

STATE WATER RESOURCES CONTROL BOARD

**CALIFORNIA EXTENDED WATER AND WASTEWATER ARREARAGE
PAYMENT PROGRAM - DISBURSEMENT REQUEST FORM**

LEGAL ENTITY NAME: COUNTY OF SAN BERNARDINO DEPT PUBLIC WKS SPECIAL DIST

MAILING ADDRESS: 222 W. HOSPITALITY LANE, 2ND FLOOR
SAN BERNARDINO, CA 92415

ARREARAGE PERIOD (SELECT ALL THAT APPLY)

- 03/04/2020 - 06/15/2021 (Original COVID-19 Bill Relief Period)
 06/16/2021 - 12/31/2022 (Modified COVID-19 Bill Relief Period)

Enter a dollar amount with cents into each field. If no dollars are being requested, enter a zero.

	WATER ARREARAGE	WASTEWATER ARREARAGE	TOTAL ARREARAGE REQUESTED
RESIDENTIAL	\$ 165,831.82	\$ 718,778.63	\$ 884,610.45
COMMERCIAL	\$ 1,173.14	\$ 46,934.91	\$ 48,108.05
SUBTOTAL			\$ 932,718.50
ADMINISTRATIVE COSTS (MAXIMUM OF 3% OF SUBTOTAL UP TO \$1 MILLION)			\$ 27,981.56
GRAND TOTAL OF PAYMENT AMOUNT REQUESTED			\$ 960,700.06

CERTIFICATION: I have read and signed the Conditions of Payment Form and understand this Disbursement Request Form **CANNOT BE PROCESSED** unless a complete and accurate Conditions of Payment Form is currently on file with the State Water Resources Control Board.

The arrearages claimed in this Disbursement Request Form have been incurred and remain unpaid by customers of the Applicant and any payments received from the State Water Resources Control Board will be allocated as bill credits within sixty (60) days of receipt of the funds requested in accordance with the California Extended Water and Wastewater Arrearage Payment Program Guidelines and will return any moneys not credited to the State Water Resources Control Board within six months of receipt.

AUTHORIZED REPRESENTATIVE OR DESIGNEE SIGNATURE:

DATE:

David Doublet - Assistant Director



12/29/2023

FOLLOWING SECTION IS FOR STATE USE ONLY

PAYMENT INVOICE NO.: A00197-01

INVOICE DATE: 12/29/2023

**CALIFORNIA EXTENDED WATER AND WASTEWATER ARREARAGE
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(STATE USE ONLY)

LEGAL ENTITY NAME: COUNTY OF SAN BERNARDINO DEPT PUBLIC WKS SPECIAL DIST
REMIT TO ADDRESS: 222 W. HOSPITALITY LANE, 2ND FLOOR
 SAN BERNARDINO, CA 92415

PAYMENT INVOICE NO.: A00197-01

INVOICE DATE: 12/29/2023

PAYMENT REQUEST AMOUNT	\$ 960,700.06
ADJUSTMENT	\$ 0
AMOUNT DUE	\$ 960,700.06

ADJUSTMENT COMMENTS:

FISCAL SUPPLIER ID: 0000012187

ADDRESS ID: 118

FUND TITLE		ITEM	FY	CHAPTER	STATUTE
Coronavirus Fiscal Recovery Fund of 2021		3940-162-8506	23/24	38/23	2023
PROGRAM	REPORTING STRUCTURE	ACCOUNT	ALT ACCOUNT	PROJECT #	PROJECT ACTIVITY #
3560000C93	39400556	5432600	5432600000	3940COVIDARREAR	L/A

STATUTE LANGUAGE:

Per California Health and Safety Code 116773.4, the board provides financial assistance to community water systems and wastewater treatment providers for the purpose of assisting customers with past-due bills accrued during the COVID-19 pandemic bill relief period from March 4, 2020 to December 31, 2022.

SIGNATURES FOR APPROVAL OF PAYMENT

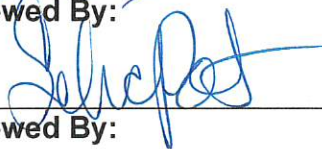

 Reviewed By:

AGPA

MAR 26 2024

Title: Analyst

Date:


 Reviewed By:

SSMII

Title: Manager

Date:

3/26/2024