

Introduction

Thank you for your interest in our water utility survey. Our agency, the Office of Community Services, administers the Low Income Household Water Assistance Program (LIHWAP), the first-ever low-income federal water assistance program. LIHWAP provides funding to states, tribes, and territories across the United States to help low-income households with their water and wastewater bills. With this survey, we are trying to better understand the scope of water and wastewater debt so that we can help ensure that both households and utilities get the money and support they need. This program directly benefits utilities by providing payments on behalf of customers who are behind on their water or wastewater bills. This survey will take 30 minutes or less to complete and is broken into 6 sections. Your information will be kept private.

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to gather data related to water and sewer costs so we can better assist LIHWAP grantees. Public reporting burden for this collection of information is estimated to average 30 minutes per respondent, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a voluntary collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The OMB # is 0970-0531 and the expiration date is 09/30/2025. If you have any comments on this collection of information, please contact Gwen Donley at gwendolyn.donley@acf.hhs.gov.



| Utility Information |
|--|
| $ \label{lem:continuous} The following \ questions \ will \ ask \ you \ some \ basic \ information \ about \ your \ water \ utility. $ |
| 1. Approximately how many residential connections do you have (as of December 1, 2022)? |
| |
| 2. What is the size of your administrative staff? (Administrative staff includes staff who are |
| responsible for customer service, billing, support, etc.) |
| Less than 3 |
| 3-5 |
| More than 5 |
| 3. Which of the following services do you provide? (Check all that apply) |
| Water |
| Wastewater |
| 4. What is your water source? (Check all that apply) |
| Groundwater |
| Surface water |
| 5. What is the ownership structure of your utility? (Check all that apply) |
| Publicly owned (i.e., owned by commissions, municipalities, etc.) |
| Privately owned (i.e., owned by a corporation, Homeowners Association, etc.) |
| Tribally owned |
| Other (please specify) |
| |
| |

| What is the approxima stewater? | |
|---------------------------------|---|
| <5 | |
| 5-50 | |
| 51-100 | |
| >100 | |
| | |
| | rea defined? (Check all that apply) |
| Neighborhood/Communi | ity |
| Municipality | |
| Zip Code(s) | |
| Public Service Area | |
| HOA | |
| County | |
| er (please specify) | |
| | |
| ase expand on your ar | nswer to question 7. What is your service area? |
| ase expand on your ar | nswer to question 7. What is your service area? |
| ase expand on your ar | nswer to question 7. What is your service area? |
| ase expand on your ar | nswer to question 7. What is your service area? |
| ase expand on your ar | nswer to question 7. What is your service area? |
| ase expand on your ar | nswer to question 7. What is your service area? |
| ase expand on your ar | nswer to question 7. What is your service area? |
| ase expand on your ar | nswer to question 7. What is your service area? |
| ase expand on your ar | nswer to question 7. What is your service area? |
| ase expand on your ar | nswer to question 7. What is your service area? |
| ase expand on your ar | nswer to question 7. What is your service area? |
| ase expand on your ar | nswer to question 7. What is your service area? |
| ase expand on your ar | nswer to question 7. What is your service area? |
| ase expand on your ar | nswer to question 7. What is your service area? |
| ase expand on your ar | nswer to question 7. What is your service area? |
| ase expand on your ar | nswer to question 7. What is your service area? |



| Disconnection |
|---|
| 9. At any point during the 2022 calendar year, was there a moratorium that disallowed residential water or sewer service shut-offs? |
| Yes |
| ○ No |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |



| ~ · | | | |
|------------|-----|-----|------|
| 1100 | anı | വകവ | tion |

The following questions refer to residential accounts to whom you provide water or wastewater services.

| Water Utility Affordability Survey |
|--|
| |
| Arrearages |
| The following questions refer to residential accounts to whom you provide water or |
| wastewater services. Please answer to the best of your ability. |
| 12. Please estimate how many residential accounts fell behind (arrearages) on their water |
| and/or wastewater bills at any point during the 2022 calendar year: |
| |
| 13. What was the average amount of money owed (arrearages) per residential account (out of |
| those that owed an arrearage at any point in 2022)? |
| |
| 14. What is the total amount of money owed (arrearages) as of December 1, 2022 that your |
| utility is owed for water and/or wastewater bills? |
| |



