APPENDIX J

SAMPLE SATELLITE SYSTEM MANAGEMENT AGREEMENTS AND PRELIMINARY SURVEY CHECKLIST

Included in this Appendix are:

- Satellite System Management Agreement
- Transfer of Ownership Agreement
- Preliminary Survey Checklist

SATELLITE SYSTEM MANAGEMENT AGREEMENT

	CONTRACT NO.	•
herein	s an Agreement between nafter called the Utility, andess	
City		State Zin
herein Contra	nafter called the Contractor. The act/Support Services as prescribed in parts.	StateZip nis Agreement is for the provision of paragraph I below.
	1	
	<u>UTILITY S</u>	SERVICES
A.	Scope of Services - The services to Attachment 1 (describe services, wo performance in appropriate order).	to be provided are descried below or on rk methods, location or work, and times of
B.	Sum or Negotiated Fee basis as dec Charges for Services.	performed by the Utility on either a Lump scribed below or on Attachment 2, List of
	I	I
	AGREEMENT	AND PARTIES
of this change	Agreement and by reference are inco	, as attached, shall apply as the terms orporated herein. The parties agree that all writing. This Agreement is in lieu of all
Utility		Date
Contra	actor	Date

III

RECORD OF CHANGE/MODIFICATION

Letter Date	Topic	Signatory	Accepted by Utility					
(Copies of all letters or modifications must be signed by the Utility and attached hereto and a copy returned to the Contractor.)								
		IV	7					
		STANDARD	CLAUSES					
		IV[A]					
<u>Situs</u> : The parties hereto agree that the situs of this Agreement and the law governing its interpretation is the State of Washington and the laws of that State.								
		IV[B]					
<u>Professional</u> , <u>Paraprofessional</u> , and <u>Secretarial Fees</u> : The fees for service provided the Utility shall be based on the salary schedules as set forth by the Utility and in effect on the date of this Agreement, and by reference are incorporated herein. All sums billed to client under this clause shall be payable in full 30 days following receipt of billing.								
		IV[C]					
Travel Expenses be billed on the			d with tasks covered under this contract will					
		IV[D]					
form setting for shall bear interes	th specific exc st at% f cted in full to	eptions and u or the first 30 ogether with 1	at any sums billed, not disputed in written inpaid after 30 days from the billing date, days past due, and% annually therelegal fees, court costs, and administrative					

LIABILITY AND CANCELLATION RIGHTS

The liability of the Utility is limited to its applicable insurance coverage. In any event, the Contractor shall provide the Utility, by entering into this contract, all necessary authorization for access, egress, billing rights, contracting rights, and hold harmless clauses from injury or damage associated with Utility action in conducting the defined Scope of Services.

Either party hereto may cancel this Agreement by rendering written notice duly posted to the Utility, or to the Contractor at the address noted hereon. However, the duration of Contract Services are required to extend for 1 year renewable periods unless previously agreed to. Notice of termination must be received 60 days prior to the desired termination date.

VI

ATTACHMENTS INCLUDED BY REFERENCE IN THIS CONTRACT

TRANSFER OF OWNERSHIP AGREEMENT

CONTRACT NO.

City			State	Zip	
Address City hereinafter called	the Applicant.	This Agreem	ent is for the	transfer of c	ownership of the ter system to the
Utility.					-
		I			
	TRAN	ISFER OF O	WNERSHIP	>	
the	d operation res ansferred at no abide by the C ocuments identi	sponsibility for cost to the U Jeneral Term	or the Itility. All e s, Condition	existing and f	future customers es of the Utility.
1. 2. 3. 4. 5.	Property Titl Easements Utility Franc Transfer of V Bill of Sale	hises (examp	oles)		
		II			
	<u>OUTSTANI</u>	DING LIENS	OR LITIGA	ATION	
The seller warran	ts that there are	no liens or t	axes or othe	r purposes oi	utstanding at the

III

time of this purchase against the property of the said system or lawsuits pending against

the said system.

USER CHARGES

The seller warrants that there have been no promises of any beneficial rates to any customer presently or in the future which may be served by this system.

AGREEMENT AND PARTIES

this contract and by reference are in	I to as attached shall apply as the terms of accorporated herein. The parties agree that all be in writing. This contract is in lieu of all others
Utility	Date
Contractor	Date

PRELIMINARY SURVEY CHECKLIST

Section VI of the Regional Supplement describes a Utility Service Review Procedure (USRP) and prequalification of Satellite System Management Agencies (SSMA). When either a proposed new water service or an existing water utility is identified for Satellite System Management, the applicant must request a determination of and service requirements by the SSMA.

When the SSMA is to assume ownership of a system, it will require a new system to be constructed, and existing systems to be upgraded, to meet minimum standards.

