

PLANNING COMMISSION MEETING

March 18, 1982

Minutes of the regular meeting of the Box Elder Planning Commission held Thursday, March 18, 1982. Chairman Jerry Wilde presiding. Members present were Jerry Wilde, Charles Kimber, Glen Nelson, Thomas M. Mower, Jay MacFarlane, Kent Newman. Also present were ex-official member Jay R. Hirschi. Commissioner Don Chase and ex-official member Denton Beecher were absent.

MINUTES

A motion was made by J. Glen Nelson that the minutes of the previous planning commission meeting held January 21, 1982 be approved as written. Motion was seconded by Charles Kimber with all in favor.

PREAPPLICATION FOR FEDERAL ASSISTANCE - MANTUA SEWER SYSTEM

Planning Commission received and reviewed the Preapplication for Federal Assistance with supporting data for the Mantua Sewer System. The Preapplication was being submitted by Mayor Virgil Allred of Mantua for the construction of a sewage collection line to a subdivision that has septic tanks that are a potential health hazard to two of Brigham City's culinary water wells. Following a brief discussion, a motion was made by Jay MacFarlane that the Preapplication be approved and a letter be written to the Mayor of Mantua informing him of their action. Motion was seconded by Kent Newman with all in favor.

APPOINTMENT OF VICE-CHAIRMAN

Suggested by Chairman Jerry Wilde that the members be thinking of appointing a vice chairman for the Planning Commission. He suggested that this matter be handled at the next meeting.

With no further business to be discussed, Charles Kimber made a motion that meeting be adjourned. Seconded by Kent Newman. Approved.



BRIGHAM CITY CORP. OFFICE
P.O. BOX A • BRIGHAM CITY, UTAH 84302 • PH 801-734-2001

February 4, 1982

RECEIVED

FEB 5 1982

Don Ostler, P. E.
Bureau of Water Pollution Control
P. O. Box 2500
Salt Lake City, Utah 84110

Double
HaaI
HANSEN & ASSOCIATES INC

Re: Federal Sewage Works Grant
Town of Mantua
C490173, Step 3

Gentlemen:

We have been informed that the grant money available to Mantua for construction of their sewage system would not cover the homes located on the Willard Peak Road.

Brigham City has always been under the understanding that those homes would be part of the sewage collection system of Mantua and one of the reasons Brigham City is willing and desirous of receiving Mantua sewage and processing it in its sewage disposal plant, is the need to eliminate sewage emanating from those areas.

The majority of Brigham City's water supply originates in Mantua Valley and one of the large sources of water are underground wells located in a westerly direction from the homes located on the Willard Peak Road. One of these wells is located within 600 feet and the other is approximately 1,000 feet from septic tanks along that road. Our studies indicate that unless those homes are located on the sewer system, that Brigham City's wells may be contaminated.

Our reasons for believing that Brigham City's wells may be contaminated is because of the soil conditions in that area which indicate that the soils are extremely permeable, the water bearing strata is somewhat shallow with the first strata being approximately 75 feet and the fact that the well casings are only sealed to a depth of 33 feet.

Based on this information it is our conclusion that the nine homes on Willard Peak Road pose a very real contamination potential to the Brigham City culinary water wells.

Letter to Utah Division of Environmental Health
Page 2

We would hope that you may be able to reassess your position and include that area into your grant as we recognize that without the grant money it will be a financial hardship for Mantua to finance the sewage system for those homes on its own.

Very truly yours,


Peter C. Knudson, D.D.S.
Brigham City Mayor

PCK/tr

cc: Mayor Allred
cc: Keith Hansen



BRIGHAM CITY CORPORATION
P.O. BOX A • BRIGHAM CITY, UTAH 84302 • 801-734-2001

February 4, 1982

Mayor Allred
Mantua Town Board
Mantua, Utah 84302

Gentlemen:

Brigham City has been apprised that the E.P.A. Grant for construction of your sewer system will not cover the homes on the Willard Peak Road.

Brigham City is willing and will continue to be willing to do anything they can to persuade and encourage the appropriate governmental entities to include those homes on the grant monies.

However, Brigham City's position has always been that those homes would be covered by the Mantua Sewage System because of the proximity of Brigham City's culinary wells.

Brigham City had been assured that the homes on Willard Peak Road would be included and that Brigham City's wells would, therefore, be protected. We believe that the intent of the agreement we have signed also provides that those homes would be included on your collection system.

When Mr. Keith Hansen raised the issue to Brigham City in a recent letter that the grant may not cover those homes, the City Council asked that I write to you to have you confirm that your understanding is and always has been that those homes would be included.

Very truly yours,


Peter C. Knudson, D.D.S.
Brigham City Mayor

PCK/tr

File
E81-12-3(F)

H

aa

I

February 10, 1988

Kiran Bhargava
Bureau Water Pollution Control
P.O. Box 2500
Salt Lake City, Utah 84110

Dear Kiran:

I have obtained the following information and occupancy dates pertaining to the houses on the Willard Peak Road, North Spring Road and the East end of 750 North. Councilman Richard Jeppsen contacted the home owners and has provided us with the occupany dates.

On Willard Peak Road there are nine houses at the present time. If you list them in order from one to nine going North to South, the first house built on the lane was house number six. This home was finished and occupied on or before September 1, 1977, and is owned by Charles Skeen. The next house occupied was number four and is owned by Gary Anderson.

On North Spring Road there are four houses at the present time. These houses are uphill and within 1500 feet of Olsen Springs. These springs produce around 1.1 cfs and are part of Brigham City's culinary water source. The houses are clustered very close together and are on septic tanks with drain fields. The first house was occupied on November 11, 1978, and is owned by John Jensen.

There are three houses on 750 North, East of Main Street. The first house proceeding East has been there for a long time and was included on the original facilities plan. There are two more houses approximately 450 feet East of this house. Of these two houses, the first was occupied on January 16, 1978, and is owned by Mike Richardson. All of these houses have septic tanks with drain fields. The ground water table is very high in this area because of the proximity of the Muttua reservoir. As a result, the drain fields for these houses are very shallow, say less than 18 inches. The drain field from the first house has raw sewage that sometimes surfaces and makes its way into a peripheral drain for the reservoir and is then pumped into the reservoir. As I have stated before, this house was on the original facility plan and could be considered for funding.

Haal

Consulting Engineers & Land Surveyors

I hope this information will be useful. Feel free to contact me if I can be of any help or clarify any of this.

Sincerely,

HANSEN & ASSOCIATES, INC.

DANN REY

DM/jb

cc: Clifford Allred, Mayor of Mantua
Paul Howard, FmHA

Minutes of March 18, 1982

Box Elder County

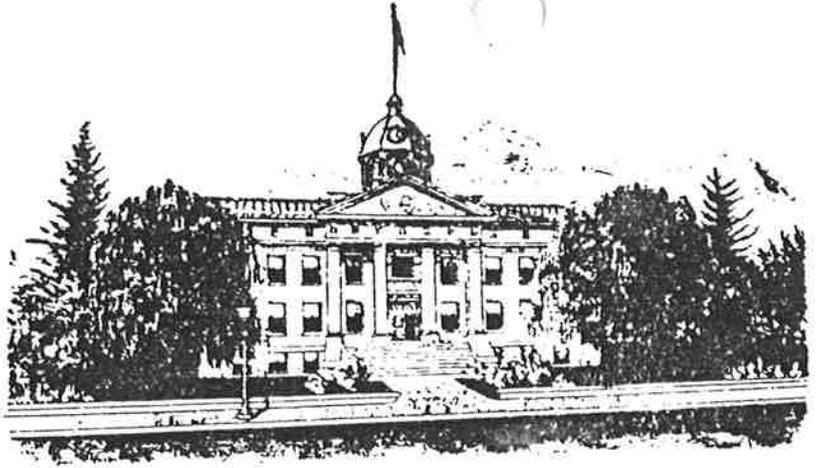
COUNTY COMMISSIONERS

DON E. CHASE STEPHEN A. (AL) CAZIER

WARREN W. HYDE

OFFICERS

GLEN S. FIFE, County Treasurer
JAY R. HIRSCHI, Clerk
ROBERT E. LIMB, County Sheriff
MARGARET R. EVANS, County Recorder
O. DEE LUND, County Attorney
VON R. CURTIS, County Assessor
DENTON BEECHER, County Surveyor
DORIS L. OLSEN, County Auditor



BRIGHAM CITY, UTAH

March 22, 1982

Mayor Virgil C. Allred
Mantua
RFD # 2
Brigham City, Utah 84302

Dear Mayor Allred:

On March 18, 1982, the Box Elder County Planning Commission received and reviewed your Preapplication for Federal Assistance with supporting data for the Mantua Sewer System.

