

PUBLIC ENTITY PAK EXPOSURE SURVEY WATER UTILITY

Named Insured: _____ **State:** _____

City-owned and operated Independent Water District Public Entity Not-for-Profit

1. Annual payroll (less clerical) \$ _____ Total number of employees: _____
Annual Revenues: \$ _____
Gallons of water sold annually: _____
2. Number of users: Residential: _____ Commercial: _____ Industrial: _____ Mile radius of area served: _____ miles
Are all facilities fenced? Yes No
Are you responsible for open reservoirs of water? Yes No
If yes, how many acres? _____
How do you limit access? _____
3. Is water provided to neighboring entities? Yes No
If yes, describe and provide copies of contracts. _____
4. How old is your system? _____ Is your system continuously upgraded? Yes No
Frequency: Annually Bi-annually Other: _____
5. Does Entity have an EPA compliance program in place? Yes No
If yes, who audits compliance? _____
Are all water treatment employees certified as required by Law? Yes No
If no, explain: _____
Do you do any water treatment or testing for others? Yes No
If yes, explain: _____
6. Has system ever been cited or fined for non-compliance with required standards? Yes No
If yes, please provide details, copy of non-compliance notice(s) and action(s) taken to correct problem(s). _____

7. Does Entity contract any part of water operations (construction, maintenance, inspection, etc.)? Yes No
Does Entity require sub-contractors to carry limits of insurance equal to Entity's limits of liability? Yes No
Are Certificates of insurance obtained verifying coverage? Yes No
Do you contract out major construction such as well drilling, excavation, and water tower construction? Yes No
If yes, what percent of total work? _____%
Do you contract out repair work? Yes No
If yes, what percent of total work? _____%
Do you do construction and repair work for others? Yes No
If yes, explain: _____

8. Are you in compliance with regulatory requirements for maintenance and replacement of lines? Yes No
If no, provide details. _____