After a formal request is made for service, the SSMA will make a preliminary survey of items in the following checklist which shall be used to estimate costs of improvement, operation, and maintenance. The applicant will review the survey to verify accuracy. The applicant may also choose to authorize, either by contract or with the SSMA, an engineering feasibility study. If the applicant approves the feasibility study or checklist findings, and authorizes the SSMA to proceed, the identified improvements may be made and the SSMA may assume operational responsibility according to the SSMA agreement.

SATELLITE SYSTEM PRELIMINARY SURVEY CHECKLIST

SYSTEM NAME:		
CONTACT:	PHONE:	
SSMA NAME:		• • • • • • • • • • • • • • • • • • • •
CONTACT:	PHONE:	

		162	NU	N/A.
SOU	RCE No./Location			
500	NO.7 LOCACION			
Α.				
	1. Concrete slab around casing		·	<u> </u>
	2. Casing extends 6 inches above floor			<u></u>
	 Sanitary well seal installed 			ļ
	4. Water level measuring device			
	5. Electrical controls within approved control panel			<u> </u>
	6. Source protected against freezing			ļ
	 Control valving and electrical controls operating properly 			
	8. Well log available			 -
	9. Surface seal at least 18 feet deep			
	J. Darrace Scar at Icase to feet deep			
В.	· · · · · · · · · · · · · · · · · · ·			
	1. 4 hour pump test conducted			
	 Water rights equal or exceed pumping capacity 			
	3. Water rights in the owners name			
	4. Master meter present and operating properly			
	 Pumping capacity equal to peak day demands 			
	[(0.55 gpm) x (# services) = peak day demands]			-
	Pump Setting Present Static Level			
	Normal Pumping Level Seasonal Variation			
C.	Quality			
٥.	1. Satisfactory sanitary control area of at least			
	100 feet			
	2. Satisfactory bacteriological test results within			
	last 3 years			
	3. Satisfactory chemical test results within last			
	3 years			
	4. Satisfactory turbidity or radionuclide test results	-		
	within last 3 years			
	5. Treatment equipment and procedures adequate			
	6. Chlorination equipment in separate, vented room			
	7. Adequate chlorine contact time			
Cor	taminants Needing Removal			
	sible Source of Contamination			
D.	Improvements Needed			
υ.	Improvements Needed			

Mo./Location Imping Equipment Operating properly Pump properly sized Pump rating: HP			
Operating properly Pump properly sized Pump rating: HP Flow Head Pump protection a. Hand-off-automatic switch b. Operation light present c. Pump operation timer d. Start and stop pump controls adequate e. Low liquid level shutoff f. Low pressure shutoff Pump discharge piping a. Pressure gauge with shutoff b. Check valve c. Pump control valve d. Shutoff valve e. Sampling tap f. Master water meter			
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b. Check valvec. Pump control valved. Shutoff valvee. Sampling tapf. Master water meter			
d. Shutoff valvee. Sampling tapf. Master water meter			
e. Sampling tap f. Master water meter			
f. Master water meter		, , ,	
Recording Flow Indicator			
		1	1
. Pump mounting adequate			
Equipped with auxiliary power or power connection			
Equipment with phase protection			
. Any irregular noise or vibration from pump or motor			
O. Satisfactory amperage check for pump motor			
1. Have pump or motor ever been rebuilt? If so,			
when?		-	
umphouse			
. Cement slab floor			
. Adequate floor drain			
. Vented			
. Heated			
. Insulated			_ _
. Adequate lighting			
. Free from electrical hazards			
. Pumphouse locked			
. Is overall condition of pumphouse satisfactory			
O Any leaks from pining			
o. Mry reaks from prpring			
	umphouse Cement slab floor Adequate floor drain Vented Heated Insulated Adequate lighting Free from electrical hazards Pumphouse locked	mphouse Cement slab floor Adequate floor drain Vented Heated Insulated Adequate lighting Free from electrical hazards Pumphouse locked Is overall condition of pumphouse satisfactory	mphouse Cement slab floor Adequate floor drain Vented Heated Insulated Adequate lighting Free from electrical hazards Pumphouse locked Is overall condition of pumphouse satisfactory Any leaks from piping