The Commission approved the preapplication dated February 22, 1982, and agree that it is for the best interest of Mantua and Box Elder County.

Respectfully,

Jerry Wilde, Chairman
Box Elder County Planning Commission

cc Hansen & Associates Inc.

Minutes of March 18, 1982

PREAPPLICATION FOR FEDERAL ASSISTANCE

FEDERAL ASSISTANCE		2 APPLICANT'S APPLICATION	a. NUMBER 2	3. STATE APPLICATION IDENTIFIER	a. NUMBER
1. TYPE OF ACTION <input checked="" type="checkbox"/> PREAPPLICATION <input type="checkbox"/> APPLICATION <input type="checkbox"/> NOTIFICATION OF INTENT (Opt.) <input type="checkbox"/> REPORT OF FEDERAL ACTION <small>(Mark appropriate box)</small>		b. DATE 19 <u> </u> Year <u> </u> month <u> </u> day		b. DATE ASSIGNED 19 <u> </u> Year <u> </u> month <u> </u> day	
4. LEGAL APPLICANT/RECIPIENT		5. FEDERAL EMPLOYER IDENTIFICATION NO.		6. PROGRAM	
a. Applicant Name Town of Mantua		b. TITLE Water and Waste Systems for rural Communities		a. NUMBER 1 0 • 4 18	
b. Organization Unit Town Board		c. County Box Elder		b. TITLE Water and Waste Systems for rural Communities	
c. Street/P.O. Box RFD 2		g. ZIP Code 84302		7. TITLE AND DESCRIPTION OF APPLICANT'S PROJECT	
d. City Brigham City, Utah		h. Contact Person (Name & telephone No.) Virgil Allred, Mayor-801-723-7689		8. TYPE OF APPLICANT/RECIPIENT A--State B--Interstate C--Substate D--County E--City F--School District G--Special Purpose District H--Community Action Agency I--Higher Educational Institution J--Indian Tribe K--Other (Specify)	
e. County Box Elder		9. TYPE OF ASSISTANCE A--Basic Grant B--Supplemental Grant C--Loan D--Insurance E--Other		10. AREA OF PROJECT IMPACT (Names of cities, counties, States, etc.) Mantua Town	
f. State Utah		11. ESTIMATED NUMBER OF PERSONS BENEFITING 500		12. TYPE OF APPLICATION A--New B--Renewal C--Revision D--Continuation E--Augmentation	
13. PROPOSED FUNDING		14. CONGRESSIONAL DISTRICTS OF:		15. TYPE OF CHANGE (For 12c or 12e) A--Increase Dollars B--Decrease Dollars C--Increase Duration D--Decrease Duration E--Cancellation F--Other (Specify):	
FEDERAL \$ 25,000.00		a. APPLICANT 1		16. PROJECT START DATE Year month day 19 82-4-1	
APPLICANT 6,650.00		b. PROJECT 1		17. PROJECT DURATION 1 Months	
STATE .00		18. ESTIMATED DATE TO BE SUBMITTED TO FEDERAL AGENCY 19 82-2-25		19. EXISTING FEDERAL IDENTIFICATION NUMBER C 4 9017 303 0	
LOCAL 1,350.00		20. FEDERAL AGENCY TO RECEIVE REQUEST (Name, City, State, ZIP code) Farmers Home Administration, US Dept. of Agr. Ogden, UT Fed. Bldg.		21. REMARKS ADDED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
OTHER .00		22. THE APPLICANT CERTIFIES THAT a. To the best of my knowledge and belief, data in this preapplication/application are true and correct, the document has been duly authorized by the governing body of the applicant and the applicant will comply with the attached assurances if the assistance is approved. b. If required by OMB Circular A-95 this application was submitted, pursuant to instructions therein, to appropriate clearinghouses and all responses are attached: (1) State Planning Coordinator (2) BRAG (3) Box Elder County Planning Comm.		No response Response attached	
TOTAL \$ 33,000.00		23. CERTIFYING REPRESENTATIVE a. TYPED NAME AND TITLE Virgil C. Allred Mayor		c. DATE SIGNED 19 82-2-22	
24. AGENCY NAME		b. SIGNATURE <i>Virgil Allred</i>		25. APPLICATION RECEIVED 19 <u> </u> Year <u> </u> month <u> </u> day	
26. ORGANIZATIONAL UNIT		27. ADMINISTRATIVE OFFICE		28. FEDERAL APPLICATION IDENTIFICATION	
29. ADDRESS		30. FEDERAL GRANT IDENTIFICATION		34. STARTING DATE 19 <u> </u> Year <u> </u> month <u> </u> day	
31. ACTION TAKEN		32. FUNDING		35. CONTACT FOR ADDITIONAL INFORMATION (Name and telephone number)	
a. AWARDED		a. FEDERAL \$ <u> </u> .00		36. ENDING DATE 19 <u> </u> Year <u> </u> month <u> </u> day	
b. REJECTED		b. APPLICANT <u> </u> .00		37. REMARKS ADDED	
c. RETURNED FOR AMENDMENT		c. STATE <u> </u> .00		<input type="checkbox"/> Yes <input type="checkbox"/> No	
d. DEFERRED		d. LOCAL <u> </u> .00		38. FEDERAL AGENCY A-95 OFFICIAL (Name and telephone No.)	
e. WITHDRAWN		e. OTHER <u> </u> .00			
		f. TOTAL \$ <u> </u> .00			
39. FEDERAL AGENCY A-95 ACTION		a. In taking above action, any comments received from clearinghouses were considered. If agency response is due under provisions of Part 1, OMB Circular A-95, it has been or is being made.		b. FEDERAL AGENCY A-95 OFFICIAL (Name and telephone No.)	

REAPPLICATION FOR FEDERAL ASSISTANCE

PART II

	(Check one)	
	Yes	No
1. Does this assistance request require State, local, regional or other priority rating?		X
2. Does this assistance require State or local advisory, educational or health clearance?	X	
3. Does this assistance request require Clearinghouse review?	X	
4. Does this assistance request require State, local, regional or other planning approval?		X
5. Is the proposed project covered by an approved comprehensive plan?	X	
6. Will the assistance requested serve a Federal installation?		X
7. Will the assistance requested be on Federal land or installation?		X
8. Will the assistance requested have an effect on the environment?	X	
9. Will the assistance requested cause the displacement of individuals, families, businesses, or farms?		X
10. Is there other related assistance for this project previous, pending, or anticipated?	X	
11. Is the project in a designated flood hazard area?		X

PART III—PROJECT BUDGET

FEDERAL CATALOG NUMBER (a)	TYPE OF ASSISTANCE LOAN, GRANT, ETC. (b)	FIRST BUDGET PERIOD (c)	BALANCE OF PROJECT (d)	TOTAL (e)
1. FmHA Public Facilities	Grant			25,000
2. FmHA Loan	(approved)			6,650
3.				
4.				
5.				
6. Total Federal Contribution		\$	\$	\$ 31,650
7. State Contribution				
8. Applicant Contribution				1,350
9. Other Contributions				
10. Totals		\$	\$	\$ 33,000

PART IV—PROGRAM NARRATIVE STATEMENT

(Attach per instruction)

INSTRUCTIONS

PART II

Negative answers will not require an explanation unless the Federal agency requests more information at a later date. Provide supplementary data for all "Yes" answers in the space provided in accordance with the following instructions:

Item 1—Provide the name of the governing body establishing the priority system and the priority rating assigned to this project.

