F		
Facility Name: Milwaukee City	Last Updated:	Reporting Year: 2006
	5/10/2007	. •

Financial Management

treatment plant AND/OR collection system? Yes (0 points) O No (40 points) If No, please explain: 3. When was the User Charge System or other revenue source(s) last reviewed and/or revised? Year: 2005 O-2 years ago (0 points) O 3 or more years ago (20 points) O Not Applicable (Private Facility) 4. Did you have a special account (e.g., CWFP required segregated Replacement Fund, etc.) or financial resources available for repairing or replacing equipment for your wastewater treatment plant and/or collection system? Yes O No (40 points) REPLACEMENT FUNDS(PUBLIC MUNICIPAL FACILITIES SHALL COMPLETE QUESTION 5)			Questions	Points
Telephone: E-Mail Address(optional): Are User Charge or other Revenues sufficient to cover O&M Expenses for your wastewater treatment plant AND/OR collection system? Yes (0 points) No (40 points) No (40 points) 1 Point year: 2005 O Not Applicable (Private Facility) Did you have a special account (e.g., CWFP required segregated Replacement Fund, etc.) or financial resources available for repairing or replacing equipment for your wastewater treatment plant and/or collection system? Pyes No (40 points) REPLACEMENT FUNDS(PUBLIC MUNICIPAL FACILITIES SHALL COMPLETE QUESTION 5) Equipment Replacement Funds 5.1 When was the Equipment Replacement Fund last reviewed and/or revised? Year: 2005 1-2 years ago (0 points) Not Applicable Explain: 5.2 What amount is in your Replacement Fund? Equipment Replacement Fund Activity 5.2.1 Ending Balance Reported on Last Year's CMAR: 1 nipaesary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)	1.	Person Providing This Finan	cial Information	
E-Mail Address(optional): njaber@mpw.net Are User Charge or other Revenues sufficient to cover O&M Expenses for your wastewater treatment plant AND/OR collection system? Yes (0 points) No (40 points) 1 No, please explain: 1 0 0-2 years ago (0 points) 3 or more years ago (20 points) Not Applicable (Private Facility) 4 Did you have a special account (e.g., CWFP required segregated Replacement Fund, etc.) or financial resources available for repairing or replacing equipment for your wastewater treatment plant and/or collection system? Yes No (40 points) REPLACEMENT FUNDS(PUBLIC MUNICIPAL FACILITIES SHALL COMPLETE QUESTION 5) 5. Equipment Replacement Funds 5.1 When was the Equipment Replacement Fund last reviewed and/or revised? Year: 2005 1-2 years ago (0 points) 3 or more years ago (20 points) Not Applicable Explain: 5.2 What amount is in your Replacement Fund? Equipment Replacement Fund Activity 5.2.1 Ending Balance Reported on Last Year's CMAR: 5.2.2 Adjustments if necessary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)		Name:	Nader Jaber	
Are User Charge or other Revenues sufficient to cover O&M Expenses for your wastewater treatment plant AND/OR collection system? Yes (0 points) O No (40 points) If No, please explain: 1 O-2 years ago (0 points) O 3 or more years ago (20 points) O Not Applicable (Private Facility) 4 Did you have a special account (e.g., CWFP required segregated Replacement Fund, etc.) or financial resources available for repairing or replacing equipment for your wastewater treatment plant and/or collection system? Yes O No (40 points) REPLACEMENT FUNDS(PUBLIC MUNICIPAL FACILITIES SHALL COMPLETE QUESTION 5) Equipment Replacement Funds 5.1 When was the Equipment Replacement Fund last reviewed and/or revised? Year: 2005 1-2 years ago (0 points) O 3 or more years ago (20 points) O 3 or more years ago (20 points) C 4 or more years ago (20 points) C 5.2 What amount is in your Replacement Fund? Equipment Replacement Fund Activity 5.2.1 Ending Balance Reported on Last Year's CMAR: fi necessary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)		Telephone:	(414) 286-0514	
treatment plant AND/OR collection system? Yes (0 points) O No (40 points) If No, please explain: When was the User Charge System or other revenue source(s) last reviewed and/or revised? O-2 years ago (0 points) O 3 or more years ago (20 points) O Not Applicable (Private Facility) Did you have a special account (e.g., CWFP required segregated Replacement Fund, etc.) or financial resources available for repairing or replacing equipment for your wastewater treatment plant and/or collection system? Yes O No (40 points) REPLACEMENT FUNDS(PUBLIC MUNICIPAL FACILITIES SHALL COMPLETE QUESTION 5) Equipment Replacement Funds 5.1 When was the Equipment Replacement Fund last reviewed and/or revised? Year: 2005 1-2 years ago (0 points) O 3 or more years ago (20 points) O Not Applicable Explain: 5.2 What amount is in your Replacement Fund? Equipment Replacement Fund Activity 5.2.1 Ending Balance Reported on Last Year's CMAR: 1 occessary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)		E-Mail Address(optional):	njaber@mpw.net	
O No (40 points) If No, please explain: When was the User Charge System or other revenue source(s) last reviewed and/or revised? O-2 years ago (0 points) O 3 or more years ago (20 points) O Not Applicable (Private Facility) Jid you have a special account (e.g., CWFP required segregated Replacement Fund, etc.) or financial resources available for repairing or replacing equipment for your wastewater treatment plant and/or collection system? Yes O No (40 points) REPLACEMENT FUNDS(PUBLIC MUNICIPAL FACILITIES SHALL COMPLETE QUESTION 5) Equipment Replacement Funds 5.1 When was the Equipment Replacement Fund last reviewed and/or revised? Year: 2005 1-2 years ago (0 points) O 3 or more years ago (20 points) O Not Applicable Explain: 5.2.2 What amount is in your Replacement Fund? Equipment Replacement Fund Activity 5.2.1 Ending Balance Reported on Last Year's CMAR: if necessary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)	2.	Are User Charge or other Re treatment plant AND/OR coll	evenues sufficient to cover O&M Expenses for your wastewater ection system ?	0
