

Provisional Certification Annual Update Form
(Rev. 6/2008)

Part I – Utility Information:

Utility: _____

Water Utility: PCPCN No. _____

Wastewater Utility: PCPCN No. _____

A.) Contact & Utility Information

CATEGORY	CURRENT INFO.
Contact Name (First, Last)	
Contact Title	
Mailing Address	
City	
Zip code	
Phone Number	
Fax Number	
Ownership Structure	
Communities Served	

B.) Service Connections & Rates

Identify the utility's billing frequency:

☐ Monthly; ☐ Twice a month; ☐ Quarterly; ☐ Twice a Year; ☐ Annually

CATEGORY	WATER	SEWER	COMBINED
Residential			
# Active Cust.			
# Inactive Cust.			
Rate			
Institutional			
# Customers			
Rate			
Small Commercial			
# Customers			
Rate			
Large Commercial			
# Customers			
Rate			

C.) Income Statement

Identify the fiscal year your utility uses:

- ☐ January 1st – December 31st
☐ April 1st – March 31st
☐ July 1st – June 30th
☐ October 1st – September 30th

Revenues	
Operating Revenue (400)	Revenues (\$)
Billing/User Fees	
Other Sources of Income or Subsidy	
•	
•	
•	
Gross Revenues:	\$

Expenses	
Operation and Maintenance Expense (401)	Expenses (\$)
Salaries and Wages (401.600)	
Payroll Wages (401.600.1)	
Payroll Taxes (400.600.2)	
Purchased Water/Sewer Service (401.610)	
Fuel or Power Purchased for Pumping (401.620)	
Fuel Oil (401.620.1)	
Chemicals (401.630)	
Chemicals and Testing (401.630.1)	
Supplies and Expenses (401.640)	
Rent (401.640.1)	
Freight (401.640.2)	
Parts and Supplies (401.640.3)	
Electricity (401.640.4)	
Repairs of Plant (401.650)	
Building Materials (401.650.1)	
Repairs and Maintenance (401.650.2)	
Annual Repair and Replacement (401.650.3)	
Capital Replacement Fund (401.650.4)	
Transportation Expenses (401.660)	
Vehicles (401.660.1)	
Administrative and General Salaries (401.680)	
Office Supplies and Other Expenses (401.681)	
Bank Charges (401.681.1)	
Computer/Internet (401.681.2)	
Copier Supplies (401.681.3)	
Dues & Subscriptions (401.681.4)	
Postage (401.681.5)	
Office Supplies (401.681.6)	
Telephone (401.681.7)	
Outside Services Employed (401.682)	

Contractual Labor (401.682.1)	
Professional Fees (401.682.2)	
Insurance Expense (401.684)	
Insurance and Bonding (401.684.1)	
Workers Comp Insurance (401.684.2)	
Employees Pensions and Benefits (401.686)	
Payroll Benefits (401.686.1)	
Regulatory Commission Expenses (401.688)	
Regulatory Cost (401.688.1)	
Miscellaneous General Expenses (401.689)	
Stipends (401.689.1)	
Training (401.689.2)	
Uncollectible Accounts (401.690)	
Bad Debt (401.690.1)	
Total Operations and Maintenance Expenses:	\$
Other Expense Accounts	Expenses (\$)
Depreciation Expense (403)	
Annual Depreciation (401.403.1)	
Taxes other than Income Taxes Utility Operating Income (408.1)	
Income Taxes Utility Operating Income (409.1)	
Taxes other than Payroll Taxes (401.409.1.1)	
Miscellaneous Nonoperating Income (421)	
Interest on Long-Term Debt (427)	
Interest on Loans (401.427.1)	
Total Other Expenses:	\$
Total Expenses:	\$

D.) Water Usage Data (for water utilities only)

Total Gallons Produced:	
--------------------------------	--

Residential Usage: Single Family	
---	--

Residential Usage: Multi-Family	
--	--

Institutional Usage (List each customer separately)

•	
•	
•	
•	
•	
•	
•	
•	
•	

Large Commercial Usage (List each customer separately)

•	
•	
•	
•	
•	
•	
•	
•	

Small Commercial Usage (List each customer separately)

•	
•	
•	
•	
•	
•	
•	
•	
•	
•	
•	
•	
•	

Fire Flow / Line Loss:	
-------------------------------	--

Part II – Application Fee & Filing Instructions

An update fee of \$100 MUST be included with the update for it to be complete. Updates that do not contain the \$100 fee will be considered incomplete. An application fee that does not clear the bank may also be considered incomplete.

Please make checks payable to the State of Alaska.

Please mail the update and \$100 fee to the RCA at:

Regulatory Commission of Alaska
701 West Eighth Street, Suite #300
Anchorage, AK 99501

Questions about the update can be directed to the Commission Tariff Section at one of the following numbers:

(907) 276-6222
(800) 390-2782 (outside Anchorage)
(907) 276-0160 (Fax)
(907) 276-4533 (TTY)

Part III – Authorization

Verification of Update and Authorization of Notice

The undersigned hereby verifies the accuracy of the information submitted in this update.

Dated at _____ Alaska, this _____ day of _____, _____.
(Location) (Date) (Month) (Year)

Name of Applicant

By: _____
Utility Representative

Name and Title

Address