EPA Size Category

| 15. What is the population size served by your utility? |
|---|
| Very small (<500 people) |
| Small (501-3,300 people) |
| Medium (3,301-10,000 people) |
| Large (10,001-100,000 people) |
| Very Large (>100,000 people) |

Rates

The following questions refer to residential accounts to whom you provide water or wastewater services

| wastewater services. |
|--|
| 16. What is your billing frequency? |
| ○ Monthly |
| Quarterly |
| Twice Annually |
| Annually |
| 17. What is your base rate for water services per billing period (\$)? |
| 18. How many gallons or cubic feet are included in your base rate per billing period? |
| 19. Is your flow rate/volume charge measured using gallons or cubic feet? |
| Gallons |
| Cubic feet |
| 20. What is your flow rate/volume charge for water services per billing period? \$ per gallon/cubic |
| 21. Is your wastewater charged by a flat fee? |
| ○ Yes |
| ○ No |

| water Utility Alfordability Survey | |
|--------------------------------------|--|
| Rates, Continued | |
| 22. Wastewater flat fee amount (\$): | |



| ed |
|----|
| l |

| Rates, Continued | | |
|----------------------------|---------------------------------|--|
| 23. Is your wastewater fee | e charged based on water usage? | |
| Yes | | |
| ○ No | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

| Water Utility Affordability Survey | |
|------------------------------------|--|
| Rates, Continued | |
| 24. If no, please explain: | |
| | |
| | |



Other Fees, Shut-Off Fee

Our federal program, LIHWAP, is able to cover costs related to unpaid or late bills, disconnections, and other fees, so we are interested in learning about the types of fees charged by utilities. In collecting this information, we are not evaluating or critiquing your utility's policies.

| 26. Shut-off fee amount | (\$): | | |
|-------------------------|-------|--|--|
| | | | |



| ther Fees, | , Late Fee | | | | | |
|------------|----------------|---------------|--------------|---------|--|--|
| | our utility ch | arge late fee | e(s) on bill | s owed? | | |
| Yes | v | J | | | | |
| O No | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| Other F | ees, Late | Fee . | Amoι | ınt |
|---------|-----------|-------|------|-----|
|---------|-----------|-------|------|-----|

| 28. Late fee amount (\$): | | |
|---------------------------|--|--|
| | | |



| 29. Does your utility charge other fees (ex: interest on unpaid balances, collection fees)? Yes No | Other Fees, Ado | ditional |
|--|-----------------|---|
| Yes | 29. Does your | utility charge other fees (ex: interest on unpaid balances, collection fees)? |
| ○ No | Yes | |
| | O No | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

| Water Utility Affordability Survey |
|---|
| Other Fees, Describe |
| 30. Please describe other fees: |
| |
| 31. If there are any other details related to rates, disconnections, arrearages, or fees that you |
| would like to add, please do so here: |
| |

Contact Information

All of your information will be kept private. We will use this to make sure we don't collect duplicate responses and for data quality verification.

| 32. Your name(s): | |
|----------------------|--|
| | |
| | |
| 33. Name of the ut | ility you work for: |
| | |
| 34. Primary addres | es of the utility. |
| | ss of the utility: |
| Address | |
| Address 2 | |
| City/Town | |
| State/Province | select state |
| ZIP/Postal Code | |
| | |
| 35. Your job title(s |) or role(s): |
| | |
| 36. Phone (including | ar area code). |
| 50. I none (meruan | |
| | |
| 37. Email address: | |
| | |
| | |
| 38. May we con | tact you if we have any questions about your survey responses? |
| | |
| Yes | |

| Water | Utility | Affordability | y Survey |
|-------|---------|---------------|----------|
| | | | |

| \sim | | |
|--------|------|---|
| | osin | - |
| | | |
| | | |

| water and wastewater needs of communities across the country, and how programs like the Low Income Household Water Assistance Program can help both households and utilities. We appreciate your time. If you have any questions or concerns, please reach out to Gwendolyn Donley at gwendolyn.donley@acf.hhs.gov. | | | | |
|---|--|--|--|--|
| 39. If you would like to add any comments or additional details, please do so here: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |