

Municipal Wastewater Planning Program (MWPP)
Annual Report
for the year ending 2019
HYRUM CITY

Thank you for filling out the requested information. Please let DWQ know when it is approved by the Council.

Please download a copy of your form by clicking "Download PDF" below.

Below is a summary of your responses

[Download PDF](#)

SUBMIT BY APRIL 15, 2020

Are you the person responsible for completing this report for your organization?

☒ **Yes**

☐ **No**

This is the current information recorded for your facility:

Facility Name:	HYRUM CITY
Contact - First Name:	Kevin
Contact - Last Name:	Maughan
Contact - Title	City Administrator

Contact - Phone:	435-245-3123
Contact - Email:	kmaughan@hyrumcity.com

Is this information above complete and correct?

☒ **Yes**

☐ No

Your wastewater system is described as Collection, Mechanical Treatment & Financial:

Classification: COLLECTION

Grade: II

(if applicable)

Classification: TREATMENT

Grade: III

Is this correct?

WARNING: If you select 'no', you will no longer have access to this form upon clicking Save & Continue. DWQ will update the information and contact you again.

☒ **Yes**

☐ No

Click on a link below to view examples of sections in the survey:
(Your wastewater system is described as Collection, Mechanical Treatment & Financial)

[MWPP Collection System.pdf](#)

[MWPP Discharging Lagoon.pdf](#)

[MWPP Financial Evaluation.pdf](#)

[MWPP Mechanical Plant.pdf](#)

[MWPP Non-Discharging Lagoon.pdf](#)

Will multiple people be required to fill out this form?

☐ Yes

☒ No

Financial Evaluation Section

Form completed by:

Kevin Maughan

Part I: GENERAL QUESTIONS

Yes

No

Are sewer revenues maintained in a dedicated purpose enterprise/district account?



Yes

No

Are you collecting 95% or more of your anticipated sewer revenue?



Are Debt Service Reserve Fund⁶ requirements being met?



What was the User Charge¹⁶ for 2019?

42

Do you have a water and/or sewer customer assistance program * (CAP)?

☐ Yes

☒ No

Part II: OPERATING REVENUES AND RESERVES

Yes

No

Are property taxes or other assessments applied to the sewer systems¹⁵?

☐

☒

Yes

No

Are sewer revenues¹⁴ sufficient to cover operations & maintenance costs⁹, and repair & replacement costs¹² (OM&R) at this time?

☒

☐

Are projected sewer revenues sufficient to cover OM&R costs for the *next five years*?

☒

☐

Does the sewer system have sufficient staff to provide proper OM&R?

☒

☐

Has a repair and replacement sinking fund¹³ been established for the sewer system?

☒

☐

Is the repair & replacement sinking fund sufficient to meet anticipated needs?

☒

☐

Part III: CAPITAL IMPROVEMENTS REVENUES AND RESERVES

Yes

No

Are sewer revenues sufficient to cover all costs of current capital improvements³ projects?

☒

☐

of current capital improvements projects?
Has a Capital Improvements Reserve Fund⁴
been established to provide for anticipated
capital improvement projects?

Yes

No



Are projected Capital Improvements Reserve
Funds sufficient for the *next five years*?



Are projected Capital Improvements Reserve
Funds sufficient for the *next ten years*?



Are projected Capital Improvements Reserve
Funds sufficient for the *next twenty years*?



Part IV: FISCAL SUSTAINABILITY REVIEW

Yes

No

Have you completed a Rate Study¹¹ within the
last five years?



Do you charge Impact fees⁸?



2019 Impact Fee =

2358

Yes

No

Have you completed an Impact Fee Study in
accordance with UCA 11-36a-3 within the last
five years?



Do you maintain a Plan of
Operations¹⁰?



Have you updated your Capital Facility Plan²
within the last five years?



within the last five years.

Yes

No

Yes

No

Do you use an Asset Management¹ system for your sewer systems?

☒☐

Describe the Asset Management System (check all that apply)

- ☒ **Spreadsheet**
- ☒ **GIS**
- ☒ **Accounting Software**
- ☐ Specialized Software
- ☐ Other

Yes

No

Do you know the total replacement cost of your sewer system capital assets?

☒☐

2019 Replacement Cost =

5043717

Yes

No

Do you fund sewer system capital improvements annually with sewer revenues at 2% or more of the total replacement cost?

☒☐

What is the sewer/treatment system annual asset renewal* cost as a percentage of its total replacement cost?



What is the sewer/treatment system annual asset renewal* cost as a percentage of its total replacement cost?

2

Part V: PROJECTED CAPITAL INVESTMENT COSTS

Cost of projected capital improvements

	Cost Please enter a valid numerical value	Purpose of Improvements		
		Replace/Restore	New Technology	Increase Capacity
2020	5000000	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2020 thru 2024	250000	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2025 thru 2029	250000	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2030 thru 2034	500000	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2035 thru 2039	10000000	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

This is the end of the Financial questions

To the best of my knowledge, the Financial section is completed and accurate.

☒ Yes

Collections System Section

Form completed by:

May Receive Continuing Education /units (CEUs)

Kevin Maughan

Part I: SYSTEM DESCRIPTION

What is the largest diameter pipe in the collection system (diameter in inches)?

24

What is the average depth of the collection system (in feet)?

13

What is the total length of sewer pipe in the system (length in miles)?

42

How many lift/pump stations are in the collection system?

na

What is the largest capacity lift/pump station in the collection system (design capacity in gallons per minute)?

na

Do seasonal daily peak flows exceed the average peak daily flow by 100 percent or more?

percent or more?

☐ Yes

☒ No

What year was your collection system first constructed (approximately)?

1975

In what year was the largest diameter sewer pipe in the collection system constructed, replaced or renewed? (If more than one, cite the oldest)

1975

PART II: DISCHARGES

How many days last year was there a sewage bypass, overflow or basement flooding in the system due to rain or snowmelt?

0

How many days last year was there a sewage bypass, overflow or basement flooding due to equipment failure (except plugged laterals)?

0

The Utah Sewer Management Program defines two classes of sanitary sewer overflows (SSOs):

Class 1- a Significant SSO means a SSO or backup that is not caused by a private lateral obstruction or problem that:

(a) affects more than five private structures;

(b) affects one or more public, commercial or industrial structure(s);

(c) may result in a public health risk to the general public;

- (c) may result in a public health risk to the general public,
(d) has a spill volume that exceeds 5,000 gallons, excluding those in single private structures; or
(e) discharges to Waters of the state.

Class 2 - a Non-Significant SSO means a SSO or backup that is not caused by a private lateral obstruction or problem that does not meet the Class 1 SSO criteria.

Below include the number of SSOs that occurred in year: 2019

Number

Number of Class 1 SSOs in Calendar year

0

Number of Class 2 SSOs in Calendar year

0

Please indicate what caused the SSO(s) in the previous question.

na

Please specify whether the SSOs were caused by contract or tributary community, etc.

na

Part III: NEW DEVELOPMENT

Did an industry or other development enter the community or expand production in the past two years, such that flow or wastewater loadings to the sewerage system increased by 10% or more?

☐ Yes

☒ **No**

Are new developments (industrial, commercial, or residential) anticipated in the next 2 - 3 years that will increase flow or BOD5 loadings to the sewerage system by 25% or more?

☒ **Yes**

☐ No

Number of new commercial/industrial connections in the last year

0

Number of new residential sewer connections added in the last year

40

Equivalent residential connections⁷ served

120

Part IV: OPERATOR CERTIFICATION

How many collection system operators do you employ?

4

Approximate population served

9000

State of Utah Administrative Rules requires all public system operators considered to be in Direct Responsible Charge (DRC) to be appropriately certified at least at the Facility's Grade.

List the designated Chief Operator/DRC for the Collection System below:

	Name First and Last Name	Grade	Email Please enter full email address
Chief Operator/DRC	Kevin Maughan	IV	kmaughan@hyrumcity.com

List all other Collection System operators with DRC responsibilities in the field, by certification grade, separate names by commas:

	Name separate by comma
SLS ¹⁷ Grade I:	
Collection Grade I:	
Collection Grade II:	
Collection Grade III:	
Collection Grade IV:	Tom Broadbent

List all other Collection System operators by certification grade, separate names by commas:

	Name separate by comma
SLS ¹⁷ Grade I:	
Collection Grade I:	
Collection Grade II:	Chris Crockett-Jeff Jorgensen
Collection Grade III:	

Collection Grade IV:

Name

separate by comma

No Current Collection Certification:

Is/are your collection DRC operator(s) currently certified at the appropriate grade for this facility?

☒ Yes

☐ No

Part V: FACILITY MAINTENANCE

Yes

No

Have you implemented a preventative maintenance program for your collection system?

☒

☐

Have you updated the collection system operations and maintenance manual within the past 5 years?

☒

☐

Do you have a written emergency response plan for sewer systems?

☒

☐

Do you have a written safety plan for sewer systems?

☒

☐

Is the entire collections system TV inspected at least every 5 years?

☒

☐

Is at least 85% of the collections system mapped in GIS?

☒

☐

Part VI: SSMP EVALUATION

Yes

No

Has your system completed a Sewer System Management Plan (SSMP)?

☒

☐

Management Plan (SSMP):

Yes

No

Has the SSMP been adopted by the permittee's governing body at a public meeting?

☒☐

Has the completed SSMP been public noticed?

☒☐

During the annual assessment of the SSMP, were any adjustments needed based on the performance of the plan?

☐☒

Date of Public Notice

04/28/2014

During 2019, was any part of the SSMP audited as part of the five year audit?

☒ Yes

☐ No

If yes, what part of the SSMP was audited and were changes made to the SSMP as a result of the audit?

grease oil and sand management no changes

Have you completed a System Evaluation and Capacity Assurance Plan (SECAP) as defined by the Utah Sewer Management Program?

☒ Yes

☐ No

Part VII: NARRATIVE EVALUATION

This section should be completed with the system operators.

Describe the physical condition of the sewerage system: (lift stations, etc. included)

good condition

What sewerage system capital improvements³ does the utility need to implement in the next 10 years?

up sizing of some possible restricted lines

What sewerage system problems, other than plugging, have you had over the last year?

none

Is your utility currently preparing or updating its capital facilities plan²?

☐ Yes

☒ **No**

Does the municipality/district pay for the continuing education expenses of operators?

☒ **100% Covered**

☐ Partially cover

☐ Does not pay

Is there a written policy regarding continuing education and training for wastewater operators?

☒ **Yes**

☐ No

Any additional comments?

na

This is the end of the Collections System questions

To the best of my knowledge, the Collections System section is completed and accurate.

☒ Yes

Mechanical Plant Section

Form completed by:
May Receive Continuing Education /units (CEUs)

Kevin Maughan

Part I: INFLUENT INFORMATION

Please provide the average influent flow rate and average influent BOD₅ and TSS loading rates listed below for your facility.

	Average Daily Flow (MGD)	Average Daily BOD ₅ Load (lb/day)	Average Daily TSS Load (lb/day)
Design Basis or Rated Capacity	2	2385	2168
2019 Average	1.14	1302	1649

Part II: EFFLUENT INFORMATION

How many Notices of Violation (NOVs) did you receive for this facility in the review year?

0

How many days in the past year was there a bypass or overflow of wastewater at the facility due to high flows?

0

Part III: FACILITY AGE

In what year were the following process units constructed, upgraded or renewed?

Note: If a unit process does not apply to your system enter the Evaluation Year under Construction or Upgrade Year.

	Evaluation Year	Construction or Upgrade Year	Age
Headworks	2019	2004	16
Primary Treatment	2019	2004	16
Secondary Treatment	2019	2004	16
Tertiary Treatment	2019	2004	16
Solids Handling	2019	2002	18
Disinfection	2019	2004	16
Land Application/Disposal	2019	2004	16

PART IV: DISCHARGES

How many days in the last year was there a bypass or overflow of wastewater at the facility due to equipment failure?

0

PART V: BIOSOLIDS HANDLING

Biosolids Disposal (check all that apply)

	Yes	No
Landfill	<input type="radio"/>	<input checked="" type="radio"/>
Land Application	<input checked="" type="radio"/>	<input type="radio"/>
Give Away/Other Distribution	<input type="radio"/>	<input checked="" type="radio"/>

Part VI: NEW DEVELOPMENT

Number of new commercial/industrial connections in the last year

0

Number of new residential sewer connections added in the last year

40

Equivalent residential connections⁷ served

120

Part VII: OPERATOR CERTIFICATION

How many treatment system operators do you employ?

4

State of Utah Administrative Rules requires all public system operators considered to be in Direct Responsible Charge (DRC) to be appropriately certified at least at the Facility's Grade.

List the designated Chief Operator/DRC for the Wastewater Treatment System below:

	Name First and Last Name	Grade	Email Please enter full email address
Chief Operator/DRC	Kevin Maughan	IV	kmaughan@hyrumcity.com

List all other Wastewater Treatment System operators with DRC responsibilities in the field, by certification grade, separate names by commas:

	Name separate by comma
SLS ¹⁷ Grade I:	
Treatment Grade I:	
Treatment Grade II:	
Treatment Grade III:	
Treatment Grade IV:	Kevin MAughan-Tom Broadbent

List all other Wastewater Treatment System operators by certification grade, separate names by commas:

	Name separate by comma
SLS ¹⁷ Grade I:	
Treatment Grade I:	
Treatment Grade II:	Chris Crockett-Jeff Jorgensen
Treatment Grade III:	
Treatment Grade IV:	

Is/are your DRC operator(s) currently certified at the appropriate grade for this facility?

- ☒ Yes
- ☐ No

Part VIII: FACILITY MAINTENANCE

	Yes	No
Have you implemented a written preventative maintenance program for your treatment system?	<input checked="" type="radio"/>	<input type="radio"/>
Have you updated the treatment system operations and maintenance manual within the past 5 years?	<input checked="" type="radio"/>	<input type="radio"/>

Identify the types of treatment equipment and processes installed at your facility.

	Yes	No
Screens	<input checked="" type="radio"/>	<input type="radio"/>


	Yes	No
Grit Removal	<input checked="" type="radio"/>	<input type="radio"/>
Primary Clarifiers	<input type="radio"/>	<input checked="" type="radio"/>
Imhoff Tanks	<input type="radio"/>	<input checked="" type="radio"/>
Fixed Film Reactor	<input type="radio"/>	<input checked="" type="radio"/>
Activated Sludge	<input checked="" type="radio"/>	<input type="radio"/>
Aerobic Suspend Growth Variations	<input type="radio"/>	<input checked="" type="radio"/>
Anaerobic Suspended Growth variations	<input type="radio"/>	<input checked="" type="radio"/>
Physical-chemical systems for organic removal w/o secondary treatment	<input type="radio"/>	<input checked="" type="radio"/>
Physical-chemical systems for organic removal following secondary treatment	<input type="radio"/>	<input checked="" type="radio"/>
Membrane Filtration	<input checked="" type="radio"/>	<input type="radio"/>
Suspended-growth Nitrification and Denitrification	<input type="radio"/>	<input checked="" type="radio"/>
Air Stripping	<input type="radio"/>	<input checked="" type="radio"/>
Phosphorus Removal - Chemical	<input checked="" type="radio"/>	<input type="radio"/>
Phosphorus Removal - Biological	<input type="radio"/>	<input checked="" type="radio"/>
Ion Exchange	<input type="radio"/>	<input checked="" type="radio"/>
Reverse Osmosis	<input type="radio"/>	<input checked="" type="radio"/>
Media Filtration	<input type="radio"/>	<input checked="" type="radio"/>
Dissolved Air Flotation	<input type="radio"/>	<input checked="" type="radio"/>
Micro Screens	<input checked="" type="radio"/>	<input type="radio"/>
Chlorine Disinfection	<input type="radio"/>	<input checked="" type="radio"/>
UV Disinfection	<input checked="" type="radio"/>	<input type="radio"/>
Effluent disinfection	<input checked="" type="radio"/>	<input type="radio"/>

This is the end of the Mechanical Plant questions

To the best of my knowledge, the Mechanical Plant section is completed and accurate.

☒ **Yes**

I have reviewed this report and to the best of my knowledge the information provided in this report is correct.


clear

Has this been adopted by the council? If no, what date will it be presented to the council?

☐ Yes

☒ **No**

What date will it be presented to the council?

Date format ex. mm/dd/yyyy

05/07/2020

Please log in.

Email

kmaughan@hyrumcity.com

PIN

....

NOTE: This questionnaire has been compiled for your benefit to assist you in evaluating the technical and financial needs of your wastewater systems. If you received financial assistance from the Water Quality Board, annual submittal of this report is a condition of that assistance. Please answer questions as accurately as possible to give you the best evaluation of your facility. If you need assistance, please send an email to wqinfodata@utah.gov and we will contact you as soon as possible. You may also visit our [Frequently Asked Questions](#) page.

Powered by Qualtrics 