			ies	NO	N/A
2	· amo	DAGD N /T		÷	
3.	STO	RAGE No./Location			
	Α.	Gravity Storage			
		1. Capacity: gallons			
		2. Screened ventilation provided			
		3. Tank outlet through bottom			
		4. Tank inlet and outlet separate			
		5. Overflow pipe provided			
		6. Tank drain through bottom			
		7. Tank drain separate from inlet and outlet piping			
		8. Watertight and lockable hatch			ļ
		9. Exterior ladder usable and access controlled			<u> </u>
		10. Interior ladder provided			<u> </u>
		11. Visual level gauges present and operating properly			<u> </u>
		12. Roof watertight			-
		13. Any visible leaks			<u> </u>
		14. Interior paint adequate			<u> </u>
		15. Exterior paint adequate			<u> </u>
		16. Liquid level controls operate adequately			<u>-</u>
		17. Low level alarm provided			
		18. Site adequately fenced			
		19. Top of ground level reservoir at least 24 inches			
		above normal ground surfaces			
		20. Does drain and overflow discharge in an acceptable location			
		21. Valve to isolate from system			
		22. Is altitude valve present and operating properly		<u> </u>	
		22. Is alcreade valve present and operating properly	-		•
	В.	Hydropnuematic Tank System			
		1. Tank Size		İ	
		a. ASME approved with pressure relief		<u> </u>	
		b. Manway			
		c. Water level gauge			
		d. Air release valve			
		e. Protective coating adequate			,
		f. Bypass piping provided			<u> </u>
		2. Air makeup adequate			<u> </u>
	C	Tourse and March 1			
	C.	Improvements Needed			

DIST	TRIBUTION SYSTEM No./Location			
Α.			ŀ	1
Α.				
			!	
	1. Type of pipe: PVC AC Iron			
	2. Adequate depth of cover			+
	3. Is majority of piping looped		 	
	4. Is all pipe diameter 6 inches or larger			
	For smaller pipe: (except service lines)	ļ		
	Pipe diameter Lineal Feet (est.)			
	Pipe diameter Lineal Feet (est.)			
	Pipe diameter Lineal Feet (est.)			
			,	
	5. Adequate fire flows available			
	6. Are fire hydrants or standpipes installed			+-
	7. Adequate separation distances between fire hydrants			+
	8. Isolation valves on all fire hydrants			┼
	9. 30 psi minimum pressure at all services		-	┼
	10. More than one pressure zone? How Many			
	Pressure Zone Elevation Range			
	Pressure Zone Elevation Range			
	Pressure Zone Elevation Range			
	11. Are pressure reducing stations operating			
	satisfactorily			
	12. Are booster stations operating satisfactorily			
	13. Are there any individual pressure reducing or			
	booster systems. If so, who maintains them?			
				1
В.	• 3			
	1. Satisfactory bacteriological results within last yr.		ļ	
	2. Satisfactory chloride and conductivity results			
	within last 3 years	l		
	3. Any customers within individual wells		ļ	
	4. Adequate cross connection control			
	5. Blow-off valves at deadend lines or at low eleva-			
	6. Adequate number of valves for repairs		ļ	
	7. Any leaks			1
			1	1
C.	Individual Services			1
	1. Are all services metered			\perp
	2. Do all services have a corporation and curb stop			
	3. Is meter installation satisfactory			
	4. Are services compatible for meter installations			
	5. Type of service pipe			

CHECKLIST PRIOR TO CONSTRUCTION

Α.	Prelin	ninary	
	1.	Application Form completed and fee paid	Applicant
	_ 2.	Application approved and plans ordered	SSMA
	3.	Paid first installment of extension fee \$	Developer
В.	Requi	red Before Plans are Started	÷
	1.	Final plat filed with County	Applicant
	2.	Road plan and profile filed with engineer	Applicant
C.	Requi	red Before Extension is Staked in Field	
	1.	Plans and specifications	Engineer
	_ 2.	Department of Social and Health Services or County	Bugineer
		for approval of plans	Engineer
	3. 4. 5. 6. 7. 8.	Application for State and/or County permits	Applicant
	4.	Approval of contractor	SSMA
	5.	Performance Bond	Applicant
	6.	Certificate of insurance	Applicant
	_ 7.	Easements	Applicant
		County and State permits	Applicant
	0. 9.		
	_ io.	Property boundary stakes in place	Applicant
	_ 10.	Estimated inspection fees paid \$	Applicant
D.	Requi	red Before Construction Begins	
	1.	Final installment of extension fee paid \$	Applicant
	_ 2.	Notice to engineer to stake	SSMA
	3.	Construction stakes in place	Engineer
	4.	48-hour notice of construction start	SSMA
	5.	Start card notice (72 hour) for well construction	SSMA
Ε.	Requi	red Before any Service Connected	
	1.	Approval of construction	SSMA
	2.	Easement paid	Applicant
	3.	Bill of Sale	Applicant
	— 4.	All extra charges paid	Applicant
	 5.	Acceptance of work	SSMA
		Additional inspection fees paid \$	Applicant
F.	To be	Done 1 Year After Acceptance	
	1.	Final inspection just prior to end of year	SSMA
	_ 2.		SSMA
G.	Misce	llaneous	
	1.	Bill of sale recorded	Attornor
	— ·	Easements recorded	Attorney
	_ 2.	Agebuilt drawings furnished	Attorney
	—	As-built drawings furnished	Engineer
	2. 3. 4. 5.	Letter of availability of water for plat	SSMA
	,	Excess fees refunded \$	SSMA
Н.	Assign	ned Design Engineer -	