water system within each municipality in your proposed exclusive service area? If no, indicate the municipalities in which you do not currently own and operate a system.
2. If you answered yes in Question 1, are you planning on expanding your existing service area in the future? If yes, describe your general expansion plans for the five-year, 20-year, and 50-year planning periods. Does your proposed ESA encompass areas outside of your proposed 50-year expansion area as noted in your most recent Water Supply Plan?
3. If you answered yes in Question 2, are you planning on servicing your entire proposed exclusive service area via an extension of your existing system, or will some or all of the areas need to be served through satellite systems? Please describe your intentions.

**SECTION B. SUPPORTING INFORMATION RELATED TO EXISTING LAND USE PLANS, ZONING REGULATIONS, AND GROWTH TRENDS**

Please answer the following questions. Attach additional sheets, if necessary.

1. Describe your familiarity with the local, regional, and state land use plans, local zoning regulations, and recent local growth trends within each municipality in your proposed exclusive service areas.
2. Identify the person or group at your utility or municipality responsible for reviewing and/or enforcing such plans and regulations, and what other groups serve to advise your utility or municipality on changes in land use and new developments at the local level.
3. Do the current zoning, land use plans, and growth trends in the municipalities in your proposed exclusive service area currently suggest that new public water systems, or an extension of public water systems, will be needed?
4. Do the current zoning and land use plans in the municipalities in your proposed exclusive service area identify areas where public water and/or public sewer service avoidance policies are being sought, and are therefore unlikely to require public water service in the immediate future?
5. Are you familiar with the current water supply planning regulations (Regulations of Connecticut State Agencies Section 25-32d) and how they relate to existing land use within each municipality that is served?

**SECTION C. PHYSICAL LIMITATIONS TO WATER SERVICE**

Please answer the following questions. Attach additional sheets, if necessary.

1. If you will serve any or all of your proposed exclusive service area via an extension of your existing service area, will you need to develop new sources of supply to do so? In other words, do you have sufficient excess available water supply to reasonably serve the proposed exclusive service area?
2. If you will serve any or all of your proposed exclusive service area via satellite systems, please identify any known areas in your proposed exclusive service area where bedrock yields are poor and/or groundwater contamination has affected groundwater quality.

**SECTION D. POLITICAL BOUNDARIES**

Please answer the following questions. Attach additional sheets, if necessary.

1. Does your proposed exclusive service area cross political boundaries, such as municipal or borough boundaries?
2. If you will serve any or all of your proposed exclusive service area via an extension of your existing service area, will water come from sources across municipal or other jurisdictional boundaries?

**SECTION E. WATER COMPANY RIGHTS AS ESTABLISHED BY STATUTE, SPECIAL ACT, OR ADMINISTRATIVE DECISIONS**

Please answer the following questions. Attach additional sheets, if necessary.

1. Do you have any right to provide water service within your proposed exclusive service area by virtue of State Statute? If yes, please cite the statute below. Note that if you are a municipality, please be reminded that you are authorized by Connecticut General Statute 7-234 of 1967 to provide water service to your municipality. You may cite that section below.
2. Do you have any right to provide water service within your proposed exclusive service area by virtue of a Special Act of the Connecticut General Assembly? If yes, please provide a copy of the Special Act.
3. Do you have any right to provide water service within your proposed exclusive service area by virtue of an Administrative Decision made by a State Agency? For example, the result of a DPH consent order or a PURA Docket? If yes, please provide a copy of the Administrative Decision.
4. Do you have any right to provide water service within your proposed exclusive service area by virtue of a municipal law or ordinance, such as per a section in the Town Charter that establishes a Water Pollution Control Authority? If yes, please provide a copy.

**SECTION F. SYSTEM HYDRAULICS, INCLUDING POTENTIAL ELEVATIONS OR PRESSURE ZONES**

Please answer the following questions. Attach additional sheets, if necessary.

1. If you will serve any or all of your proposed exclusive service area via an extension of your existing service area, will you need to install additional storage tanks or pumping stations to do so? If yes, please provide a general description of needs.
2. Describe your utility’s or municipality’s experience with system hydraulics, including managing elevation changes and pressure zones.

**SECTION G. ABILITY OF A WATER SYSTEM TO PROVIDE A PURE AND ADEQUATE SUPPLY OF WATER NOW AND INTO THE FUTURE**

Please answer the following questions. Attach additional sheets, if necessary.

1. Please describe your current source water protection program for protecting current and future sources of supply.
2. If you will serve any or all of your proposed exclusive service area via satellite systems, do you have experience owning and operating such systems? Please describe.
3. Please describe your technical capacity to operate a public water system. Will you own and operate new systems, or do you expect to own new systems and retain a contract operator to perform the day to day tasks?
4. Please describe your managerial capacity to operate a public water system. What hierarchy is in place to make decisions? How quickly can/will decisions be able to be made during an emergency? Describe your experience with long term planning of infrastructure assets.
5. Please describe your financial capacity to operate a public water system. Is capital funding for emergency repairs available? Is there a capital improvement budget available for long term asset replacement? What types of financial resources can be utilized to maintain a system? Is there financing available to retain consultants and contractors to design and implement repairs?
6. If you currently provide public water service, please describe the number and types of complaints received by your utility for the past three years.
7. If you will serve any or all of your proposed exclusive service area via an extension of your existing service area, please describe any water quality or reporting violations incurred over the past two years.
8. If you will serve any or all of your proposed exclusive service area via an extension of your existing service area, please describe any potential concerns related to disinfection byproducts that may need to be evaluated with any main extension.
9. Please describe the type of rate structure envisioned within your proposed exclusive service area, and provide the estimated annual cost of water service for a family of four using 109,500 gallons[[1]](#footnote-1) per year.

**SECTION H. OTHER CONSIDERATIONS**

Please answer the following questions. Attach additional sheets, if necessary.

1. Are you aware of any other municipalities or water utilities who may declare for the same proposed exclusive service area, thereby creating a conflict? If yes, please describe.
2. If yes, have you corresponded with said municipality or utility concerning this potential conflict? In an effort to avoid conflicts, public water systems and municipalities are encouraged to coordinate their efforts in declaring exclusive service areas. Contact the Eastern WUCC Officers for contact information.

**CERTIFICATION**

In accordance with the Regulations of Connecticut State Agencies Section 25-33h-1(k)(2), I understand that water utilities are responsible for providing adequate service as requested by consumers and under terms otherwise provided by statue, regulation and ordinance within their exclusive service area boundaries within a reasonable time frame. This may include but not be limited to development of supply sources, main extensions, or satellite management.

Furthermore, I, undersigned below, am presently aware of no reason why the utility represented on this form and any associated attachments would not be capable of providing pure and adequate supply of water to service the proposed exclusive service area in accordance with all applicable regulatory requirements, within a reasonable timeframe of requests by customers, should the proposed exclusive service area boundaries be accepted by the Eastern Water Utility Coordinating Committee and the Connecticut Department of Public Health pursuant to Public Act 85-535, as amended.

Signature of

Duly Authorized Representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Print or Type Name and Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Calculated at 75 gallons per person per day x 4 people x 365 days in a year. [↑](#footnote-ref-1)