2020 MAR 16 A 10: 36

ANNUAL REPORT

Of

Company Name:

Heart Cab Co., Inc. DBA Sulger Water Company #2

c/o Amie Sulger, Vice President

Mailing Address:

2567 N. Calle Segundo Huachuca City

AZ

85616

Docket No.:

W-02355A

For the Year Ended:

12/31/19

WATER UTILITY

To

Arizona Corporation Commission

Due on April 15th

Email: rdelafuente@azcc.gov, mail or deliver the completed Annual Report to: Arizona Corporation Commission Compliance Section - Utilities Division 1200 West Washington Street Phoenix, Arizona 85007

Application Type:

Original Filing

Application Date:

3/6/2020

ARIZONA CORPORATION COMMISSION WATER UTILITY ANNUAL REPORT Heart Cab Co., Inc. DBA Sulger Water Company #2 A Class E Utility

Date of Original Organization of Utility: Person to whom correspondence should be addressed concerning this report: Name: Amie Sulger	For the Calendar Year E	nded: <u>12/31/19</u>					
City: Huachuca City State: Arizona Zip Code: 85616 Telephone Number: 520-808-7300 Date of Original Organization of Utility: 8/13/1979 Person to whom correspondence should be addressed concerning this report: Name: Amie Sulger Telephone No.: 520-808-7300 Address: 2567 N Calle Segundo City: Huachuca City State: Arizona Zip Code: 85616 Email: aulgerwate/Zidyahoo.com Regulatory and On-Site Manager Contact Name: Telephone No.: 520-808-7300 Address: City: Huachuca City State: Arizona Zip Code: 85616 Email: aulgerwate/Zidyahoo.com Regulatory and Management Contact Name: Timothy Sulger Telephone No.: 520-808-7300 Address: City: Huachuca City State: Arizona Zip Code: 85616 Email: aulgerwate/Zidyahoo.com Regulatory and Management Contact Name: Telephone No.: 520-808-7300 Address: 2567 N Calle Segundo City: Huachuca City State: Arizona Zip Code: 85616 Email: sulgerwater/Zidyahoo.com Regulatory and Management Contact Name: Sulger Telephone No.: 520-808-7300 Address: 2567 N Calle Segundo City: Huachuca City State: Arizona Zip Code: 85616 Basil: sulgerwater/Zidyahoo.com On-Site Manager Name: Amie Sulger Telephone No.: 520-808-7300 Address: 2567 N Calle Segundo City: Huachuca City State: Arizona Zip Code: 85616 Basil: sulgerwater/Zidyahoo.com On-Site Manager Name: Amie Sulger Telephone No.: 520-808-7300 Address: 2567 N Calle Segundo City: Huachuca City State: Arizona Zip Code: 85616 Basil: sulgerwater/Zidyahoo.com On-Site Manager Name: Amie Sulger Telephone No.: 520-808-7300 Address: 2567 N Calle Segundo City: Huachuca City State: Arizona Zip Code: 85616 Basil: sulgerwater/Zidyahoo.com Ownership: "C" Corporation	Drimany Address	2567 N. Calla Sagunda					1
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Email: sulgerwater2@yahoo.com Ownership: "C" Corporation				State: Arizona		Zin Code	85616
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	Eman;	surgerwater2(@yalloo.com					
	Ownership:	"C" Corporation					
Counties Served: [Cochise]	Counties Served:	Cochise					

ARIZONA CORPORATION COMMISSION WATER UTILITY ANNUAL REPORT Heart Cab Co., Inc. DBA Sulger Water Company #2

Important changes during the year
For those companies not subject to the affiliated interest rules, has there been a change in ownership or direct control during the year?
If yes, please provide specific details in the box below.
N/A
Has the company been notified by any other regulatory authorities during the year, that they are out of compliance?
If yes, please provide specific details in the box below.
N/A

		Utilit	y Plant in Service	(Water)			
Account	Description	Beginning Year	Current Year	Current Year	Adjusted	Accumulated	OCLD (OC less
No.		Original Cost	Additions	Retirements	Original Cost	Depreciation	AD)
301	Organization	\$0	\$0	\$0	\$0	\$0	\$0
302	Franchises	0	0	0	0	0	0
303	Land and Land Rights	5,000	0	0	5,000	0	5,000
304	Structures and Improvements	4,097	0	0	4,097	1,967	2,130
305	Collecting & Improving Reservoirs	0	0	0	0	0	0
306	Lake, River, Canal Intakes	0	0	0	0	0	0
307	Wells and Springs	0	. 0	0	0	0	0
308	Infiltration Galleries	0	0	0	0	0	0
309	Supply Mains	0	0	0	0	0	0
310	Power Generation Equipment	0	0	0	0	0	0
311	Pumping Equipment	2,096	0	0	2,096	2,095	1
320	Water Treatment Equipment	0	0	0	0	0	0
320.1	Water Treatment Plants	0	0	0	0	0	0
320.2	Solution Chemical Feeders	0	0	0	0	0	0
320.3	Point-of-Use Treatment Devices	0	0	0	0	0	0
330	Distribution Reservoirs and Standpipes	0	0	0	0	0	0
330.1	Storage Tanks	0	0	0	0	0	0
330.2	Pressure Tanks	12,914	0	0	12,914	6,564	6,350
331	Transmission and Distribution Mains	68,678	0	0	68,678	31,180	37,498
333	Services	0	0	0	0	0	0
334	Meters and Meter Installations	3,796	93	0	3,889	2,515	1,374
335	Hydrants	0	0	0	0	0	0
336	Backflow Prevention Devices	0	0	0	0	0	0
339	Other Plant and Misc. Equipment	0	0	0	0	0	0
340	Office Furniture and Equipment	640	0	0	640	307	333
340.1	Computer & Software	1,007	0	0	1,007	805	202
341	Transportation Equipment	0	0	0	0	0	0
342	Stores Equipment	0	0	0	0	0	0
343	Tools, Shop and Garage Equipment	0	0	0	0	0	0
344	Laboratory Equipment	0	0	0	0	0	0
345	Power Operated Equipment	0	0	0	0	0	0
346	Communication Equipment	0	0	0	0	0	0
347	Miscellaneous Equipment	1,110	0	0	1,110	459	651
348	Other Tangible Plant	0	0	0	0	0	0
	Totals	\$99,338	\$93	\$0	\$99,431	\$45,892	\$53,539