Year: 2005 O-2 years ago (0 points) O 3 or more years ago (20 points) O Not Applicable (Private Facility) Did you have a special account (e.g., CWFP required segregated Replacement Fund, etc.) or financial resources available for repairing or replacing equipment for your wastewater treatment plant and/or collection system? Yes O No (40 points) REPLACEMENT FUNDS(PUBLIC MUNICIPAL FACILITIES SHALL COMPLETE QUESTION 5) Equipment Replacement Funds 5.1 When was the Equipment Replacement Fund last reviewed and/or revised? Year: 2005 1-2 years ago (0 points) O 3 or more years ago (20 points) O Not Applicable Explain: 5.2 What amount is in your Replacement Fund? Equipment Replacement Fund Activity 5.2.1 Ending Balance Reported on Last Year's CMAR: if necessary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)		O No (40 poir	•	
O 3 or more years ago (20 points) Not Applicable (Private Facility) Did you have a special account (e.g., CWFP required segregated Replacement Fund, etc.) or financial resources available for repairing or replacing equipment for your wastewater treatment plant and/or collection system? Yes No (40 points) REPLACEMENT FUNDS(PUBLIC MUNICIPAL FACILITIES SHALL COMPLETE QUESTION 5) Equipment Replacement Funds 5.1 When was the Equipment Replacement Fund last reviewed and/or revised? Year: 2005 1-2 years ago (0 points) O 3 or more years ago (20 points) Not Applicable Explain: 5.2 What amount is in your Replacement Fund? Equipment Replacement Fund Activity 5.2.1 Ending Balance Reported on Last Year's CMAR: if necessary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)	3.	When was the User Charge : Year: 2005	System or other revenue source(s) last reviewed and/or revised?	0
financial resources available for repairing or replacing equipment for your wastewater treatment plant and/or collection system? Yes O No (40 points) REPLACEMENT FUNDS(PUBLIC MUNICIPAL FACILITIES SHALL COMPLETE QUESTION 5) Equipment Replacement Funds 5.1 When was the Equipment Replacement Fund last reviewed and/or revised? Year: 2005 1-2 years ago (0 points) O 3 or more years ago (20 points) O Not Applicable Explain: 5.2 What amount is in your Replacement Fund? Equipment Replacement Fund Activity 5.2.1 Ending Balance Reported on Last Year's CMAR: \$0.00 5.2.2 Adjustments if necessary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)		O 3 or more	years ago (20 points)	
REPLACEMENT FUNDS(PUBLIC MUNICIPAL FACILITIES SHALL COMPLETE QUESTION 5) 5. Equipment Replacement Funds 5.1 When was the Equipment Replacement Fund last reviewed and/or revised? Year: 2005 1-2 years ago (0 points) O 3 or more years ago (20 points) O Not Applicable Explain: 5.2 What amount is in your Replacement Fund? Equipment Replacement Fund Activity 5.2.1 Ending Balance Reported on Last Year's CMAR: \$0.00 5.2.2 Adjustments if necessary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)	4.	financial resources available	for repairing or replacing equipment for your wastewater treatment	0
5.1 When was the Equipment Replacement Fund last reviewed and/or revised? Year: 2005 1-2 years ago (0 points) O 3 or more years ago (20 points) O Not Applicable Explain: 5.2 What amount is in your Replacement Fund? Equipment Replacement Fund Activity 5.2.1 Ending Balance Reported on Last Year's CMAR: if necessary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)		_	ts)	
5.1 When was the Equipment Replacement Fund last reviewed and/or revised? Year: 2005 1-2 years ago (0 points) O 3 or more years ago (20 points) O Not Applicable Explain: 5.2 What amount is in your Replacement Fund? Equipment Replacement Fund Activity 5.2.1 Ending Balance Reported on Last Year's CMAR: \$0.00 5.2.2 Adjustments if necessary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)		REPLACEMENT FUNDS(PI	UBLIC MUNICIPAL FACILITIES SHALL COMPLETE QUESTION 5)	
5.1 When was the Equipment Replacement Fund last reviewed and/or revised? Year: 2005 1-2 years ago (0 points) O 3 or more years ago (20 points) O Not Applicable Explain: 5.2 What amount is in your Replacement Fund? Equipment Replacement Fund Activity 5.2.1 Ending Balance Reported on Last Year's CMAR: \$0.00 5.2.2 Adjustments if necessary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)	5.	Equipment Replacement Fun	nds	
O 3 or more years ago (20 points) O Not Applicable Explain: 5.2 What amount is in your Replacement Fund? Equipment Replacement Fund Activity 5.2.1 Ending Balance Reported on Last Year's CMAR: \$0.00 5.2.2 Adjustments if necessary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)			nt Replacement Fund last reviewed and/or revised?	0
Equipment Replacement Fund Activity 5.2.1 Ending Balance Reported on Last Year's CMAR: 5.2.2 Adjustments if necessary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)		O 3 or more y	vears ago (20 points)	
Equipment Replacement Fund Activity 5.2.1 Ending Balance Reported on Last Year's CMAR: 5.2.2 Adjustments if necessary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)		<u> </u>		
5.2.1 Ending Balance Reported on Last Year's CMAR: 5.2.2 Adjustments if necessary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)		•	•	
5.2.2 Adjustments + \$0.00 if necessary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)				
		5.2.2 Adjustments if necessary (e.g., ear	+ \$0.00 rned interest, audit correction, withdrawal of	
				1

