

2026

ANNUAL UTILITY RATE SURVEY

IN COOPERATION WITH 

INSTRUCTIONS

Please complete the survey online, or complete the following print survey (4 pages) and fax, mail, or email as a PDF to:

Mail Miranda Kleven
 AE2S Nexus
 4050 Garden View Drive, Suite 200
 Grand Forks, ND 58201

Email ratesurvey@ae2s.com

Fax 701-746-0370
 Attention: Miranda Kleven



ONLINE VERSION | www.ae2sratesurvey.com

Access the data you submitted last year for easier and faster survey completion!

PLEASE COMPLETE AND RETURN BY MARCH 20, 2026

All survey participants will receive a complimentary copy of the utility rate survey report. AE2S reserves the right to limit the distribution of surveys to survey participants.

City: _____ State: _____ Population Served: _____

Contact Name (Last): _____ (First): _____

Title: _____ Contact Phone: _____

Address: _____

NUMBER OF WATER ACCOUNTS	NUMBER OF WASTEWATER ACCOUNTS

Please provide the following information for each person that you would like to receive a copy of the utility rate survey report booklet:

NAME	TITLE	ADDRESS	ZIP CODE

RESIDENTIAL WATER RATE INFORMATION

1. WATER SOURCE

- Surface Water
- Groundwater
- Both Surface Water and Groundwater
- Purchased from (source type):
 - Surface Water Groundwater
 - Combined Other

If Other, please specify: _____

- No Water Service

2. IS YOUR UTILITY'S TREATED WATER SOFTENED?

- Yes No

If Yes, please note method:

- Lime Softening
- Ion Exchange Softening
- Membrane Softening
- Not Sure of Method, but Know that Water is Softened

7. EFFECTIVE DATE OF CURRENT WATER RATES: _____ (MONTH/YEAR)

8. CURRENT RESIDENTIAL WATER RATES

REPORT RATES FOR $\frac{5}{8}$ - OR $\frac{3}{4}$ -INCH METER, WHICHEVER IS MOST COMMON			
	CHARGE (\$)	AMOUNT OF WATER INCLUDED IN BASE RATE	
Base Rate ($\frac{5}{8}$ - or $\frac{3}{4}$ -inch Meter Charge)	\$ _____	<input type="checkbox"/> Gallons or <input type="checkbox"/> Cubic Feet	
VOLUMETRIC RATE	CHARGE (\$)	PER 1,000 GAL (KGAL) OR PER 100 CUBIC FEET (CCF) (CHECK ONE)	FOR HOW MUCH WATER (BILLED RANGE): E.G., 0 - 2,000
1st Volumetric Rate	\$ _____	Per <input type="checkbox"/> kgal or <input type="checkbox"/> CCF	
2nd Volumetric Rate	\$ _____	Per <input type="checkbox"/> kgal or <input type="checkbox"/> CCF	
3rd Volumetric Rate	\$ _____	Per <input type="checkbox"/> kgal or <input type="checkbox"/> CCF	
4th Volumetric Rate	\$ _____	Per <input type="checkbox"/> kgal or <input type="checkbox"/> CCF	
5th Volumetric Rate	\$ _____	Per <input type="checkbox"/> kgal or <input type="checkbox"/> CCF	
Additional Fees – Note per month <input type="checkbox"/> , per quarter <input type="checkbox"/> , or per year <input type="checkbox"/>			
State Test Fee: _____			
Other*: _____			

*Note: Please include "other" water-related charges only; not mosquito control, snow removal, stormwater, etc.

9. CURRENT RESIDENTIAL WATER RATES VERIFICATIONS

BASED ON 6,000 GALLONS OR 8.02 CCF AVERAGE USE AND $\frac{5}{8}$ - OR $\frac{3}{4}$ -INCH METER

Please calculate the monthly water charge.

	6,000 GALLONS	8.02 CCF
Base Rate ($\frac{5}{8}$ - or $\frac{3}{4}$ -inch Meter Charge)	\$	\$
1st Increment	\$	\$
2nd Increment	\$	\$
3rd Increment	\$	\$
4th Increment	\$	\$
5th Increment	\$	\$
ADDITIONAL FEES		
State Test Fee	\$	\$
Other*	\$	\$
TOTAL OF FEES LISTED ABOVE	= \$	= \$

RESIDENTIAL WASTEWATER RATE INFORMATION

10. TREATMENT SYSTEM TYPE

- Mechanical
- Lagoon
- Outsourced to (system type):
 - Mechanical or Lagoon
 - No Wastewater Service

11. BILLING IS IN:

- 1,000 Gallons
- 100 Cubic Feet (CCF)

12. FREQUENCY OF BILLING

- Bi-monthly
- Monthly
- Quarterly
- Other (please specify): _____

13. DID YOU INCREASE YOUR RESIDENTIAL WASTEWATER RATES FOR 2026? No Yes

14. PLEASE NOTE INCREASE % OR \$

Fixed Rate: _____ % \$ _____
 Volumetric Rate: _____ % \$ _____

15. CURRENT RESIDENTIAL WASTEWATER RATES

	CHARGE (\$)	AMOUNT OF WASTEWATER INCLUDED IN BASE RATE	
Base Rate ($\frac{5}{8}$ - or $\frac{3}{4}$ -inch Meter Charge)	\$	<input type="checkbox"/> Gallons or <input type="checkbox"/> Cubic Feet	
VOLUMETRIC RATE	CHARGE (\$)	PER 1,000 GAL (KGAL) OR PER 100 CUBIC FEET (CCF) (CHECK ONE)	FOR HOW MUCH FLOW (BILLED RANGE): E.G., 0 - 2,000
1st Increment	\$	Per <input type="checkbox"/> kgal or <input type="checkbox"/> CCF	
2nd Increment	\$	Per <input type="checkbox"/> kgal or <input type="checkbox"/> CCF	
3rd Increment	\$	Per <input type="checkbox"/> kgal or <input type="checkbox"/> CCF	
Additional Fees – Note per month <input type="checkbox"/> per quarter <input type="checkbox"/> or per year <input type="checkbox"/>			
Other:			

16. RESIDENTIAL WASTEWATER RATE VERIFICATION

BASED ON 6,000 GALLONS OR 8.02 CCF AVERAGE WATER USE, PLEASE CALCULATE THE MONTHLY WASTEWATER CHARGE		
	6,000 GALLONS	8.02 CCF
Base Rate (5/8- or 3/4-inch Meter Charge)	\$	\$
1st Increment	\$	\$
2nd Increment	\$	\$
3rd Increment	\$	\$
Other Charges	\$	\$
TOTAL OF FEES LISTED ABOVE	= \$	= \$

RESIDENTIAL STORMWATER RATE INFORMATION**17. DO YOU CHARGE A SEPARATE FEE FOR RESIDENTIAL STORMWATER?**

Yes
 No - If no, is your City considering implementing a stormwater charge in the foreseeable future?
 Yes, anticipated implementation date: _____
 No

18. WHAT IS THE MONTHLY AVERAGE RESIDENTIAL STORMWATER CHARGE PER SINGLE FAMILY RESIDENCE?

\$ _____

How is ERU defined for your utility? _____ square feet

19. DID YOU INCREASE YOUR STORMWATER RATES FOR 2026? N/A No Yes _____ %

THANK YOU FOR PARTICIPATING IN OUR 2026 RATE SURVEY!