Item 2—Provide the name of the agency or board which issued the clearance and attach the documentation of status or approval.

Item 3—Attach the clearinghouse comments for the application in accordance with the instructions contained in Office of Management and Budget Circular No. A-95. If comments were submitted previously with a preapplication, do not submit them again but any additional comments received from the clearinghouse should be submitted with this application.

Item 4—Furnish the name of the approving agency and the approval date.

Item 5—Show whether the approved comprehensive plan is State, local or regional, or if none of these, explain the scope of the plan. Give the location where the approved plan is available for examination and state whether this project is in conformance with the plan.

Item 6—Show the population residing or working on the Federal installation who will benefit from this project.

Item 7—Show the percentage of the project work that will be conducted on federally-owned or leased land. Give the name of the Federal installation and its location.

Item 8—Describe briefly the possible beneficial and harmful impact on the environment because of the proposed project. If an adverse environmental impact is anticipated, explain what action will be taken to minimize the impact. Federal agencies will provide separate instructions if additional data is needed.

Item 9—State the number of individuals, families, businesses, or farms this project will displace. Federal agencies will provide separate instructions if additional data is needed.

Item 10—Show the Federal Domestic Assistance Catalog number, the program name, the type of assistance, the status

and the amount of each project where there is related previous, pending or anticipated assistance. Use additional sheets, if needed.

Item 11—Contact the Federal agency concerning the provisions of the Flood Disaster Protection Act of 1973 (P.L. 93-234).

PART III

Complete: Lines 1-5—Columns (a)-(e). Enter the catalog numbers shown in the Catalog of Federal Domestic Assistance in Column (a) and the type of assistance in Column (b). For each line entry in Columns (a) and (b), enter in Columns (c), (d), and (e), the estimated amounts of Federal funds needed to support the project. Columns (c) and (d) may be left blank, if not applicable.

Line 6—Show the totals for Lines 1-5 for Columns (c), (d), and (e).

Line 7—Enter the estimated amounts of State assistance, if any, including the value of in-kind contributions, in Columns (c), (d), and (e). Applicants which are States or State agencies should leave Line 7 blank.

Line 8—Enter the estimated amounts of funds and value of in-kind contributions the applicant will provide to the program or project in Columns (c), (d), and (e).

Line 9—Enter the amount of assistance including the value of in-kind contributions, expected from all other contributors in Columns (c), (d), and (e).

Line 10—Enter the totals of Columns (c), (d), and (e).

PART IV

The program narrative statement should be brief and describe the need, objectives, method of accomplishment, the geographical location of the project, and the benefits expected to be obtained from the assistance. The statement should be typed on a separate sheet of paper and submitted with the preapplication. Also attach any data that may be needed by the grantor agency to establish the applicant's eligibility for receiving assistance under the Federal program(s).

U.S. DEPARTMENT OF AGRICULTURE
APPLICATION FOR FEDERAL ASSISTANCE
(FOR CONSTRUCTION PROGRAMS)
PART II

OMB NO. 84-184

PROJECT APPROVAL INFORMATION
SECTION A

Item 1.

Does this assistance request require State, local, regional, or other priority rating? Yes No

Name of Governing Body UTAH DIV. OF HEALTH
Priority Rating 4

Item 2.

Does this assistance request require State, or local advisory, educational or health clearances?

Name of Agency or Board UTAH DIV. OF HEALTH

Yes No (Attach Documentation)

Item 3.

Does this assistance request require clearinghouse review in accordance with OMB Circular A-95? (Attach Comments)

Yes No

Item 4.

Does this assistance request require State, local, regional or other planning approval?

Name of Approving Agency Bear River Ass. of Govern.
Date 20 October 1976 and resubmitted February 9, 1981

Yes No

Item 5.

Is the proposed project covered by an approved comprehensive plan?

Check one: State
Local
Regional

Yes No Location of plan Bear River Assoc. of Govern..

Item 6.

Will the assistance requested serve a Federal installation?

Name of Federal Installation _____
Federal Population benefiting from Project _____

Yes No

Item 7.

Will the assistance requested be on Federal land or installation?

Name of Federal Installation _____
Location of Federal Land _____
Percent of Project _____

Yes No

Item 8.

Will the assistance requested have an impact or effect on the environment?

See instruction for additional information to be provided.

Yes No

See attached page

Item 9.

Will the assistance requested cause the displacement of individuals families, businesses, or farms?

Number of:
Individuals _____
Families _____
Businesses _____
Farms _____

Yes No

Item 10.

Is there other related Federal assistance on this project previous, pending, or anticipated?

See instructions for additional information to be provided.

Yes No

See attached page

INSTRUCTIONS

PART II - SECTION A

Negative answers will not require an explanation unless the Federal agency requests more information at a later date. Provide supplementary data for all "Yes" answers in the space provided in accordance with the following instructions.

Item 1 - Provide the name of the governing body establishing the priority system and the priority rating assigned to this project.

Item 2 - Provide the name of the agency or board which issued the clearance and attach the documentation of status or approval.

Item 3 - Attach the clearinghouse comments for the application in accordance with the instructions contained in Office of Management and Budget Circular No. A-95. If comments were submitted previously with a preapplication do not submit them again but any additional comments received from the clearinghouse should be submitted with this application.

Item 4 - Furnish the name of the approving agency and the approval date.

Item 5 - Show whether the approved comprehensive plan is State, local or regional, or if none of these, explain the

scope of the plan. Give the location where the approved plan is available for examination and state whether this project is in conformance with the plan.

Item 6 - Show the Federal population residing or working on the federal installation who will benefit from this project.

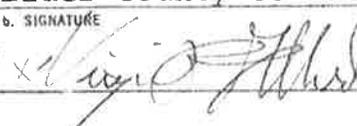
Item 7 - Show the percentage of the project work that will be conducted on federally owned or leased land. Give the name of the Federal installation and its location.

Item 8 - Briefly describe the possible beneficial and/or harmful impact on the environment because of the proposed project. If an adverse environmental impact is anticipated, explain what action will be taken to minimize the impact. Federal agencies will provide separate instructions if additional data is needed.

Item 9 - State the number of individuals, families, businesses, or farms this project will displace. Federal agencies will provide separate instructions if additional data is needed.

Item 10 - Show the Federal Domestic Assistance Catalog number, the program name, the type of assistance, the status and amount of each project where there is related previous, pending, or anticipated assistance. Use additional sheets, if needed.