Heart Cab Co., Inc. DBA Sulger Water Company #2 Annual Report Depreciation Expense for the Current Year (Water) 12/31/19

A	T Description	STATE OF THE OWNER, TH	reciation Expense	Current Year	Adjusted	The state of the s	I	Depreciation	Depreciation
Account No.	Description	Beginning Year Original Cost	Additions	Retirements	Original Cost	Fully Depreciated/Non- depreciable Plant	Depreciable Plant	Percentages	Expense
301	Organization	\$0	\$0	\$0	\$0	\$0	\$0	0.00%	\$(
302	Franchises	0	0	0	0	0	0	0.00%	(
303	Land and Land Rights	5,000	0	0	5,000	5,000	0	0.00%	(
304	Structures and Improvements	4,097	0	0	4,097	0	4,097	3.33%	130
305	Collecting & Improving Reservoirs	0	0	0	0	0	0	0.00%	
306	Lake, River, Canal Intakes	0	0	0	0	0	0	0.00%	
307	Wells and Springs	0	0	0	0	0	0	0.00%	
308	Infiltration Galleries	0	0	0	0	0	0	0.00%	(
309	Supply Mains	0	0	0	0	0	0	0.00%	
310	Power Generation Equipment	0	0	0	0	0	0	0.00%	
311	Pumping Equipment	2,096	0	0	2,096	0	2,096	12.50%	26
320	Water Treatment Equipment	0	0	0	0	0	0	0.00%	
320.1	Water Treatment Plants	0	0	0	0	0	0	0.00%	
320.2	Solution Chemical Feeders	0	0	0	0	0	0	0.00%	
320.3	Point-of-Use Treatment Devices	0	0	0	0	0	0	0.00%	
330	Distribution Reservoirs and Standpipes	0	0	0	0	0	0	0.00%	
330.1	Storage Tanks	0	0	0	0	0	0	0.00%	
330.2	Pressure Tanks	12,914	0	0	12,914	0	12,914	5.00%	64
331	Transmission and Distribution Mains	68,678	0	0	68,678	0	68,678	2.00%	1,37
333	Services	0	0	0	0	0	0	0.00%	
334	Meters and Meter Installations	3,796	93	0	3,889	0	3,889	8.33%	32
335	Hydrants	0	0	0	0	0	0	0.00%	
336	Backflow Prevention Devices	0	0	0	0	0	0	0.00%	
339	Other Plant and Misc. Equipment	0	0	0	0	0	0	0.00%	
340	Office Furniture and Equipment	640	0	0	640	0	640	6.67%	4
340.1	Computer & Software	1,007	0	0	1,007	0	1,007	20.00%	20
341	Transportation Equipment	0	0	0	0	0	0	0.00%	
342	Stores Equipment	0	0	0	0	0	0	0.00%	
343	Tools, Shop and Garage Equipment	0	0	0	0	0	0	0.00%	
344	Laboratory Equipment	0	0	0	0	0	0	0.00%	
345	Power Operated Equipment	0	0	0	0	0	0	0.00%	
346	Communication Equipment	0	0	0	0	0	0	0.00%	
347	Miscellaneous Equipment	1,110	0	0	1,110	0	1,110	10.00%	11
348	Other Tangible Plant	0	0	0	0	0	0	0.00%	
5,0	Subtotal	\$99,338	\$93	\$0	\$99,431	\$5,000	\$94,431	-	\$3,09

Contribution(s) in Aid of Construction (Gross)	\$0
Less: Non Amortizable Contribution(s)	0
Fully Amortized Contribution(s)	0
Amortizable Contribution(s)	\$0
Times: Proposed Amortization Rate	3.28%
Amortization of CIAC	\$0

Less: Amortization of CIAC	\$0
DEPRECIATION EXPENSE	\$3,093

Heart Cab Co., Inc. DBA Sulger Water Company #2 Annual Report Balance Sheet Assets 12/31/19

	Balance Sheet Assets		
	Assets	Balance at Beginning of Year (2019)	Balance at End of Year (2019)
Account No.	Current and Accrued Assets		
131	Cash	\$0	\$1,279
134	Working Funds	0	0
135	Temporary Cash Investments	0	0
141	Customer Accounts Receivable	1,746	0
146	Notes Receivable from Associated Companies	0	0
151	Plant Material and Supplies	0	0
162	Prepayments	0	
174	Miscellaneous Current and Accrued Assets	1,348	0
	Total Current and Accrued Assets	\$3,094	\$1,279
Account No.	Fixed Assets		
101	Utility Plant in Service*	\$99,338	\$99,431
103	Property Held for Future Use	0	0
105	Construction Work in Progress	0	0
108	Accumulated Depreciation (enter as negative)*	(46,092)	(45,892)
121	Non-Utility Property	0	0
122	Accumulated Depreciation - Non Utility	0	0
	Total Fixed Assets	\$53,246	\$53,539
	Total Assets	\$56,340	\$54,818

*Note these items feed automatically from AR3 UPIS Page 4

Heart Cab Co., Inc. DBA Sulger Water Company #2 Annual Report Balance Sheet Liabilities and Owners Equity

	Balance Sheet Liabilities and Ow		
	Liabilities	Balance at Beginning of Year (2019)	Balance at End of Year (2019)
Account No.	Current Liabilities		
231	Accounts Payable	\$0	\$0
232	Notes Payable (Current Portion)	0	0
234	Notes Payable to Associated Companies	0	0
235	Customer Deposits	0	0
236	Accrued Taxes	0	0
237	Accrued Interest	0	0
242	Miscellaneous Current and Accrued Liabilities		
	Total Current Liabilities	\$0	\$0
	Long Term Debt		
224	Long Term Debt (Notes and Bonds)	\$0	\$0
	Deferred Credits		
251	Unamortized Premium on Debt	\$0	\$0
252	Advances in Aid of Construction	0	1,480
255	Accumulated Deferred Investment Tax Credits	0	0
271	Contributions in Aid of Construction	0	0
272	Less: Amortization of Contributions	0	0
281	Accumulated Deferred Income Tax	0	0
	Total Deferred Credits	\$0	\$1,480
	Total Liabilites	\$0	\$1,480
	Capital Accounts		
201	Common Stock Issued	\$0	\$0
211	Other Paid-In Capital	0	0
215	Retained Earnings	0	0
218	Proprietary Capital (Sole Props and Partnerships)	56,340	53,338
	Total Capital	\$56,340	\$53,338
	Total Liabilities and Capital	\$56,340	\$54,818

Note: Total liabilities and Capital must match total assets for the beginning and end of the year!

