

2026

ANNUAL UTILITY RATE SURVEY



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

3. BILLING IS IN:

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

4. FREQUENCY OF BILLING:

- ☐ Bi-monthly
☐ Monthly
☐ Quarterly
☐ Other: _____

5. DID YOU INCREASE YOUR RESIDENTIAL WATER RATES FOR 2026?

- ☐ No ☐ Yes: _____%

6. PLEASE NOTE INCREASE % OR \$

Fixed Rate: _____% \$ _____

Volumetric Rate: _____% \$ _____

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

8. CURRENT RESIDENTIAL WATER RATES

REPORT RATES FOR 5/8- OR 3/4-INCH METER, WHICHEVER IS MOST COMMON			
	CHARGE (\$)	AMOUNT OF WATER INCLUDED IN BASE RATE	
Base Rate (5/8- or 3/4-inch Meter Charge)	\$	_____ <input type="checkbox"/> Gallons or <input type="checkbox"/> Cubic Feet	
VOLUMETRIC RATE	CHARGE (\$)	PER 1,000 GAL (K GAL) 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 5/8- OR 3/4-INCH METER		
Please calculate the monthly water charge.		
	6,000 GALLONS	8.02 CCF
Base Rate (5/8- or 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 (5/8- or 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!