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ARIZONA CORPORATION COMMISSION

March 2, 2007
Arizona Corporation Commission
DOCKETED

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AZ CORP COMMISSION
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CERTIFIED MAIL

Mr. Craig Marks
3420 East Shea Boulevard
Suite 200
Phoenix, Arizona 85024

RE: Beardsley Water Company, Inc. – Arizona American Water Company Joint Application for Approval to Realign Their Certificated Water Service Territories in Maricopa County, Arizona. Docket Nos. W-02074A-07-0079 and W-01303A-07-0079

SUFFICIENCY LETTER

Dear Mr. Marks:

The joint application of Beardsley Water Company and Arizona-American Water Company (“the Companies”) for approval to realign their certificated areas with the City of Surprise has met the sufficiency requirements as outlined in the Arizona Administrative Code (“A.A.C.”). Pursuant to the A.A.C. R14-2-411(C) for water and R14-2-610(C) for wastewater, the Commission has 150 calendar days to approve or reject this application after it is deemed sufficient. This time period will encompass the filing of Staff’s recommendation, an evidentiary hearing, a Recommended Opinion and Order and a Decision from the Commission.

However, attached is Staff’s first set of data requests to the Companies. Please respond within 10 business days.

If you have any questions concerning this matter, please do not hesitate to contact me at 602-542-0859 or Katrin Stukov at 602-542-0941.

Yours truly,

Linda A. Jaress
Executive Consultant III

LAJ:tdp

cc: Docket Control
Del Smith
Lyn Farmer
Mr. Steven A. Hirsch, Bryan Cave LLP

DATA REQUEST

There are seven Parcels (service areas) referenced in the submitted application. Provide the following information to demonstrate the ability of each affected public water system ("PWS") to serve those parcels:

1. Projected number of water customers in each parcel.
2. The PWS Number of each public water system that will serve each affected parcel.
3. Current Compliance Status Report from Maricopa County Environmental Services Department.
4. A statement from ADWR indicating that the utilities are in compliance with monitoring and reporting requirements.
5. Provide a statement from the City of Surprise indicating its willingness and ability to serve parcels 'A' and 'B'.
6. For Beardsley and Arizona-American's affected water systems provide:
 - a) Water Plant Description (attached).
 - b) Water Use Data Sheet, including arsenic data for each well (attached).
7. Provide any responses received by either company to the notice to the landowners of the changes in their water provider.
8. If any notices are returned due to non-delivery, provide the Companies' further efforts to contact the landowners.

COMPANY NAME	
Name of System	ADEQ Public Water System Number (if applicable)

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled

* Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME:	
Name of System	ADEQ Public Water System Number (if applicable)

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2006

MONTH/YEAR	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY				
FEBRUARY				
MARCH				
APRIL				
MAY				
JUNE				
JULY				
AUGUST				
SEPTEMBER				
OCTOBER				
NOVEMBER				
DECEMBER				
TOTALS →				

What is the level of arsenic for each well on your system? _____ mg/l
(If more than one well, please list each separately.)

If system has fire hydrants, what is the fire flow requirement? _____ GPM for _____ hrs

If system has chlorination treatment, does this treatment system chlorinate continuously?
 Yes No

Is the Water Utility located in an ADWR Active Management Area (AMA)?
 Yes No

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?
 Yes No

If yes, provide the GPCPD amount: _____

Note: If you are filing for more than one system, please provide separate data sheets for each system.