	,, most companies	Income Statement	
Account No.	Calendar Year	Current Year	Last Year
		01/01/2019 -	01/01/2018 - 12/31/2018
	Operating Revenue		
461	Metered Water Revenue	\$13,797	\$13,062
460	Unmetered Water Revenue	0	(
462	Fire Protection Revenue	0	(
469	Guaranteed Revenues (Surcharges)	0	(
471	Miscellaneous Service Revenues	0	(
474	Other Water Revenue	0	(
	Total Revenues	\$13,797	\$13,062
4	Operating Expenses		
601	Salaries and Wages	\$0	\$1,189
604	Employee Pensions and Benefits	0	
610	Purchased Water	0	(
615	Purchased Power	2,220	2,147
618	Chemicals	0	
620	Materials and Supplies	11	17
620.1	Repairs and Maintenance	413	48
620.2	Office Supplies and Expense	1,141	750
630	Contractual Services	0	
631	Contractual Services - Engineering	0	
632	Contractual Services - Accounting	0	
633	Contractual Services - Legal	0	
634	Contractual Services - Management Fees	1,800	1,750
635	Contractual Services - Water Testing	450	89:
636	Contractual Services - Other	0	
640	Rents	0	
641	Rental of Building/Real Property	0	
642	Rental of Equipment	0	
650	Transportation Expenses	2,698	1,632
657	Insurance - General Liability	0	
657.1	Insurance - Health and Life	0	
665	Regulatory Commission Expense - Rate	0	
670	Bad Debt Expense	0	
675	Miscellaneous Expense	4,689	4,28
403	Depreciation Expense (From Schedule AR4)	3,093	3,22
408	Taxes Other Than Income	78	
408.11	Property Taxes	826	26
409	Income Taxes	50	5
427.1	Customer Security Deposit Interest	0	
427.1		\$17,469	\$16,84
	Total Operating Expenses	\$17,402	\$10,04
	On water I was to deal (I age)	(\$3,672)	(\$3,78
	Operating Income / (Loss)	(\$3,072)	(ψ5,70
	Other Income / (Evnesse)		
410	Other Income / (Expense)	\$0	\$
419	Interest and Dividend Income	0	4
421	Non-Utility Income	0	
426	Miscellaneous Non-Utility (Expense)	0	
427	Interest (Expense)	\$0	9
	Total Other Income / (Expense)	30	- 3
	Net Income / (Loss)	(\$3,672)	(\$3,78

Heart Cab Co., Inc. DBA Sulger Water Company #2 Annual Report Full time equivalent employees 12/31/19

Full time equivalent employees

	Direct Company	Allocated	Outside service	Total
President	0.0	0.0	0.0	0.0
Vice-president	0.0	0.0	0.0	0.0
Manager	0.0	0.0	0.0	0.0
Engineering Staff	0.0	0.0	0.0	0.0
System Operator(s)	0.0	0.0	0.0	0.0
Meter reader	0.0	0.0	0.0	0.0
Customer Service	0.0	0.0	0.0	0.0
Accounting	0.0	0.0	0.0	0.0
Business Office	0.0	0.0	0.0	0.0
Rates Department	0.0	0.0	0.0	0.0
Administrative Staff	0.0	0.0	0.0	0.0
Other	0.0	0.0	0.0	0.0
Total	0.0	0.0	0.0	0.0

Heart Cab Co., Inc. DBA Sulger Water Company #2 Annual Report Supplemental Financial Data (Long-Term Debt) 12/31/19

	Supplemental	Financial Data (Long-	-Term Debt)	
	Loan #1	Loan #2	Loan #3	Loan #4
Date Issued	1/0/1900	1/0/1900	1/0/1900	1/0/1900
Source of Loan	0	0	0	0
ACC Decision No.	0	0	0	0
Reason for Loan	0	0	0	0
Dollar Amt. Issued	\$0	\$0	\$0	\$0
Amount Outstanding	\$0	\$0	\$0	\$0
Date of Maturity	1/0/1900	1/0/1900	1/0/1900	1/0/1900
Interest Rate	0.00%	0.00%	0.00%	0.00%
Current Year Interest	\$0	\$0	\$0	\$0
Current Year Principal	\$0	\$0	\$0	\$0

Meter Deposit Balance at Test Year End:	\$0
Meter Deposits Refunded During the Test Year	: \$600

List all bonds, notes, loans, and other types of indebtedness in which the proceeds were used in the provision of public utility service. Indebtedness incurred for personal uses by the owner of the utility should <u>not</u> be listed. Input 0 or none if there is nothing to report for that cell.