APPLICATION FOR FEDERAL ASSISTANCE (For Construction Programs)

FEDERAL ASSISTANCE		2. APPLICANT'S APPLICATION	a. NUMBER 2	3. STATE APPLICATION IDENTIFIER	a. NUMBER
1. TYPE OF ACTION <input type="checkbox"/> PREAPPLICATION <input checked="" type="checkbox"/> APPLICATION (Mark appropriate box) <input type="checkbox"/> NOTIFICATION OF INTENT (Opt) <input type="checkbox"/> REPORT OF FEDERAL ACTION		b. DATE Year month day 19		b. DATE Year month day ASSIGNED 19	
4. LEGAL APPLICANT/RECIPIENT			5. FEDERAL EMPLOYER IDENTIFICATION NO.		
a. Applicant Name: Town of Mantua b. Organization Unit: Town Board c. Street/P.O. Box: RFD 2 d. City: Brigham City e. County: Box Elder f. State: Utah g. ZIP Code: 84302 h. Contact Person (Name & telephone No.): Virgil C. Allred 801-723-7689			6. PRO. GRAM (From Federal Catalog) a. NUMBER: 10-418 b. TITLE: Water and Waste Systems for rural Communities		
7. TITLE AND DESCRIPTION OF APPLICANT'S PROJECT Construction of Sewage Collection to a subdivision that has septic tanks now. These pose a potential health hazard to two of Brigham City's culinary water wells.			B. TYPE OF APPLICANT/RECIPIENT A-State H-Community Action Agency B-Interstate I-Higher Educational Institution C-Substate J-Indian Tribe District K-Other (Specify): D-County E-City F-School District Special Purpose District Enter appropriate letter <input type="checkbox"/>		
10. AREA OF PROJECT IMPACT (Name of cities, counties, States, etc.) Mantua Town		11. ESTIMATED NUMBER OF PERSONS BENEFITING 500		12. TYPE OF APPLICATION A-New C-Revision E-Augmentation B-Renewal D-Continuation Enter appropriate letter <input type="checkbox"/>	
13. PROPOSED FUNDING		14. CONGRESSIONAL DISTRICTS OF:		15. TYPE OF CHANGE (For 12a or 12b) A-Increase Dollars F-Other (Specify): B-Decrease Dollars C-Increase Duration D-Decrease Duration E-Cancellation Enter appropriate letter(s) <input type="checkbox"/>	
a. FMHA \$ 25,000.00		a. APPLICANT 1st		b. PROJECT 1st	
b. APPLICANT \$ 6,650.00		16. PROJECT START DATE Year month day 19		17. PROJECT DURATION Months 12	
c. STATE \$ 0.00		18. ESTIMATED DATE TO BE SUBMITTED TO FEDERAL AGENCY Year month day 19 82-2-25		19. EXISTING FEDERAL IDENTIFICATION NUMBER C 4 9017 303 0	
d. LOCAL \$ 1,350.00		19. EXISTING FEDERAL IDENTIFICATION NUMBER		20. FEDERAL AGENCY TO RECEIVE REQUEST (Name, City, State, ZIP code) FmHA - Ogden, Utah 84401	
e. OTHER \$ 0.00		20. FEDERAL AGENCY TO RECEIVE REQUEST (Name, City, State, ZIP code)		21. REMARKS ADDED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
f. TOTAL \$ 33,000.00		21. REMARKS ADDED		22. THE APPLICANT CERTIFIES THAT: a. To the best of my knowledge and belief, data in this preapplication/application are true and correct, the document has been duly authorized by the governing body of the applicant and the applicant will comply with the attached assurances if the assistance is approved. b. If required by OMB Circular A-95 this application was submitted, pursuant to instructions therein, to appropriate clearinghouses and all responses are attached: No response <input type="checkbox"/> Response attached <input type="checkbox"/>	
23. CERTIFYING REPRESENTATIVE Virgil C. Allred, Mayor		b. SIGNATURE 		c. DATE SIGNED Year month day 19 82-2-22	
24. AGENCY NAME		25. APPLICATION RECEIVED		26. FEDERAL AGENCY A-95 ACTION	
26. ORGANIZATIONAL UNIT		27. ADMINISTRATIVE OFFICE		28. FEDERAL APPLICATION IDENTIFICATION	
29. ADDRESS		30. FEDERAL GRANT IDENTIFICATION		31. ACTION TAKEN	
31. ACTION TAKEN		32. FUNDING		33. ACTION DATE Year month day 19	
<input type="checkbox"/> a. AWARDED		a. FEDERAL \$ 0.00		34. STARTING DATE Year month day 19	
<input type="checkbox"/> b. REJECTED		b. APPLICANT \$ 0.00		35. CONTACT FOR ADDITIONAL INFORMATION (Name and telephone number)	
<input type="checkbox"/> c. RETURNED FOR AMENDMENT		c. STATE \$ 0.00		36. ENDING DATE Year month day 19	
<input type="checkbox"/> d. DEFERRED		d. LOCAL \$ 0.00		37. REMARKS ADDED <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> e. WITHDRAWN		e. OTHER \$ 0.00			
38. FEDERAL AGENCY A-95 ACTION		f. TOTAL \$ 0.00			
a. In taking above action, any comments received from clearinghouses were considered. If agency response is due under provisions of Part 1, OMB Circular A-55, it has been or is being made.		b. FEDERAL AGENCY A-95 OFFICIAL (Name and telephone no.)			

REMARKS - PART II - SECTION A:

Item 8: The construction which will result as a consequence of this application will cause some noise, inconvenience, and a minimal amount of destruction of existing flora. However, upon completion and operation of the facility, the environment as it relates to ground waters and Box Elder Creek will be enhanced by the elimination of a source of contamination, which results from septic tank and cesspool effluents mingling with the natural waters originating in the area.

Item 10: Mantua has received a Federal Sewage Works Construction Grant for 75 percent of the project cost from the Environmental Protection Agency, however, the area to be served by the sewer line proposed in this application is not eligible for EPA funding. Mantua will be charging \$12.00 per month per connection to amortize the existing FmHA loan. If the community had to borrow the additional \$25,000.00, the service fee would have to increase to approximately \$14.50 per month. This increase would not be favorably accepted by the residents of the community.

REMARKS - PART II - SECTION B:

Item 15: The majority of the work will be done on city streets. Utility easements are in the process of being secured. Highway license has been acquired.

PART III - BUDGET INFORMATION - CONSTRUCTION

SECTION A - GENERAL

1. Federal Domestic Assistance Catalog No.

2. Functional or Other Breakout

SECTION B - CALCULATION OF FEDERAL GRANT

Cost Classification	Use only for revisions		Total Amount Required
	Latest Approved Amount	Adjustment (+ or -)	
1. Administration expense	\$	\$	\$
2. Preliminary expense			
3. Land, structures, right-of-way			
4. Architectural engineering basic fees			
5. Other architectural engineering fees			
6. Project inspection fees			
7. Land development			
8. Relocation Expenses			
9. Relocation payments to individuals and businesses			
10. Demolition and removal			
11. Construction and project improvement			
12. Equipment			
13. Miscellaneous			
14. Total (Lines 1 through 13)			
15. Estimated Income (if applicable)			
16. Net Project Amount (Line 14 minus 15)			
17. Less: Ineligible Exclusions			
18. Add: Contingencies			
19. Total Project Amt. (Excluding Rehabilitation Grants)			
20. Federal Share requested of Line 19			
21. Add Rehabilitation Grants Requested (100 Percent)			
22. Total Federal grant requested (Lines 20 & 21)			
23. Grantee share			
24. Other shares			
25. Total project (Lines 22, 23 & 24)	\$	\$	\$

PART III - BUDGET INFORMATION - CONSTRUCTION

SECTION A - GENERAL

- 1. Federal Domestic Assistance Catalog No.
- 2. Functional or Other Breakout

SECTION B - CALCULATION OF FEDERAL GRANT

Cost Classification	Use only for revisions		Total Amount Required
	Latest Approved Amount	Adjustment + or (-)	
1. Administration expense	\$	\$	\$
2. Preliminary expense			
3. Land, structures, right-of-way			
4. Architectural engineering basic fees			
5. Other architectural engineering fees			
6. Project inspection fees			
7. Land development			
8. Relocation Expenses			
9. Relocation payments to individuals and businesses			
10. Demolition and removal			
11. Construction and project improvement			
12. Equipment			
13. Miscellaneous			
14. Total (Lines 1 through 13)			
15. Estimated Income (if applicable)			
16. Net Project Amount (Line 14 minus 15)			
17. Less: Ineligible Exclusions			
18. Add: Contingencies			
19. Total Project Amt. (Excluding Rehabilitation Grants)			
20. Federal Share requested of Line 19			
21. Add Rehabilitation Grants Requested (100 Percent)			
22. Total Federal grant requested (Lines 20 & 21)			
23. Grantee share			
24. Other shares			
25. Total project (Lines 22, 23 & 24)	\$	\$	\$