	me: Milwaukee City	Last Updated: 5/10/2007	Reporting Year: :
ancial Ma	anagement (Continued)	······································	
5.2.	4 Additions to Fund (e.g., portion of User Fee, earned	d interest, etc.) +	\$847,695.00
5.2.	 Subtractions from Fund (e.g., equipment replacements) use description box 5.2.5.1 below*.) 	ent, major repairs -	\$847,695.00
5.2.	6 Ending Balance as of December 31st for CMAR	Reporting Year	\$0.00
	Il Sources: This ending balance should include all Equinds whether held in a bank account(s), certificate(s) o		
*	5.2.5.1. Indicate adjustments, equipment purchases a	nd/or major repairs from	5.2.5 above
	In 2006, the City spent \$405,695 on equipment repletc.) and \$442,000 on sanitary bypass pump rehabi		mp trucks,
	What amount should be in your replacement fund?		\$1.00
(FAA	ou had a CWFP loan, this amount was originally based A) and should be regularly updated as needed. Further be found by clicking the HELP option button.)		
5.3.1	I Is the Dec. 31 Ending Balance in your Replacement	Fund above (#5.2.6) equ	ual to or greater
than	the amount that should be in it(#5.3)? O Yes		
	No Explain:		
	Not applicable. The City of Milwaukee does not hav	e a fund for equipment r	eplacement.
	Rather, equipment replacement is budgeted for on a annual O&M budget.	ın annuai basis as part (or the City's
	Di		
Futur	re Planning		
6.1 E or ne	Ouring the next ten years, will you be involved in forma ew construction of your treatment facility or collection s	ystem?	
	Yes (If yes, please provide major project iNo	nformation, if not alread	y listed below)
	Project Description	Estimated Cost	Approximate Construction Year
= b	City of Milwaukee has an ongoing sewer replacement gram. From 2007 to 2012, our six year capital Improve	ment fithe	2007
Prog Prog City app	gram is \$183 million. This amount is for replacement o 's combined, sanitary and storm sewers. Of that amou roximately \$3,800,000 is budgeted for the sanitary sev em rehabilitation each year.	nt, /er	
prog Prog City app syst	s combined, sanitary and storm sewers. Of that amou roximately \$3,800,000 is budgeted for the sanitary sevem rehabilitation each year.	nt, ver	
prog Prog City app syst	s combined, sanitary and storm sewers. Of that amou roximately \$3,800,000 is budgeted for the sanitary sev	rit, ver	
prog Prog City app syst	s combined, sanitary and storm sewers. Of that amou roximately \$3,800,000 is budgeted for the sanitary sevem rehabilitation each year.	/er	er 31st).