Heart Cab Co., Inc. DBA Sulger Water Company #2 Annual Report Well and Water Usage 12/31/19

T		THE RESERVE THE PARTY OF THE PA		Well and Wat	er Usage						
Name of the System:		SULGER WATER	COMPANY 2							-	
ADEQ Public Water Syst	em Number:		AZ0402120								
ADWR PCC Number:			91-000076.0000							177	
Well registry 55# (55-			Casing Depth	Casing Diameter	Pump Motor	Year	The state of the s	Water level	Meter Size	How	
XXXXXX):	Pump Horsepower	Pump Yield (gpm)	(feet)	(inches)	Type **	Drilled	2010	2019	(inches)	measured:	Active
55-809118	5	35	300	6	submersable	1979	0	0		Metered	Yes
55-809117	5	35	300	6	submersable	1979	0	0		Metered	Yes
0	0	0	0	0	0	0	0	0		N/A	N/A
0	0	0	0	0	0	0	0	0		N/A	N/A
0	0	0	0	0	0	0	0	0		N/A	N/A
0	0	0	0	0	0	0	0	0		N/A	N/A
C	0	0	0	0	0	0	0	0		N/A	N/A
0	0	0	0	0	0	0	0	0		N/A	N/A
0	0	0	0	0	0	0	0	0		N/A	N/A
0	0	0	0	0	0	0	0	0		N/A	N/A
C	0	0	0	0	0	0	0	0		N/A	N/A
C	0	0	0	0	0	0	0	0		N/A	N/A
C	0	0	0	0	0	0	0	0		N/A	N/A
C	0	0	0	0	0	0	0	0		N/A	N/A
C	0	0	0	0	0	0	0	0		N/A	N/A
C	0	0	0	0	0	0	0	0	0	N/A	N/A

Name of system water delivered to:	NA		
ADWR PCC Number:		0	
Source of water delivered to another system	NA		

Name of system water received from:	NA		
ADWR PCC Number:		0	
Source of water received	NA		
Well registry 55# (55-XXXXXXX):	00-000000		

				Water received			
			Water delivered	(purchased) from	Estimated	Purchased	Purchased
	Water withdrawn	Water sold	(sold) to other	other systems	authorized use	Power	Power
Month	(gallons)1	(gallons)2	systems (gallons)3	(gallons)4	(gallons)5	Expense ⁶	(kWh) ⁷
January	91,200.00	74,220.00	0.00	0.00	0.00	\$171	310
February	80,900.00	69,430.00	0.00	0.00	0.00	176	289
March	143,000.00	139,350.00	0.00	0.00	0.00	190	456
April	154,600.00	152,310.00	0.00	0.00	0.00	213	570
May	190,700.00	187,830.00	0.00	0.00	0.00	202	571
June	192,600.00	189,910.00	0.00	0.00	0.00	213	663
July	200,600.00	200,550.00	0.00	0.00	0.00	196	517
August	153,800.00	150,570.00	0.00	0.00	0.00	175	346
September	198,100.00	193,580.00	0.00	0.00	0.00	174	338
October	187,000.00	183,810.00	0,00	0.00	0.00	174	351
November	122,500.00	119,730.00	0.00	0.00	0.00	169	300
December	165,800.00	166,610.00	0.00	0.00	0.00	188	400
Totals	1,880,800.00	1,827,900.00	0.00	0.00	0.00	\$2,241	5,111

If applicable, in the space below please provide a description for all un-metered water use along with amounts:	
None	

1 Water withdrawn - Total gallons of water withdrawn from pumped sources.
2 Water sold - Total gallons from customer meters, and other sales such as construction water.
3 Water delivered (sold) to other systems - Total gallons of water delivered to other systems.
4 Water received (purchased) from other systems - Total gallons of water purchased/received from other systems.
5 Estimated authorized use - Total estimated gallons from authorized metered or unmetered use. Authorized uses such as flushing (mains, services and hydrants) draining/cleaning tanks, process, construction, fire fighting, etc. Non-authorized use (real losses) are service line breaks and leaks, water main breaks, meter inaccuracies and theft.
6 Enter the total purchased power costs for the power meters associated with this system.
7 Enter the total purchased kWh used by the power meters associated with this system.

Heart Čab Co., Inc. DBA Sulger Water Company #2 Annual Report Water Utility Plant Description 12/31/19

	Water Utility Plant Description	
Name of the System:	Sulger Water Company #2	
ADEQ Public Water System Number:	AZ0402120	
ADWR PCC Number:	91-000076.0000	

MAINS				
Sizes (inches)	Material	Length (feet)		
2.00	PVC 40	1,87		
3.00	PVC 40	65		
4.00	PVC 40	7,44		
NA	NA			

SERVIC	E LINES	
		Year
Material	Percent of system	installed
PVC	100%	1997
. NA	0%	0
NA	0%	0
NA	0%	0
NA	0%	0

	CUSTOM	ER METERS	
		Percent over	Percent over
Size (inches)	Quantity	1,00,000 gallons	10 years old
5/8 X 3/4	26	60%	75%
1	1	100%	100%
NA	0	0%	0%
NA	0	0%	0%
NA	0	0%	0%
NA	0	0%	0%
NA	0	0%	0%
NA	0	0%	0%
NA	0	0%	0%
NA	0	0%	0%
NA	0	0%	0%
NA	0	0%	0%
NA	0	0%	0%
NA	0	0%	0%
NA	0	0%	0%
NA	0	0%	0%
NA	0	0%	0%

BOOSTER PUMPS				
Horsepower	GPM	Quantity		
0	0	0		
0	0	0		
0	0	0		
0	0	C		

	STORAGE TANKS		
			Year
Capacity (gallons)	Material	Quantity	installed
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0

FIRE HY	DRANTS
Туре	Quantity
Standard *	0
Other	0

P	PRESSURE/BL	ADDER TANK	S
Capacity (gallons)	Material	Quantity	Year installed
5,000	Metal	1	?
100	Maetal	3	2007
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0

, Heart Čab Co., Inc. DBA Sulger Water Company #2 Annual Report Water Utility Plant Description (Continued) 12/31/19

Water Utility Plant Description (Continued)			
For the following three items, list the utility owned assets in each category for each system.			
TREATMENT EQUIPMENT:	none		
STRUCTURES:	none		
OTHER:	none		

Provide a calculation used to determine the value of one water equivalent residential connection (ERC).