OPERATING BUDGET

Name		Address				
Town of Mantua		RFD No. 2, Brigham City, Utah				
Fiscal Year		County		State (Including ZIP Code)		
From	To	Box Elder		Utah 84302		
		19	19	19	19	First Full Year
		(1)	(2)	(3)	(4)	(5)
OPERATING INCOME						
1.	Service Fees				8822	17645
2.	New Connection				0	5000
3.						
4.	Miscellaneous					
5.	Less: Allowances and Deductions	()	()	()	()	()
6.	Total Operating Income (Add Lines 1 through 6)				8822	22645
OPERATING EXPENSES						
7.	Brigham Service				2070	5865
8.	O/M Fee				1242	2484
9.	Principal				0	1660
10.						
11.	Reserve				0	1166
12.	Interest (FmHA)				5000	10,000
13.	Depreciation					
14.	Total Operating Expense (Add Lines 8 through 16)				8312	21,175
15.	NET OPERATING INCOME (LOSS) (Line 7 less 17)				510	1470
NONOPERATING INCOME						
16.						
17.	Total Nonoperating Income (Add 19 and 20)					
18.	NET INCOME (LOSS) (Add Lines 18 and 21) (transfer to line A Schedule 2)				510	1470

Budget and Projected Cash Flow Approved by Governing Body

Attest: *Adrian Ferguson* Secretary 2-22-82 Date
Virgil Allred Appropriate Official 2-22-82 Date

PROJECTED CASH FLOW

	19_____	19_____	19_____	19 82	First Full Year
A. Line 22 from Schedule 1 Income (loss)				510	1470
<u>Add</u>					
B. <u>Items in Operations not Requiring Cash:</u>					
1. Depreciation (line 16 Schedule 1)					
2. Others: _____					
C. <u>Cash Provided From:</u>					
1. Proceeds from FmHA loan/grant				200,000	
2. Proceeds from others				543,375	
3. Increase (Decrease) in Accounts Payable, Accruals and other Current Liabilities					
4. Decrease (Increase) in Accounts Receivable, Inventories and Other Current Assets (Exclude Cash)					
5. Other: <u>Connection Fee</u>				15,000	5,000
6. <u>Service Fee</u>				8,822	17,645
D. Total all A, B and C Items				767,707	24,115
E. <u>Less: Cash Expended for:</u>					
1. All Construction, Equipment and New Capital Items (loan and Grant funds)				758,375	0
2. Replacement and Additions to Existing Property, Plant and Equipment					
3. Principal Payment FmHA Loan				0	1160
4. Principal Payment Other Loans				0	10,000
5. Other: <u>O/M and Reserve</u>				3312	9,515
6. Total E 1 through 5				764,999	20,675
<u>Add</u>					
F. Beginning Cash Balances				0	0
G. Ending Cash Balances (Total of D Minus E 6 Plus F)	\$ _____	\$ _____	\$ _____	\$ 2,708	\$ 3,440
<u>Item G Cash Balances Composed of:</u>	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Construction Account					
Revenue Account					
Debt Payment Account					
O&M Account					
Reserve Account					
Funded Depreciation Account					
Others: <u>Construction Contingency</u>					3,440
Total - Agrees with Item G	\$ _____	\$ _____	\$ _____	\$ 2708	\$ 3440

INSTRUCTIONS

PART III

Section A. General

1. Show the Federal Domestic Assistance Catalog Number from which the assistance is requested. When more than one program or Catalog Number is involved and the amount cannot be distributed to the Federal grant program or catalog number on an overall percentage basis, prepare a separate set of Part III forms for each program or Catalog Number. However, show the total amounts for all programs in Section B of the basic application form.
2. Show the functional or other categorical breakouts, if required by the Federal grantor agency. Prepare a separate set of Part III forms for each category.

Section B. Calculation of Federal Grant

When applying for a new grant, use the Total Amount Column only. When requesting revisions of previously awarded amounts, use all columns.

Line 1 - Enter amounts needed for administration expenses including such items as travel, legal fees, rental of vehicles and any other expense items expected to be incurred to administer the grant. Include the amount of interest expense when authorized by program legislation and also show this amount under Section E Remarks.

Line 2 - Enter amounts pertaining to the work of locating and designing, making surveys and maps, sinking test holes, and all other work required prior to actual construction.

Line 3 - Enter amounts directly associated with the acquisition of land, existing structures, and related right-of-way.

Line 4 - Enter basic fees for architectural engineering services.

Line 5 - Enter amounts for other architectural engineering services, such as surveys, tests, and borings.

Line 6 - Enter fees for inspection and audit of construction and related programs.

Line 7 - Enter amounts associated with the development of land where the primary purpose of the grant is land improvement. Site work normally associated with major construction should be excluded from this category and shown on Line 11.

Line 8 - Enter the dollar amounts needed to provide relocation advisory assistance, and the net amounts for replacement (last resort) housing. Do not include relocation administration expenses on this Line; include them on Line 1.

Line 9 - Enter the estimated amount of relocation payments to be made to displaced persons, business concerns and non-profit organizations for moving expenses and replacement housing.

Line 10 - Enter the gross salaries and wages of employees of the grantee who will be directly engaged in performing demolition or removal of structures from developed land. This line should show also the cost of demolition or re-

moval of improvements on developed land under a third party contract. Reduce the costs on this line by the amount of expected proceeds from the sale of salvage, if so instructed by the Federal grantor agency. Otherwise, show the proceeds on Line 15.

Line 11 - Enter amounts for the actual construction of, addition to, or restoration of a facility. Also include in this category the amounts of project improvements such as sewers, streets, landscaping and lighting.

Line 12 - Enter amounts for equipment both fixed and movable exclusive of equipment used for construction. For example, include amounts for permanently attached laboratory tables, built-in audio visual systems, movable desks, chairs, and laboratory equipment.

Line 13 - Enter amounts for items not specifically mentioned above.

Line 14 - Enter the sum of Lines 1-13.

Line 15 - Enter the estimated amount of program income that will be earned during the grant period and applied to the program.

Line 16 - Enter the difference between the amount on Line 14 and the estimated income shown on Line 15.

Line 17 - Enter amounts for those items which are part of the project but not subject to Federal participation (See Section C, Line 26g, Column (1)).

Line 18 - Enter the estimated amount for contingencies. Compute this amount as follows. Subtract from the net project amount shown on Line 16 the ineligible project exclusions shown on Line 17 and the amount which is excluded from the contingency provisions shown in Section C, Line 26g, Column (2). Multiply the computed amount by the percentage factor allowed by the grantor agency in accordance with the Federal program guidance. For those grants which provide for a fixed dollar allowance in lieu of a percentage allowance, enter the dollar amount of this allowance.

Line 19 - Show the total amount of Lines 16, 17, and 18. (This is the amount to which the matching share ratio prescribed in program legislation is applied.)

Line 20 - Show the amount of Federal funds requested exclusive of funds for rehabilitation purposes.

Line 21 - Enter the estimated amounts needed for rehabilitation expense if rehabilitation grants to individuals are made for which grantees are reimbursed 100 percent by the Federal grantor agency in accordance with program legislation. If the grantee shares in part of this expense show the total amount on Line 13 instead of on Line 21 and explain in Section E.

Line 22 - Show the total amount of the Federal grant requested.

Line 23 - Show the amount from Section D, Line 27h.

Line 24 - Show the amount from Section D, Line 28c.

Line 25 - Self-explanatory.

