



# New Mexico Rural Water Association

Providing the highest quality training and technical assistance to rural water and wastewater utilities throughout New Mexico, and representing the legislative and regulatory interests of our members

## 2020 SYSTEM Information Form

System Name \_\_\_\_\_ Water System ID Number \_\_\_\_\_

Physical Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Primary Contact Name \_\_\_\_\_ Position \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

System Type: MDWCA  Cooperative  W&SD  Municipal  Private  Other

Services Provided: Water  Wastewater  Solid Waste  Other  \_\_\_\_\_

Is your system metered? \_\_\_\_\_ Type of Water Treatment \_\_\_\_\_ Principal County Served \_\_\_\_\_

Current Loans / Grants: USDA RD  NMFA/State  NMFA/SRF  \_\_\_\_\_ Other

Number of Residential Connections \_\_\_\_\_ Number of Non-Residential Connections \_\_\_\_\_ Population Served \_\_\_\_\_

Water Source(s): Surface Water  Well Water  Spring Water  Purchased Water

Average Residential Water Rate \_\_\_\_\_ Average Commercial Water Rate \_\_\_\_\_

Residential Gallons Water Sold \_\_\_\_\_ Non-residential Gallons Water Sold \_\_\_\_\_ Annual Water Revenue \_\_\_\_\_

Bulk Gallons Sold \_\_\_\_\_ Age of System \_\_\_\_\_ Last Major Rehab \_\_\_\_\_

Minimum Level Water Certification Required to Operate Your System (circle one): SW SWA 1 2 3 4

Number of Residential Wastewater Connections \_\_\_\_\_ Non-Residential Connections \_\_\_\_\_ Population Served \_\_\_\_\_

Residential Gallons Treated \_\_\_\_\_ Non-Residential Gallons Treated \_\_\_\_\_ Annual Sewer Revenue \_\_\_\_\_

Age of System \_\_\_\_\_ Last Major Rehab \_\_\_\_\_ Primary Wastewater Treatment Technology \_\_\_\_\_

Minimum Level Wastewater Certification Required to Operate Your System: (circle one) SWW SWWA 1 2 3 4

Water Operator Name \_\_\_\_\_ Certification Level \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Wastewater Operator Name \_\_\_\_\_ Certification Level \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_