Use one of the following methods:

- If actual flow data are available from the preceding 12 months, divide the total annual single family residence (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365
- (b) If no historical flow data are available, use:
 ERC = (Total SFR gallons sold (Omit 000) / 365 days / 350 gallons per day)

ERC	n/a		
Method used:	(a)		

Heart Cab Co., Inc. DBA Sulger Water Company #2
Annual Report
Customer and Other Information
12/31/19

Customer and Other Information				
Name of the System: Sulger Water Company #2				
ADEQ Public Water System Number:		AZ0402120		
ADWR PCC Number:		91-000076.0000		

	Number of Customers							
				Other Non-				
Single-Family	Multi-Family	Commercial	Turf/Irrigation	Residential				
23	0	2	0	0				
23	0	2	0	0				
23	0	2	0	0				
23	0	2	0	0				
23	0	2	0	0				
23	0	2	0	0				
23	0	2	0	0				
23	0	2	0	0				
23	0	2	0	0				
23	0	2	0	0				
23	0	2	0	0				
23	0	2	0	0				
	23 23 23 23 23 23 23 23 23 23 23 23	Single-Family Multi-Family 23 0 23 0 23 0 23 0 23 0 23 0 23 0 23 0 23 0 23 0 23 0 23 0 23 0 23 0 23 0 23 0 23 0	Single-Family Multi-Family Commercial 23 0 2 23 0 2 23 0 2 23 0 2 23 0 2 23 0 2 23 0 2 23 0 2 23 0 2 23 0 2 23 0 2 23 0 2 23 0 2 23 0 2 23 0 2	Single-Family Multi-Family Commercial Turf/Irrigation 23 0 2 0 23 0 2 0 23 0 2 0 23 0 2 0 23 0 2 0 23 0 2 0 23 0 2 0 23 0 2 0 23 0 2 0 23 0 2 0 23 0 2 0 23 0 2 0 23 0 2 0 23 0 2 0 23 0 2 0				

If the system has fire hydrants, what is the fire flow requirements?	A GPM for 0 hrs.
Does the system have chlorination treatment?	D
Does the Company have an ADWR Gallons Per Capita Per Day (GCPCPD) requirement? If yes, provide the GPCPD amount:	No
Is the Water Utility located in an ADWR Active Management Area (AMA)? If yes, which AMA?	No NA
What is the present system connection capacity (in ERCs *) using existing lines?	NA
What is the future system connection capacity (in ERCs *) upon service area buildout?	NA
Describe any plans and estimated completion dates for any enlargements or improvements or	f this system.
none from Sulger Water Company	

 $[\]ensuremath{^*}$ an ERC is based on the calculation on the bottom of AR9 page 12.

Heart Cab Co., Inc. DBA Sulger Water Company #2 Annual Report Utility Shutoffs / Disconnects 12/31/19

Utility Shutoffs / Disconnects					
Name of the System: Sulger Water Company #2					
ADEQ Public Water Sys	AZ0402120				
ADWR PCC Number:		91-000076.0000			

		Termination with	
Month	Termination without	Notice R14-2-	
100 state 2	Notice R14-2-410.B	410.C	Other
January	0	0	0
February	0	0	0
March	0	0	0
April	0	0	0
May	0	0	0
June	0	0	0
July	0	0	0
August	0	0	0
September	0	0	0
October	0	0	0
November	0	0	0
December	0	0	0
Total	0	0	0

Other (description):	N/A

Instructions: Fill out the Grey Cells with the relevent information. Input 0 or none if there is nothing recorded in that account or there is no applicable information to report.

Heart Cab Co., Inc. DBA Sulger Water Company #2 Annual Report Property Taxes 12/31/19

Property Taxes	
Amount of actual property taxes paid during Calendar Year 2019 was	\$826
If no property taxes paid, explain why.	
paid	
s s	

Instructions: Fill out the Grey Cells with the relevant information. Input 0 or none if there is nothing recorded in that account or there is no applicable information to report.

Heart Cab Co., Inc. DBA Sulger Water Company #2 Annual Report Verification and Sworn Statement (Taxes) 12/31/19

			Verification	on and Sworn Stateme	nt (Taxes)		
Verification:	County of (co	ounty name): r or official) title		I, the undersigned Cochise Thomas Sulger Pre	esident of	2020 MAR	16 A 10:38
		AT THIS ANNU ION COMMISS		PROPERTY TAX AN	D SALES TAX F	REPORT TO THE	EARIZONA
	FOR THE Y	EAR ENDING:		12/31/19			
	UTILITY; TI CORRECT S REPORT IN	HAT I HAVE CA STATEMENT OI	AREFULLY E F BUSINESS A EACH AND E	XAMINED THE SAM AND AFFAIRS OF SA	E, AND DECLA ID UTILITY FOI	RE THE SAME T R THE PERIOD (ND RECORDS OF SAID TO BE A COMPLETE AND COVERED BY THIS EST OF MY KNOWLEDGE,
orn Statement:	I HEREBY A	ATTEST THAT A	ALL PROPER	TY TAXES FOR SAID) COMPANY AR	RE CURRENT AN	ND PAID IN FULL.
	I HEREBY A	ATTEST THAT A	ALL SALES T	AXES FOR SAID COL	hamas signatu	JURRENT AND PA June of owner/offici 520-808-7300 telephone no.	
				D AND SWORN TO B THE COUNTY		OTARY PUBLIC	(county name) March 2020
			MY COMMIS	SSION EXPIRES	Mu: -	04/26/ (date)	(month) and (year)
	\				11110	(signature of no	otary public)



CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity: 38 of the individual who signed the document to which this certificate is attached.