**U.S. DEPARTMENT OF AGRICULTURE
APPLICATION FOR FEDERAL ASSISTANCE (FOR CONSTRUCTION PROGRAMS)
SECTION C - EXCLUSIONS**

Classification	Ineligible for Participation (1)	Excluded from Contingency Provision (2)
26.		
a.	\$	\$
b.		
c.		
d.		
e.		
f.		
g.		
Totals	\$	\$

SECTION D - PROPOSED METHOD OF FINANCING NON-FEDERAL SHARE

27. Grantee Share		\$
a. Securities		
b. Mortgages		
c. Appropriations (By Applicant)		
d. Bonds	FmHA Grant	25,000.00
e. Tax Levies		
f. Non Cash		
g. Other (Explain)		
h. TOTAL - Grantee share		
28. Other Shares		
a. State		
b. Other		
c. Total Other Shares		
29. TOTAL		\$ 25,000.00

SECTION E - REMARKS

PART IV PROGRAM NARRATIVE (Attach -- See Instructions)

Instructions - Operating Budget Schedule 1

Form is to be prepared by the Applicant and is to include data for each year, from loan closing through the first full year of operation. Example: If only two columns are required, use columns four (4) and five (5).

Income and Expense Items:

Data entered should be on the same basis as the Applicant's Accounting records, i.e., cash basis, accrual basis, etc..

Operating Income:

1-5 List types of income as appropriate.

6 - Allowances and Deductions:

(Pertains generally to Health Care Institutions, and represents the difference between Gross Income and Amounts Received or to be Received from patients and third party payors)

Operating Expenses

8-14 List types of expenses as appropriate.

15 - Interest FmHA

(interest expense incurred on FmHA note(s)).

16 - Depreciation

(total depreciation expense for the year)

18 - Net Operating Income (Loss)

(this amount represents the net operating income or loss before adding income not related to operations below)

Operating Income

19-20 (indicate items of income derived from sources other than regular activities, Ex: interest earned)

22 - Net Income (Loss)

(this amount is also transferred to item A Schedule 2 Projected Cash Flow Statement)

Instructions - Projected Cash Flow, Schedule 2

Form is used to Project the Flow of Cash by the Applicant for each year, from loan closing through the first full year of operation. Use the same number of columns as used on the Operating Budget, Schedule 1. These Cash Flow Projections are important in determining the adequacy of cash to cover operating expenses, transfers to debt payment, reserve accounts, etc..

Basis Accounting

Applicants who maintain their records strictly on the cash basis of accounting and have no Accounts Receivable and Accounts Payable, only need to complete the following line items: A, B-1, C-1, E-1 and E-3, F and G.

Item Instructions

A - Bring forward the income or loss as entered on line 22, schedule 1.

B - Add back any depreciation or other non cash items included on Schedule 1, Operating Budget.

C - Complete items C-1 through C-6 as appropriate, for item changes which provide for increase in cash balances.

NOTE: Do not include changes in cash Accounts in Current Assets of item C-4. Lines C-3 and C-4 will indicate the changes in Working Capital (Current Assets and Current Liabilities, Exclusive of Cash.)

D - Enter the Net Total of all A, B and C items.

E - Complete items E-1 through E-6 as appropriate for items for which cash was expended.

F - Enter the Beginning Cash Balance(s) for the period.

G - The total of item D less E-6 plus F will be the Ending Cash Balance(s). This total will be reconciled by balances in the various accounts, i.e., construction, revenue, debt, etc..

Minutes of March 18-1982

H

aa

I

February 26, 1982

Box Elder Planning Commission
Court House
Brigham City, Utah 84302

Gentlemen:

Enclosed herewith is a Preapplication, Application and Supporting Data for the Mantua, Sewer System, Mantua, Utah. Your review and comments will be appreciated.

Respectfully,

HANSEN & ASSOCIATES, INC.



KEITH A. HANSEN, P.E.

KAH/ss

Enclosurers

H^{double}aaI

Consulting Engineers & Land Surveyors

DA-FHA
Form FHA 449-10
(3-73)

APPLICANT'S ENVIRONMENTAL IMPACT EVALUATION

Monies or other benefits may be paid out under this program unless this report is completed and filed as required by existing law and regulations (7 C.F.R. 1980, Supart E).

Name and Address of Applicant (Firm Name) (Street, City, State and Zip Code) Town of Mantua R.F.D. No. 2 Brigham City, Utah 84302	EMPLOYER ID NO.
	FHA CASE NO.

In order to evaluate the specific impact your proposed project will have on the environment, please complete the following items.

- 1. Federal waste discharge permit required under the Federal Water Pollution Control Act Amendments of 1972? Yes No
- 2. If no, complete parts I through VIII. If yes, has an application been made for the permit? Yes No
- 3. If no, what is the status of that application? Approved Pending Disapproved?

If above application for permit did not cover all facilities in your project please identify those not covered and complete balance of form, as it pertains to those you list. If the application for permit covered all facilities complete Parts I, VI, VII and VIII.

GENERAL (Briefly describe):

A. Location of facility - Provide map if possible to show project location and areas which might be affected by the facility.

Sewage Collection System within the community and an outfall to Brigham City.

B. Character of the surrounding area (include terrain, population density, etc.)

The sewer system is being built in a rural community. The outfall will be constructed along the route of an existing waterline in Box Elder Canyon between Brigham City and Mantua. The approximate population of Mantua is 500; the town limits include 750 acres.

C. Type of project (nature of activity)

Construction of a sewage collection line to serve a subdivision whose septic tanks pose a threat to two wells which are a major source of culinary water for Brigham City, Utah.

Your project must conform to approved standards established by the Federal or your state or local environmental protection agencies, please identify for each of Parts II (Air), III (Water), IV (Solid) and V (Other) the appropriate regulating agencies and go on to the next section. If you are not required to conform to such standards, please complete all questions to the best of your knowledge in each part for which standards are not set. You may wish to consult with appropriate State or local agencies preparing your answers.

F. AIR POLLUTION (include name and address of agencies with cognizance over your project. If you must conform to standards set by these agencies, go on to part III.)

Environmental Protection Agency
1860 Lincoln Street
Denver, CO 80295

Utah Dept. of Environmental Health
Div. of Water Pollution
44 Medical Drive
Salt Lake City, Ut 84113

Cite this project's:

- A. Activities which are likely to produce air pollution such as incinerators, exhaust systems, fossil-fuel burning units, and ventilation systems.
 1. Vehicle exhausts
 2. Construction activities

B. Methods and sensor equipment for determining the presence, quantity, and type of air pollutants.

It is not anticipated that the effects will be of significant magnitude or of sufficient duration to require analysis. Contractor will be required to comply with appropriate EPA regulations.

C. Concentrations in parts per million (ppm) of air pollutants such as sulfur dioxide, carbon monoxide, nitrogen dioxide, carbon dioxide, etc.

Unknown. Vehicular emissions will be those normally associated with typical construction equipment.

D. Volatile solvents, types, and how used, as well as handling of discharges.

None to be used.

E. Kind of fuel used in combustion and heating: fossil, liquid, gaseous.

Diesel and/or gasoline fuel will be used in equipment.

F. Control equipment to remove particulates and efficiency of such equipment.

Equipment normally installed on typical construction equipment.
Efficiency unknown.

G. Control equipment to remove gaseous pollutants and efficiency of such equipment.

Equipment normally installed on typical construction equipment.
Efficiency unknown.

H. Describe any chemicals used to control pollutants that might themselves cause another form of pollution.

None.

I. List other major contributors, current or planned, associated with project and which may affect the quality and quantity of emissions to the air.

None anticipated.

III. WATER POLLUTION (include name and address of agencies with cognizance over your project. If you must conform to standards set by these agencies complete questions B and D, then go on to part IV.)