Facility Name: Milwaukee City	Last Updated: 5/10/2007	Reporting Year: 2006

Financial Management (Continued)

Total Points Generated 0
policy Control Control Control
Score (100 - Total Points Generated) 100
Section Grade A

Facilit	y Name: Milwau	ıkee City Last Updated: Reportin 5/11/2007	g Year: 2006
Sanita	ry Sewer Collecti	on Systems	www.
		Questions	Points
1.	Do you have a 0 WPDES permit	Capacity, Management, Operation & Maintenance(CMOM) requirement in your ?	
	0	Yes No	
2.	Did you have a collection system	<u>documented</u> (written records/files, computer files, video tapes, etc.) sanitary sewer n operation & maintenance or CMOM program last calendar year?	0
	•	Yes (go to question 3) No (30 points) (go to question 4)	
3.	Check the elem CMOM program	ents listed below that are included in your Operation and Maintenance (O&M) or n.:	
	\boxtimes	Goals: specific identification of major goals of your O&M/CMOM program such a I/I reduction, basement backup and SSO reductions, repair and rehabilitation of sewers, system cleaning and monitoring, etc.	S
	⊠	Organization: identification of those managers and persons who are responsible for implementing your O&M/CMOM program and reporting sanitary sewer overflows	
		Legal Authority: sufficient authority, through sewer use ordinances, service agreements or other legally binding documents to control infiltration/inflow sources, proper design, construction, inspection and testing of new and rehabilitated sewers and laterals and address flows from satellite collection systems, if present.	
		Maintenance Activities: routine preventative O&M activities, including adequate maintenance of facilities and equipment. By the use of: sewer system monitoring inspections; a system to identify infiltration/inflow sources (including private property); a system for replacement part inventories; control of fat, oil & grease; employee training program; and a management system for the collection and use of information to establish O&M priorities	
	⊠	Design and Performance Standards: establish requirements and standards for design, installation and inspection of new sewers, service laterals, pump stations and sewer rehabilitation projects.	
	\boxtimes	Overflow Emergency Response Plan: documented procedures for responding to SSOs, power outages, lift station failures sewer blockages or any other similar events of an emergency nature.	
		Capacity Assurance: a program to assess the current capacity of the collection system to identify problems or bottlenecks; and if required, a System Evaluation and Capacity Assurance Plan (SECAP).	
		Annual Self-Auditing of your O&M/CMOM Program to ensure above components are being implemented, evaluated, and re-prioritized as needed.	
		Special Studies (if applicable): any special studies undertaken such as I/I Analysis, Sewer System Evaluation Surveys (SSES), or sewer pipe studies. Please list the study reports of the last year below:	
	capacity analy	ne Stipulation agreement with the Department of Justice, the City conducted a vsis of certain basins. The City is presently evaluating the study to determine otive actions where needed.	