and not the truthfulness, accuracy, or va	alidity of that document.
State of California	}
County of LOS ANGRICS	}
On $3 - 11 - 2020$ before me, N	Marya Guassi Upt Marguilla, Notary, (Here insert name and title of the officer)
name(s)(is/are subscribed to the within i be/she/they executed the same in his/he	actory evidence to be the person(s) whose nstrument and acknowledged to me that er/their authorized capacity(ies), and that by ent the person(s), or the entity upon behalf of
I certify under PENALTY OF PERJURY the foregoing paragraph is true and corr	under the laws of the State of California thatect.
WITNESS my hand and official seal. Notary Public Signature (No	MARIA GUADALUPE MARAVILLA D COMM. #2150550 NOTARY PUBLIC CALIFORNIA m Los Angoles County My Comm. Exp. APR. 26, 2020
ADDITIONAL OPTIONAL INFORMATION OF THE ATTACHED DOCUMENT Verification TAxes (Title or description of attached document)	INSTRUCTIONS FOR COMPLETING THIS This form complies with current California statutes regarding not if needed, should be completed and attached to the document. Ack, from other states may be completed for documents being sent to the as the wording does not require the California notary to violate Calaw. State and County information must be the State and County whe signer(s) personally appeared before the notary public for acknown Date of notarization must be the date that the signer(s) personally
(Title or description of attached document continued) Number of Pages Document Date	 Date of notarization must be the date that the signer(s) personant must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears commission followed by a comma and then your title (notary pu Print the name(s) of document signer(s) who personally appendarization.
CAPACITY CLAIMED BY THE SIGNER Individual (s) Corporate Officer (Title) Partner(s)	Indicate the correct singular or plural forms by crossing off in he/she/they, is /are) or circling the correct forms. Failure to corrinformation may lead to rejection of document recording. The notary seal impression must be clear and photographic Impression must not cover text or lines. If seal impression smi sufficient area permits, otherwise complete a different acknowle. Signature of the notary public must match the signature on file the county clerk.

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Attorney-in-Fact

Trustee(s)

Other

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regarding notary wording and, ocument. Acknowledgments ing sent to that state so long to violate California notary

- d County where the document lic for acknowledgment.
- r(s) personally appeared which completed.
- it appears within his or her tle (notary public).
- sonally appear at the time of
- ossing off incorrect forms (i.e. failure to correctly indicate this rding.
- photographically reproducible. pression smudges, re-seal if a ent acknowledgment form.
- ature on file with the office of the county clerk.
 - Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - Indicate title or type of attached document, number of pages and date.
 - Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document with a staple.

Heart Cab Co., Inc. DBA Sulger Water Company #2 Annual Report Verification and Sworn Statement 12/31/19

		W.T. Add									
¥7* 6° 4*		Verification	on and Sworn Statem	ent							
Verification:	State of Ariz (state of County of (county name): Name (owner or official) title: Company name:	name)	I, the undersigned of Cochise County Thomas Sulger President, Inc. DBA Sulger Wa	lent of	2020 MA	116 A 10: 37					
	DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION. FOR THE YEAR ENDING: 12/31/19										
	HAS BEEN PREPARED UND UTILITY; THAT I HAVE CAS AND CORRECT STATEMEN THIS REPORT IN RESPECT KNOWLEDGE, INFORMATI	REFULLY EXA IT OF BUSINES TO EACH AND	MINED THE SAME, SS AND AFFAIRS OF DEVERY MATTER A	AND DECLARE SAID UTILITY	E THE SAME FOR THE PE	TO BE A COMPLETE RIOD COVERED BY					
Sworn Statement:	IN ACCORDANCE WITH TH STATUTES, IT IS HEREIN R FROM ARIZONA INTRASTA	EPORTED THA	AT THE GROSS OPE	RATING REVEN	NUE OF SAID	UTILITY DERIVED					
			Arizona Intrastate G	\$14,639 ox above includes		(\$)					
				Thon si	gnature of owr	Acer/official					
N N	RIA GUADALUPE MARAVILLA DOMM. #2150550 DOTARY PUBLIC-CALIFORNIA MILES Angolos County Comm. Exp. APR. 26, 2020 D	IN AND FOR	D AND SWORN TO E THE COUNTY		AY OF	e no.					
		MY COMMIS	SSION EXPIRES	M:	(date)						

(signature of notary public)

CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness. accuracy, or validity of that document.

and not the training of the straining of	
State of California	1
	. de
County of LOS Angeles	}
On $3 - 11 - 2020$ before me, Ω	Maria Guapalupe Maravilla, Notary, (Here insert name and title of the officer)
personally appeared	Amulo sulaer
who proved to me on the basis of satisfa name(s)(is/are subscribed to the within i he/she/they executed the same in his/he	actory evidence to be the person(s) whose nstrument and acknowledged to me that er/their authorized capacity(ies), and that by ent the person(s), or the entity upon behalf of
I certify under PENALTY OF PERJURY the foregoing paragraph is true and corr	under the laws of the State of California that rect.
WITNESS my hand and official seal.	MARIA GUADALUPE MARAVILLA D COMM. #2150550 NOTARY PUBLIC CALIFORNIA III LOS Angolos County My Comm. Exp. APR. 26, 2020 tary Public Seal)
Notary Public Signature (No	tary Public Seal)
*	INSTRUCTIONS FOR COMPLETING THIS
ADDITIONAL OPTIONAL INFORMATI	ON This form complies with current California statutes regarding note
DESCRIPTION OF THE ATTACHED DOCUMENT	if needed, should be completed and attached to the document. Ackn from other states may be completed for documents being sent to the
Verification Statment	as the wording does not require the California notary to violate Ca law.
(Title or description of attached document)	 State and County information must be the State and County who signer(s) personally appeared before the notary public for acknow Date of notarization must be the date that the signer(s) personally
(Title or description of attached document continued)	must also be the same date the acknowledgment is completed.
Number of Pages Document Date	• Print the name(s) of document signer(s) who personally appear
CARACITY CLAIMED BY THE SIGNER	notarization. • Indicate the correct singular or plural forms by crossing off inc
□ Individual (s)	he/she/they, is /are) or circling the correct forms. Failure to corre
☐ Corporate Officer	information may lead to rejection of document recording. The notary seal impression must be clear and photographical
, ,	Impression must not cover text or lines. If seal impression smu
(Title)	sufficient area permits, otherwise complete a different acknowled • Signature of the notary public must match the signature on file was a signature on file was a signature.
☐ Partner(s)	the county clerk.
☐ Attorney-in-Fact	Additional information is not required but could hel

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Trustee(s)

Other

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- Securely attach this document to the signed document with a staple.