Environmental Protection Agency
1860 Lincoln Street
Denver, CO 80295

Utah Dept. of Environmental
Health
44 Medical Drive.
Salt Lake City, Utah 84113

A. Describe activities that are likely to produce water pollution.

B. Describe water pollution control codes and/or regulations applicable to the project.

Federal Water Pollution Control Act as amended (33 USC 1251)

C. Describe method and sensor equipment used to determine, quantity, and/or type of water pollution.

D. What levels (concentrations of the following contaminants to result from your project) do your local water pollution standards permit you to discharge in your sewage and/or waste water?

	Discharge expected from your project	Standard		Discharge expected from your project	Standard
Total solids	10 mg/l	10	Acidity		
Heavy metals			Alkalinity		
Organic carbon			pH (hydrogen ion concentration)	7.0	6.5 - 9.0
Chloride			Hardness		
Cyanide			Color		
Grease			Biochemical oxygen demand	10 mg/l	10
Lignin			Chemical oxygen demand		
Ammonia nitrogen			Dissolved oxygen		
Nitrate nitrogen			Turbidity		
Organic nitrogen			Temperature		
Phenol			Specific gravity		
Phosphorus			Conductance		
Suspended matter			Oil		
Surface Active Agents					

E. Pretreatment facilities; that is, pH neutralizers, oil separators, screens, pre-settling basins, etc.

1. Is a municipality, local government entity, or industry required to have pretreatment facilities?

Yes No

2. If an industrial borrower or substantial direct beneficiary, what type of pretreatment facilities do you plan?

F. Sanitary sewage discharge (Check one and describe):

Municipal treatment
 Local body of water

Septic tank
 Other _____

Local treatment plant

G. Industrial waste discharge (Check one and describe):

Municipal treatment plant
 Other _____

Industrial treatment plant

Local body of water

H. Are sanitary and industrial waste water drainage flows combined?

Yes No
 Yes No

Is storm flow combined with one or both?
If one, which?

I. Will the project create a substantial increase in the volume of sewage treated by a given facility?

Yes No

If yes, identify major contributors and kind of discharge from each.

V. SOLID WASTE DISPOSAL (include name and address of agencies with cognizance over your project. If you must conform to standards set by these agencies, go on to part V.)

Environmental Protection Agency
1860 Lincoln Street
Denver, CO 80295

A. Does project produce amounts of solid waste which cannot be readily disposed of?

Yes No

For example, combustibles such as paper, bags, boxes; noncombustibles such as glass, sand, plastics, salvageable materials, sludges or filter residues, tars or oils, cinders or flyash, or others. If yes, identify the solid wastes.

B. What laws, ordinances, or practices govern solid waste management?

Contract document

C. How are solid wastes disposed of?

Santiary Landfill

D. Are the equipment and techniques employed adequate for the collection, handling, and disposal of solid wastes?

Yes No
 Yes No

Do they cause noise or dust?

E. Will they accommodate the increased load caused by the project?

Yes No

V. OTHER FORMS OF POLLUTION: (these may include, but not be limited to radiation, noise, radio frequency interference, visual)

A. What are they?

B. How severe? Moderate for a limited time (construction period)

C. Do codes and/or appropriate regulations govern such pollution to be expected from your project? Yes No
If "Yes", identify.

VI. GENERAL PROJECT EFFECTS

A. Describe existing land use, such as Industrial, Recreational, Residential, Sound barriers, Commercial, Semi-private, Public, Farm, etc., including any existing zoning classifications.

Construction area is a rural community zoned for one-half acre lots.

B. Describe changes in land use.

No changes except to eliminate ground water pollution by conducting presently existing surfacing sewage to a treatment plant.

C. Will the project affect transportation by Highway, Rail, Water or Air? Yes No
If yes, how?

D. Will the project affect fish, wild life, water-fowl refuges, beaches, historical sites, forested and scenic areas, etc. Eliminate pollution of Big Creek Yes No

II. PLEASE DESCRIBE THE INDIRECT EFFECTS THE PROPOSED PROJECT IS EXPECTED TO HAVE ON THE ENVIRONMENT. (In this section include changes which, although brought about by the proposed project, are not caused by the project itself. An access road to serve a proposed industrial park might be included here).

None expected

III. UPON EVALUATION OF THE INFORMATION SUPPLIED ABOVE, OR ON THE BASIS OF INFORMATION SUPPLIED TO THE FEDERAL OR STATE ENVIRONMENTAL PROTECTION AGENCY, PLEASE PROVIDE A BRIEF SUMMARY OF THE ENVIRONMENTAL IMPACT OF THE PROPOSED PROJECT. The summary shall include a description of the extent to which the project significantly affects the environment, as provided by the National Environmental Quality Act of 1969, including consideration of:

A. The environmental impact of the proposed project,

Refer to pages 33 and 42 of the Facility Plan (on file)

B. Any adverse environmental effects which cannot be avoided should the proposed project be implemented,

Refer to pages 33 and 42 of the Facility Plan (on file)

C. Alternatives to the proposed project,

Refer to pages 15 through 18 of the Facility Plan (on file)

D. The relationship between local short term uses of man's environment and the maintenance and enhancement of long-term productivity and

E. Any irreversible and irretrievable commitments of resources which would be involved in the proposed project should it be undertaken,

F. Have any questions or objections been raised by any governmental agency, private organization or individual which might indicate that this proposal is, or will become, controversial?
If yes, please describe:

Yes No

X. TO BE SIGNED BY APPLICANT.

2-27-82
Date

Vijay K. Khurana
Applicant

BALANCE SHEET

Name Town of MANTUA
 Address Rt #2 Box 441 Brigham City UT 84302

ASSETS

CURRENT ASSETS

1. Cash on Hand and in Banks
 2. Time deposits and short-term investments
 3. Accounts receivable
 Less: Allowance for doubtful accounts
 4. Inventories SECRET PAPER
 5. Prepayments

 Total Current Assets (Add 1 through 8)

FIXED ASSETS

6. Land
 7. Buildings
 8. Furniture and equipment

 9. Less: Accumulated depreciation
 Net Total Fixed Assets (Add 10 through 14)

OTHER ASSETS

10. PIPE CIRC. Dump Truck (Depreciated)

 Total Assets (Add 9, 15, 16 and 17)

LIABILITIES AND EQUITIES

CURRENT LIABILITIES

11. Accounts payable
 12. Notes payable
 13. Current portion of FmHA note
 14. Customer deposits
 15. Taxes payable
 16. Interest payable FmHA

 Total Current Liabilities (Add 19 through 26)

LONG-TERM LIABILITIES

17. Notes payable FmHA

 Total Long-Term Liabilities (Add 28 through 30)
 Total Liabilities (Add 27 and 31)

EQUITY

18. Retained earnings
 19. Memberships
 Total Equity (Add lines 33 and 34)
 Total Liabilities and Equity (Add lines 32 and 35)

1 1 81			1 1 80		
Month	Day	Year	Month	Day	Year
Current Year			Prior Year		
		16,384			28,783
		27,697			15,986
		50			
		()			()
		1,175			1,175
		45,306			45,943
		15,000			15,000
		227,800			227,800
		(74,062)			(69,062)
		168,738			173,738
		1,800			2,000
		215,844			221,681
		2,200			2,200
		873			873
		6,354			6,354
		9427			9427
		106,823			114,049
		37,800			
		144,623			114,049
		154,050			123,476
		61,794			98,205
		61,794			98,205
		215,844			221,681

WITHOUT AUDIT
 Certified Correct

2-7-81
 (Date)

Annaliese Jensen
 Appropriate Official

**USER FEE DETERMINATION
EQUIVALENT RESIDENTIAL USERS**

Total Water Delivered from Well:

Summer Months (June-October)	19,160,000 gallons
Average Monthly Use	3,193,333 gallons
Winter Months	12,001,000 gallons
Average Monthly Use	2,000,167 gallons

Average Residential Use:

Winter Use (6 months)		12,001,000 gallons
Less Commercial Users		
L.D.S. Ward (6 months)	192,400	
H. Facer Dairy	350,000	
D. Sorensen Dairy	160,000	
		<u>- 702,400 gallons</u>
Winter Residential Use		11,298,600 gallons
Average Monthly Use		1,883,100 gallons
Number of Residential connections		146
Water Used/Residential Connection (1)		12,898 gallons
Use/"R"		13,000 gallons/conn

(1) Winter Use used to establish wastewater contribution since water in summer is also used to irrigate lawns and gardens.

