



# State of Connecticut Department of Public Health

## Drinking Water Section

### Sanitary Survey Capacity Questionnaire



Your PWS is due for a routine sanitary survey this calendar year. As a regulated PWS, you have regulatory responsibilities\* associated with the survey. Completing the brief questionnaire below will fulfill several of these requirements and should only take a few minutes. Your answers will also enable DWS to provide better technical assistance to your PWS based on your individual needs. Please email the completed survey to [DPHCapacity@ct.gov](mailto:DPHCapacity@ct.gov) **within 30 days of receipt**. Any questions can also be emailed to that address. You will be contacted by a DPH Engineer to schedule a sanitary survey of your PWS this year.

PWS Name:

PWS ID:

Please list the correct current owner/legal contact for this PWS. The Legal Contact is the system owner or person(s) who is authorized to bind and act on behalf of the owner of that system.

<b>Name</b>		<b>Address</b>	
<b>Title</b>		<b>City, State, Zip</b>	
<b>Signature</b>		<b>Daytime Phone</b>	
<b>Email</b>		<b>Emergency Phone</b>	

Technical Capacity Questions		Yes	No	Comment
T1	a) Has your system had instances where demand exceeded your supply (e.g. low pressure or no pressure)?			
	b) Has your well(s) pumping rate decreased or system demand increased in the last 5 years?			
	c) Does your PWS regularly read meters and promptly addresses leaks?			
T2	Does your PWS own or control the sanitary radius** for each groundwater source of supply?			If no, please explain:
T3	a) System has emergency power capability for all critical facilities?			If no, please explain:
T4	System has an up to date DPH-approved Sampling Site Plan? (Sampling Point Inventory with Location Map)			

Managerial Capacity Questions		Yes	No	Comment
M1	a) Does your PWS have a Certified Operator?			
	b) Does your PWS ownership meet routinely with the certified operator to review water system operations and needs?			Please elaborate:
M2	Does your PWS have by-laws, resolutions, or ordinances and are reviewed at least biennially			
M3	Individuals deemed in direct responsible charge are clearly defined and legally empowered in by-laws or by ordinances to act on behalf of the system?			

Managerial Capacity Questions Cont'd		Yes	No	Comment
M4	Does your PWS have an up-to-date map showing all water system facilities?			
M5	a) Does your PWS track and have a program to reduce unaccounted for water loss?			
	b) Does your PWS have metered service connections?			
	c) Does your PWS conduct leak detection surveys?			Frequency:
M6	Is there a process to address water emergencies 24 hours a day for the PWS?			Please elaborate:
M7	Does your PWS maintain water system records per applicable record retention schedules?			

Financial Capacity Questions		Yes	No	Comment
F1	Does your PWS calculate the annual costs of operating and maintaining the system, including depreciation, reserve funds for capital improvements, and other expenses?			
F2	a) Do you bill customers for water? If yes, please explain the method for billing customers.			Briefly explain:
	b) Does the customer billing cover all annual costs including depreciation, future expenses and infrastructure replacement?			
F3	Does your PWS have rules, regulations, and/or by-laws that cover billing and address delinquent payments?			
F4	Does your PWS have a Fiscal and Asset Management (F&AM) plan? (for PWS serving >1,000 these may be separate plans)			
F5	Has your PWS set up a reserve fund for emergency costs or if not, does the PWS have the legal authority to levy special assessments on customers for unexpected large expenses?			
F6	Does your PWS have fiscal controls to ensure monies are collected and spent appropriately?			Briefly explain:
F7	Does your PWS have an insurance policy that covers the water system assets and/or board liability?			Please elaborate:

\* Your responses to this survey are part of this public water system's regulatory and statutory requirements, specifically RCSA Section 19-13-B102(l), (o), (p), (r), (s) and (w) and CGS 19a-37e

\*\* Sanitary Radius Requirements for Groundwater Sources of Supply

Well pump Withdrawal Rate in gpm:	<10	10-50	>50
Sanitary Radius	75'	150'	200'