Heart Cab Co., Inc. DBA Sulger Water Company #2 Annual Report Verification and Sworn Statement (Residential Revenue) 12/31/19

	Verification and	Sworn Statement (Residential Revenue)
Verification:	ate of Arizona (state name)	I, the undersigned of the
7	ounty of (county name): ume (owner or official) title:	Cochise County Thomas Sulger President t Cab Co., Inc. DBA Sulger Water Company #2
T.	D SAY THAT THIS ANNUAL U DRPORATION COMMISSION.	TILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA
	OR THE YEAR ENDING: 1	2/31/19
F S U	ECORDS OF SAID UTILITY; THAME TO BE A COMPLETE AND FILITY FOR THE PERIOD COV	MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND HAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE DOCORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID TERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER IE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.
I	EVISED STATUTES, IT IS HERI FILITY DERIVED FROM ARIZO	EQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA EIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID ONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RING THE CALENDAR YEAR WAS:
	Arizona Intrastate G	(The amount in the box above includes \$842 in sales taxes billed or collected) Substitute of owner/official
		AND FOR THE COUNTY County name)
	THI	commission expires $04/26/2020$
Los		(signature of notary public)

CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, secure or validity of that document

and not the truthfulness, accuracy, or va	illulty of that document.
State of California	}
County of LOS ANGCIES	}
On 3117020 before me, $\sqrt{}$	MARIA GUADRIUPE MARAVIIIS, NOTAIN (Here insert name and title of the officer) AND SUIDER,
personally appeared +homas	Arnoid Sulger,
who proved to me on the basis of satisfa name(s) is/are subscribed to the within in the/she/they executed the same in his/he	nstrument and acknowledged to me that nstrument and acknowledged to me that not their authorized capacity(ies), and that by ent the person(s), or the entity upon behalf of
I certify under PENALTY OF PERJURY the foregoing paragraph is true and corr	under the laws of the State of California that ect.
WITNESS my hand and official seal.	MARIA GUADALUPE MARAVILLA COMM. #2150550 COMM. #215050 COMM. #
Notary Public Signature (Not	tary Public Seal)
*	THE COLUMN TWO IS NOT THE THE THE
ADDITIONAL OPTIONAL INFORMATION	INSTRUCTIONS FOR COMPLETING THIS This form complies with current California statutes regarding note.
DESCRIPTION OF THE ATTACHED DOCUMENT	if needed, should be completed and attached to the document. Ackn from other states may be completed for documents being sent to the
taxes	as the wording does not require the California notary to violate Ca law.
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(Title or description of attached document continued)	must also be the same date the acknowledgment is completed.
Number of Pages Document Date_3 -11 -2020	 The notary public must print his or her name as it appears vectormission followed by a comma and then your title (notary public Print the name(s) of document signer(s) who personally appear notarization.
CAPACITY CLAIMED BY THE SIGNER	 Indicate the correct singular or plural forms by crossing off inc he/she/they, is /are) or circling the correct forms. Failure to correct
☐ Individual (s)	information may lead to rejection of document recording.
☐ Corporate Officer	The notary seal impression must be clear and photographica Impression must not cover text or lines. If seal impression smu
(Title)	sufficient area permits, otherwise complete a different acknowled • Signature of the notary public must match the signature on file
☐ Partner(s)☐ Attorney-in-Fact	the county clerk. Additional information is not required but could hel

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Trustee(s)

Other

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Heart Cab Co., Inc. DBA Sulger Water Company #2 Annual Report Full Gross-up Method for Income Tax Statement of Certification