Commercial Users:

L.D.S. Ward		1,230,800 gallons/yr
Winter Use - 6 months		192,400 gallons/mo
Average Internal Use/mo. (2)		32,067 gallons/mo
Summer Use - 6 months		1,038,400 gallons
Average Monthly Use		173,067 gallons/mo
Less: Internal Use (2)		32,067 gallons/mo
Irrigation		141,000 gallons/mo

(2) Internal use assumed to be wastewater with essentially constant quantity each month.

L&T Campground.	1,200,660 gallons/yr.
Less: One residential equivalent user.	156,000 gallons/yr.
<u>Summer Use</u>	1,044,660 gallons/yr.
Average Monthly Use - 6 months	174,100 gallons/mo.
Less: Irrigation (3)	141,000 gallons/mo.
Wastewater	33,100 gallons/mo.

(3) Lawn area watered equals LDS Ward area.

H. Facer Dairy	840,000 gallons/yr.
Average Monthly Use (Wastewater)	70,000 gallons
D. Sorensen Dairy	384,000 gallons/yr.
Average Monthly Use (Wastewater)	32,000 gallons

Equivalent Residential Users:

	<u>Use</u>	<u>Equivalent "R"</u>
L.D.S. Ward	32,000	2.47
L & T Campground	33,100	2.55
H. Facer Dairy	70,000	5.33
D. Sorensen Dairy	32,000	2.46
Total Commercial Users		12.86 R
Residential Users on Sewer		115.00 R
Total numbers of equivalent "R"		<u>127.86 R.</u>

SEWER SYSTEM O/M - 1982

Garland, Utah O/M	\$ 2.00/conn./mo.
Tremonton, Utah O/M	1.75/conn./mo.
Brigham City, Utah O/M	1.60/conn./mo.
Average	1.78/conn./mo.
Use	1.80/conn./mo.
Annual O/M @ 115 conn.	\$ 2,484.00/yr.

(1) EPA Publication MCD-39, page 5-1, table 5.5

SERVICE FEES - 1982Expenses:

Proposed Bonds	\$200,000	
Annual Cost @ 5% - 40 Years		\$ 11,666
Reserve		1,166
O/M Sewer System		2,484
Brigham Service Fee @ \$3.00/conn/mo.		4,140
Anticipated Increase from Brigham City @ \$1.25/conn/mo.		<u>1,725</u>
<u>TOTAL EXPENSE</u>		<u>\$21,181</u>

Revenue:

New Connection - 5yr @ \$1,000.00	5,000
Service Fees - 127.86R @ 11.50/mo.	<u>17,645</u>
TOTAL REVENUE - 1982	22,645
SURPLUS OR (DEFICIT)	1,464
Monthly Service Fee	11.50/R
Connection Fee	1,000.00/each

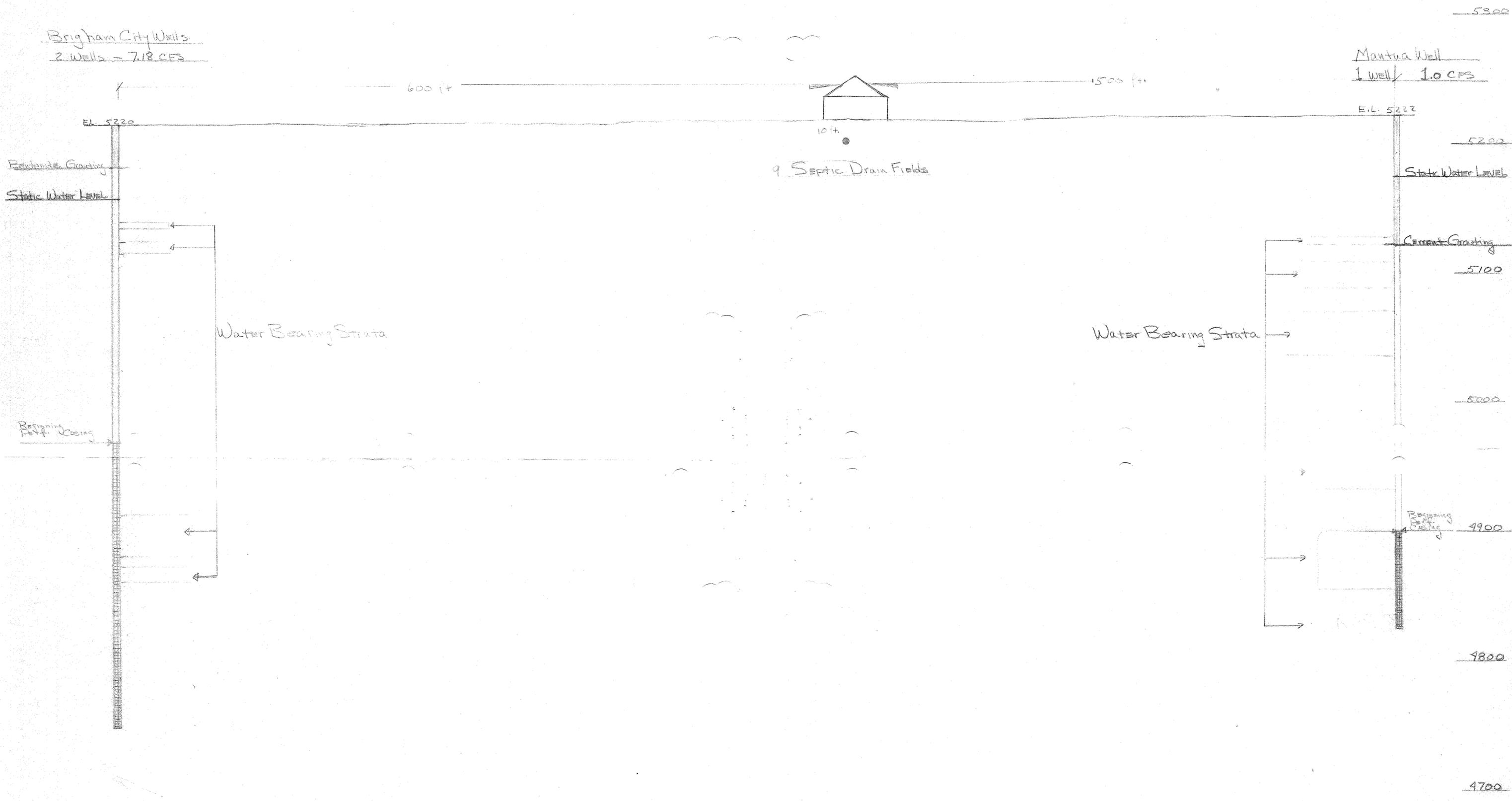
Sewage Treatment Fee

Brigham Service Fee	3.00/conn/yr
Anticipated Brigham City Increase	1.25/conn/yr
Wastewater/"R"	13,000.00/gal./yr
Treatment Cost/1000 gal.	0.33

PROFILE OF WELL DRILLERS LOG BRIGHAM CITY + MANTUA

Brigham City Wells
2 Wells - 7.18 CFS

Mantua Well
1 Well / 1.0 CFS



VERT. SCALE 1" = 50'
HORIZ. SCALE ~ 1" = 60'