



Chicago Metropolitan
Agency for Planning

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www.cmap.illinois.gov

2008 Survey of Water Utilities

Northeastern Illinois



This survey is part of an ongoing collaborative planning process within the eleven counties of Northeastern Illinois, focusing on water supply and demand. Please see the attached brochure for more information about the new state and regional water supply planning initiatives.

To take this survey ONLINE instead of filling out the paper version, go to <http://www.cmap.illinois.gov/watersupply/utillsurvey/>.

Section I: Utility Operations

1. How many employees are there in your utility (full time equivalency)?

- 1 – 10
- 11 - 20
- 21 - 50
- 51 - 100
- 100 or more

2. What is your utility's approximate annual operating budget?

(Excluding capital expenditures)

3. What is your utility's approximate annual capital budget?

4. What is the estimated total residential population served by your utility?

(Retail only)

5. Utility infrastructures are often built over time. Please estimate the percentage of your utility's infrastructure that was built in each of the time periods shown below.

<u>Time Period</u>	<u>Percent</u>
Prior to 1950	_____
1950 - 1979	_____
1980 - 1999	_____
2000 - 2008	_____
<i>All Years Combined</i>	<i>100%</i>

6. Does your utility have plans to expand its infrastructure?

- Yes → 6A. What is the expected time horizon for the planned expansion?
 - Within 5 years
 - At least 5 years but less than 10 years
 - 10 years or more
- No → Go to Question 8

7. What are the primary factors driving plans to expand your facility?

8. How much of a challenge is each of the following issues to your utility?

	<i>Not a Challenge</i>	<i>Somewhat Challenging</i>	<i>Very Challenging</i>
A. Aging Infrastructure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Leakage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Lack of Water Supply	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Funding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Staffing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Water Treatment Costs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Capacity to Meet Peak Demand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. Water Quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Retail Price for Water Too Low	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J. Water Security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K. Energy Costs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
L. Expected Growth in Demand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M. Something else, specify below	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. What is your utility's ratio of metered-to-pumped water?

$$\left(1 - \frac{\text{Metered}}{\text{Pumped}}\right) \times 100$$

- 4% or lower
- 5% - 8%
- 9% - 12%
- 13% or higher

10. What percent of your service connections are metered?

- 100%
- 75% - 99%
- 50% - 74%
- 25% - 49%
- Fewer than 25%

Section II: Supply and Demand

1. How much water does your utility purchase wholesale?

_____ (amount)

_____ (units)

2. What is your total annual self-supplied water supply?

_____ (amount)

_____ (units)

3. If your utility includes self-supplied water, please indicate the source(s) below (by percent).

<u>Time Period</u>	<u>Percent</u>
Ground Water (shallow aquifer)	_____
Ground Water (deep aquifer)	_____
Lake Michigan	_____
Fox River	_____
Kankakee River	_____
All Self-Supplied Water Combined	100%

4. About how much water did your utility deliver on an average-demand day in 2007?

_____ (amount)

_____ (units)

5. About how much water did your utility deliver on the maximum-demand day in 2007?

_____ (amount)

_____ (units)

6. What is the maximum capacity of water that you can supply with your current infrastructure?

_____ (amount)

_____ (units)

7. Which of the following best describes your utility's retail rate structure for residential customers?

- Flat rate (may include base fees and/or service charges)
- Inclining block rates
- Declining block rates
- Seasonal rates
- Other, specify _____

8. Which of the following best describes your utility's retail rate structure for commercial/industrial customers?

- Flat rate (may include base fees and/or service charges)
- Inclining block rates
- Declining block rates
- Seasonal rates
- Other, specify _____

9. What is your minimum residential rate for 1,000 gallons of water? _____

10. What is your minimum commercial/industrial rate for 1,000 gallons of water? _____

11. To help us better understand varying rates charged by utilities in Northeastern Illinois, please attach a copy of your rate schedule to this survey. If you are completing the survey online, you can fax the rate schedule to (312) 386-8649 or email it to sperpignani@cmap.illinois.gov.