	100000000000000000000000000000000000000	Full Gross-up M	lethod for Income Tax Statement of Certification
Verification:			
	State of	Arizo	na I, the undersigned of the
		(state na	ame)
		•	
	County of (co	unty name):	Cochise County
		or official) title:	Thomas Sulger President of
	Company nan	ne:	Heart Cab Co., Inc. DBA Sulger Water Company #2
	FOR THE Y	EAR ENDING:	12/31/19
Sworn Statement:	7.1666	ANOD WITH THE	TO DECLUDE MENTS OF DECISION NO. 77004 DECAUSE THE UTILITY
	IN ACCORD	ANCE WITH TH	E REQUIREMENTS OF DECISION NO. 77084, BECAUSE THE UTILITY
	REQUIRES 7	THE GROSS UP	OF ADVANCES AND CONTRIBUTIONS, I HEREBY STATE THAT THE
			ED NOR IS EXPECTED TO INCUR A NET INCREASE IN CURRENT INCOME
	TAX EXPEN	ISE OR A DECRI	EASE IN DEFERRED TAX ASSET FOR A CARRY FORWARD ACCORDING TO
	GAAP IN AN	N AMOUNT EQU	AL TO OR GREATER THAN THE AMOUNT OF THE REQUIRED GROSS UP
	PAID BY DE	EVELOPERS IN T	THE PERIOD COVERED BY THIS ANNUAL REPORT.
			71
			Momas Sull
			signature of owner/official
			520-808-7300
	general		telephone no.
	m		terepriorie no.
6.	۵		
	- V		SUBSCRIBED AND SWORN TO BEFORE ME A NOTARY PUBLIC
	1		IN AND FOR THE COUNTY OS ANGELES
	Ω.		(county name)
	-		
			THIS 11 th DAY OF March 2020
			(month) and (year)
	7070		a
			MY COMMISSION EXPIRES 04/26/2020
			(date)
			Λ/I . $V\Lambda \sim$
			/Vl ///
	~~~~		(signature of notary public)
SSIAI OF	MARIA GUADALUPE		(organismo of notally paorie)
W. S. S. S.	COMM. #21	ALIFORNIA XX	
4 Property	Los Angelos ( My Comm. Exp. API	County 2 R. 26, 2020 D	Page 20
1 108			

# **CALIFORNIA ALL- PURPOSE** CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached,

and not the truthfulness, accuracy, or v	validity of that document.
State of California	
County of LOS ANGTIES	_ }
On	Maria Guaval upe Maravilla, Dotary,
name(s)(is/are subscribed to the within he/she/they executed the same in(his/h	instrument and acknowledged to me that her/their authorized capacity(ies), and that by hent the person(s), or the entity upon behalf of
I certify under PENALTY OF PERJURY the foregoing paragraph is true and co	Y under the laws of the State of California that rrect.
WITNESS my hand and official seal.	MARIA GUADALUPE MARAVILLA COMM. #2150550 MOTARY PUBLIC-CALIFORNIA MILOS Angolos County  My Comm. Exp. APR. 26, 2020
Notary Public Signature (N	Notary Public Seal)
ADDITIONAL OPTIONAL INCODMAT	INSTRUCTIONS FOR COMPLETING THIS FORM
DESCRIPTION OF THE ATTACHED DOCUMENT    NOME + Ax (Title or description of attached document)    (Title or description of attached document continued)   Number of Pages   Document Date 3-11-70-7	<ul> <li>if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law.</li> <li>State and County information must be the State and County where the documen signer(s) personally appeared before the notary public for acknowledgment.</li> <li>Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.</li> <li>The notary public must print his or her name as it appears within his or he commission followed by a comma and then your title (notary public).</li> <li>Print the name(s) of document signer(s) who personally appear at the time or</li> </ul>
CAPACITY CLAIMED BY THE SIGNER  Individual (s) Corporate Officer  (Title) Partner(s) Attorney-in-Fact	<ul> <li>Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate thi information may lead to rejection of document recording.</li> <li>The notary seal impression must be clear and photographically reproducible Impression must not cover text or lines. If seal impression smudges, re-seal if sufficient area permits, otherwise complete a different acknowledgment form.</li> <li>Signature of the notary public must match the signature on file with the office of the county clerk.</li> <li>Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.</li> </ul>

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Trustee(s)

Other

corporate officer, indicate the title (i.e. CEO, CFO, Secretary). • Securely attach this document to the signed document with a staple.

Indicate title or type of attached document, number of pages and date.

Indicate the capacity claimed by the signer. If the claimed capacity is a

# Sulger Water Company 2019 Depreciation Schedule for Fixed Assets

	Water Water	Water Meter	Water Meter	Used Mower	Used Generator	Hp laptop and printer	Water Meter	Translines 600	Weed Eater	Office Furniture	Office Chair	Water Meters	Water Meter	Water Meter	Water meter	Water Meter	Water Meters	Water Meters	Water Meter 2 inch Well Meter	Translines 650'	Translines 350'	Valves	Translines 1 3/4 Miles	Translines 1750'	Pump # 6 Tanner	Shed	Water Pressure Tanks	Fencina	Fence	Chain Like Fence	Land	Asset Description		!	12/31/2019
	334	334	334	347	347	340.1	334	331	347	340	340	334	334	334	334	334	334	334	334	331	331	331	331	331	311	304	330.2	304	304	304	303	acct#	Class		9
	12/1/2018	12/5/2019	4/5/2018	8/1/2017			6/23/2015	6/24/2015	8/24/2014	8/1/2012	4/26/2017	7/29/2017	9/25/2012	5/29/2014	3/18/2013	8/1/2008	5/18/2007	5/11/2007	3/15/2017	6/8/1997	8/1/2008	12/30/2006	6/5/1997	6/8/1997	5/2/2012	4/17/2007	7/17/2007	4/14/2007	3/29/2005	6/30/2006	8/1/1979	ired	Date C	IO	
99430.03	81	92.97	90.15	350	336.63	1006.78	218.04	634.34	422.97	536.69	102.64	156.6	76.97	83	205.99	127	991	811	955	3171	1750	746	52864	9513	2096.26	1200	12914	1221	991	685	5000			Original	
\$ 46,092.20	81 \$ 13	G	90.15 \$ 15	350 \$ 104.76	336.63 \$ 100.80	1006.78 \$ 804.96	€9	49	<del>()</del>	<del>()</del>	102.64 \$ 20.52	156.6 \$ 38.88	76.97 \$ 50.88	83 \$ 41.04	205.99 \$ 120.12	127 \$ 117.64	↔	69	\$	3171 \$ 716.72	↔	S	69	9513 \$ 3,365.12	\$	S	12914 \$ 6,563.40	1221 \$ 523.84	991 \$ 639.06	685 \$ 511.06	0	Basis Depreciation	Depreciable Prior		
.20 56433.3	, ,-			N						.08 286.37		.88 130.68	.88 32.45	.04 48.8	1				7	2		88 303	16 27690.04	12 6338.08			40 6996.2	84 737.84		06 196.74	0 5000	2018	Basis end of	Adjusted	
	1 00											8 12							12	-		3 50			8								Service Depreciation		
6	8.33%	8.33%	8.33% \$	10.00% \$	10.00% \$						6.67% \$	8.33% \$				8.33% \$	8.33% \$		8.33% \$	2.00% \$	2.00% \$	2.00% \$	2.00% \$		12.50% \$		5.00% \$								
230.	0.56	0.65	0.63	2.91	2.80	16.77	1.51	1.05	3.52	2.98	0.57	1.08	0.53	0.57	1.43	0.88	6.88	5.63	6.63	5.28	2.91	1.24	88.10	15.85	21.83	3.33	53.80	3.39	2.75	1.90	) )	Expense	. 15		
ć, ()	3 005.7		4.5	34.9	\$ 33.60	2		\$ 12.60	42		6.84	12		σ	_,			67.50	\$ 79.58	\$ 63.3	\$ 34.92	\$ 14.88	1057.2	\$ 190.20	\$ 261.96	\$ 39.96	\$ 645.60	\$ 40.68				Expense	Annual		
4 0,00	A G	\$ 65.17 \$ 65.17	9 6	) <del>(</del>	9 65	· 64	· +:	· (7	· <del>(</del> 2	6 \$ 250.61	69		€9	4	· 4	<b>.</b>	¥		·	V:	€.	€3	\$ 26	69	69	\$ 77	<i>€</i> :	₩.	₩.	· <del>(</del>		Basis	Adjusted	2019	)