Facilit	y Name: Milwaukee City		Last Opdated: 5/11/2007	Reporting Year: 2000
Canitar	y Sewer Collection Systems (Con	tinued)		
4.	Did your sanitary sewer collection maintenance activities? Complete	system maintenance program	include the following amount maintained:	
	Cleaning	% of system/year		
	Root Removal	2 % of system/year		
	Flow Monitoring	3 % of system/year		
	Smoke Testing	0 % of system/year		
	Sewer Line Televising	% of system/year		
	Manhole Inspections	% of system/year		
	Lift Station O&M	12 # per L.S/year		
	Manhole Rehabilitation	6 % of manholes rehab	ped	
	Mainline Rehabilitation	.23 % of sewer lines reha	abed	
	Private Sewer Inspections	0 % of system/year		
	Private Sewer I/I Removal	0 % of private services		
	Please include additional comme	ents about your sanitary sewer o	collection system below	,
***************************************	The City of Milwaukee owns a s system. The above information	separate sanitary system and a applies only to work performed	combined sewer collection in the sanitary sewer s	tion ystem.
5.	Provide the following collection s	ystem and flow information for t	he past year:	30
	37 Total Actual A	mount of Precipitation Last Yea	r	
1				

34	n Systems (Continued) Annual Average Precipitation (for your location)
	Authorition and a complementary from James Commerce
935	Miles of Sanitary Sewer
5	Number of Lift Stations
1	Number of Lift Station Failure
0	Number of Sewer Pipe Failures
3	Number of Sanitary Sewer OverFlow (SSO) Occurrences:(10 points per occurrence)
41	Number of Basement Backup Occurrences
1819	Number of Complaints
	Average Daily Flow in MGD
	Peak Monthly Flow in MGD(if available)
	Peak Hourly Flow in MGD(if available)
PERFORMANCI	E INDICATORS
0.20	Lift Station Failures(failures/ps/year)
0.00	Sewer Pipe Failures(pipe failures/sewer mile/yr)
0.00	Sanitary Sewer Overflows (number/sewer mile/yr)
0.04	Basement Backups(number/sewer mile)
1.95	Complaints (number/sewer mile)
	Peaking Factor Ratio (Peak Monthly:Annual Daily Average)
	Peaking Factor Ratio(Peak Hourly:Annual daily Average)
V as infiltration/ir	flow(I/I) significant in your community last year?

Facilit	y Name: Milwaukee City	Last Updated: 5/11/2007	Reporting	Year: 2006
Sanita	y Sewer Collection Systems (Continued) If Yes, please describe:			
	If res, please describe.			
7.	Has infiltration/inflow and resultant high flows affected per collection system, lift stations, or treatment plant at any tim	formance or created problene in the past year?	ems in your	
	O Yes No If Yes, please describe:			
8.	Explain any infiltration/inflow(I/I) changes this year from pro-	evious years?		
9.	What is being done to address infiltration/inflow in your co	llection system?		
	1- Flow monitoring. 2- Manhole Inspections 3- Manhole I MMSD on their CMOM and 2020 facilities plan.	Rehabilitation 4- Working o	losely with	

Total Points Generated 30	
Score (100 - Total Points Generated) 70	
Section Grade D	

Facility Name: Milwaukee City Last Updated: Reporting Year: 2006

WPDES No.0047341

	GRADING	SUMMARY		
SECTION	LETTER GRADE	GRADE POINTS	WEIGHTING FACTORS	SECTION POINTS
Financial Management	A A	4.0	1	4
Collection Systems	D	1.0	3	3
TOTALS			4	7
GRADE POINT AVERAGE(GPA)=1.75		1.75		

Notes:

A = Voluntary Range

B = Voluntary Range

C = Recommendation Range (Response Required)

D = Action Range (Response Required)

F = Action Range (Response Required)

Facility Name: Milwaukee City	Last Updated:	Reporting Year: 20
Resolution or Owner's Statement		
NAME OF GOVERNING BODY OR OWNER	DATE OF RESOLUTION OR ACT	ION TAKEN
RESOLUTION NUMBER		
ACTIONS SET FORTH BY THE GOVERNING BO SECTIONS (Optional for grade A or B, required for	DY OR OWNER RELATING TO SPECII grade C, D, or F):	FIC CMAR
Financial Management: Grade=A		
Collection Systems: Grade=D		
ACTIONS SET FORTH BY THE GOVERNING BO POINT AVERAGE AND ANY GENERAL COMME required for G.P.A. less than 3.00) G.P.A. = 1.75	DY OR OWNER RELATING TO THE O	