(check when completed)

12. On your customer bills, what is the unit of water billed?
(for example, 1 unit = 1,000 gallons) _____

13. On your customer bills, is there an explanation of what a "unit" of water means?

- Yes
- No

14. How often do you bill your retail customers?

- Monthly
- Bi-Monthly
- Quarterly
- Other, specify _____

15. Does your utility offer a wastewater sewer credit for outdoor use?

- Yes
- No

Section III: Water Conservation

1. Please indicate which conservation measures your utility currently implements and your utility's level of interest in learning more about each.

	<u>Currently Implement</u>		<u>Interested in Learning?</u>			
	Yes	No	No Interest	Low Interest	Medium Interest	High Interest
A. Public Information Campaigns	<input type="checkbox"/>	<input type="checkbox"/> →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Conservation Pricing/Graduated Rates	<input type="checkbox"/>	<input type="checkbox"/> →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Greywater Recovery/Treatment	<input type="checkbox"/>	<input type="checkbox"/> →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Home Water-Use Audits	<input type="checkbox"/>	<input type="checkbox"/> →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Outdoor Water-Use Restrictions (Odd/Even)	<input type="checkbox"/>	<input type="checkbox"/> →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Outdoor Water-Use Restrictions (Time-Based)	<input type="checkbox"/>	<input type="checkbox"/> →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Plumbing Retrofit Kits	<input type="checkbox"/>	<input type="checkbox"/> →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. Residential Native Landscaping	<input type="checkbox"/>	<input type="checkbox"/> →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Toilet Replacement Rebates	<input type="checkbox"/>	<input type="checkbox"/> →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J. Conservation Coordinator Staffing	<input type="checkbox"/>	<input type="checkbox"/> →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K. Rain Shut-Off Device Rebates	<input type="checkbox"/>	<input type="checkbox"/> →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
L. System Audits and Leak Detection	<input type="checkbox"/>	<input type="checkbox"/> →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M. Clothes Washer Rebates	<input type="checkbox"/>	<input type="checkbox"/> →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N. Incentives & Targets for Commercial/Industrial Customers	<input type="checkbox"/>	<input type="checkbox"/> →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
O. Wholesaler Incentives	<input type="checkbox"/>	<input type="checkbox"/> →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
P. Water Waste Prohibition Policies	<input type="checkbox"/>	<input type="checkbox"/> →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. What was your 2007 budget for conservation programs?

(Excluding infrastructure replacement)?

- \$0
- \$1 - \$4,999
- \$5,000 - \$49,999
- \$50,000 - \$99,999
- \$100,000 or more

3. About how much of your 2007 conservation budget was dedicated to public information and education?

- 10% or less
- 11% - 25%
- 26% - 50%
- More than 50%
- Does not apply (no conservation budget)

4. How do you distribute information about your water conservation efforts or programs to your customers?

(Check ALL that apply)

- Bill insert
- Utility Newsletter
- Village/Town/City Newsletter
- Newspapers
- Radio or TV
- Collaborate with schools (give tours, train teachers about water science, etc.)
- Other, specify _____
- Does not apply (no conservation budget)

5. How are your conservation programs funded *(Check ALL that apply)*

- Enterprise Funds (sales revenue)
- General Funds
- Special Fees
- State Grants
- Federal Grants
- Non-Governmental Grants
- Other, specify _____
- Does not apply (no conservation budget)

6. Have your conservation efforts reduced capital or operating expenses for your utility?

- Yes
- No
- Don't Know
- Does not apply (no conservation budget)

7. Please indicate your level of interest in receiving assistance with calculating estimated cost savings associated with conservation:

- | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|
| No Interest | Low Interest | Moderate Interest | High Interest |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

8. Do you have any comments about conservation programs you have already implemented or are considering?

Please provide a contact person who can be reached if follow-up information is required.

Name of Utility

Contact Name

Title

Phone

Thank you for taking the time to complete this questionnaire. Please feel free to contact CMAP with questions or comments.



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