

ARIZONA CORPORATION COMMISSION RECEIVED
UTILITIES DIVISION

FEB 18 2014

AZ CORP COMM
Director - Utilities

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY

SW-04265A

WOODRUFF UTILITY COMPANY, INC.
17207 N. PERIMETER DRIVE, SUITE 200
SCOTTSDALE, AZ 85255

ANNUAL REPORT

Sewer

FOR YEAR ENDING

12	31	2013
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FOR COMMISSION USE

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2-19-14

COMPANY INFORMATION

Company Name (Business Name) WOODROFF UTILITY COMPANY, INC.

Mailing Address 17207 N. PERIMETER DRIVE SUITE 200
SCOTTSDALE, AZ 85255
(City) (State) (Zip)

480.563.5247 480.585.7803
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address _____

Local Office Mailing Address _____
SAME
(Street) (City) (State) (Zip)

Local Office Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address _____

MANAGEMENT INFORMATION

Regulatory Contact:

Management Contact: JON P. COULTER DIRECTOR OF DEVELOPMENT & CONSTRUCTION
(Name) (Title)

17207 N. PERIMETER DR SUITE 200 SCOTTSDALE, AZ 85255
(Street) (City) (State) (Zip)

480.563.5247 480.585.7803 602.228.3219
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address jpc@desert-troon.com

On Site Manager: _____
N/A
(Name) (Street) (City) (State) (Zip)

Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address _____

Statutory Agent: AVG SERVICE CORPORATION
(Name)

8777 N. GAINY DRIVE #191 SCOTTSDALE, AZ 85258
(Street) (City) (State) (Zip)

480.922.3933 480.922.3969
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Attorney: DAVID E. SHEIN ESQ. CHESTER & SHEIN PC
(Name)

8777 N. GAINY DRIVE #191 SCOTTSDALE, AZ 85258
(Street) (City) (State) (Zip)

480.922.3933 480.922.3969
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address dshein@cslawyers.com

OWNERSHIP INFORMATION

Check the following box that applies to your company:

<input type="checkbox"/> Sole Proprietor (S)	<input checked="" type="checkbox"/> C Corporation (C) (Other than Association/Co-op)
<input type="checkbox"/> Partnership (P)	<input type="checkbox"/> Subchapter S Corporation (Z)
<input type="checkbox"/> Bankruptcy (B)	<input type="checkbox"/> Association/Co-op (A)
<input type="checkbox"/> Receivership (R)	<input type="checkbox"/> Limited Liability Company
<input type="checkbox"/> Other (Describe) _____	

COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

<input type="checkbox"/> APACHE	<input type="checkbox"/> COCHISE	<input type="checkbox"/> COCONINO
<input type="checkbox"/> GILA	<input type="checkbox"/> GRAHAM	<input type="checkbox"/> GREENLEE
<input type="checkbox"/> LA PAZ	<input type="checkbox"/> MARICOPA	<input type="checkbox"/> MOHAVE
<input type="checkbox"/> NAVAJO	<input type="checkbox"/> PIMA	<input checked="" type="checkbox"/> PINAL
<input type="checkbox"/> SANTA CRUZ	<input type="checkbox"/> YAVAPAI	<input type="checkbox"/> YUMA
<input type="checkbox"/> STATEWIDE		

COMPANY NAME WOODRUFF UTILITY COMPANY, INC.

UTILITY PLANT IN SERVICE

Acct. No.	DESCRIPTION	Original Cost (OC)	Accumulated Depreciation (AD)	O.C.L.D. (OC less AD)
351	Organization	\$ 4,288	∅	\$ 4,288
352	Franchises	\$ 62,867	∅	\$ 62,867
353	Land and Land Rights			
354	Structures and Improvements	\$ 9,600	∅	\$ 9,600
355	Power Generation Equipment			
360	Collection Sewers – Force			
361	Collection Sewers – Gravity			
362	Special Collecting Structures			
363	Services to Customers			
364	Flow Measuring Devices			
365	Flow Measuring Installations			
370	Receiving Wells			
380	Treatment and Disposal Equip.			
381	Plant Sewers			
382	Outfall Sewer Lines			
389	Other Plant and Misc. Equipment			
390	Office Furniture and Equipment			
390.1	Computers & Software			
391	Transportation Equipment			
393	Tools, Shop and Garage Equip.			
394	Laboratory Equipment			
395	Power Operated Equipment			
398	Other Tangible Plant			
	TOTALS	\$ 76,755	∅	

This amount goes on the Balance Sheet Acct. No. 108 

COMPANY NAME WOODRUFF UTILITY COMPANY, INC.

CALCULATION OF DEPRECIATION EXPENSE

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
351	Organization	\$ 4,288	∅	∅
352	Franchises	\$ 62,867	∅	∅
353	Land and Land Rights			
354	Structures and Improvements	\$ 9,600	∅	∅
355	Power Generation Equipment			
360	Collection Sewers – Force			
361	Collection Sewers – Gravity			
362	Special Collecting Structures			
363	Services to Customers			
364	Flow Measuring Devices			
365	Flow Measuring Installations			
370	Receiving Wells			
380	Treatment and Disposal Equip.			
381	Plant Sewers			
382	Outfall Sewer Lines			
389	Other Plant and Misc. Equipment			
390	Office Furniture and Equipment			
390.1	Computers & Software			
391	Transportation Equipment			
393	Tools, Shop and Garage Equip.			
394	Laboratory Equipment			
395	Power Operated Equipment			
398	Other Tangible Plant			
	TOTALS	\$ 76,755		∅

This amount goes on the Comparative Statement of Income and Expense Acct. 403 

COMPANY NAME

WOODRUFF UTILITY COMPANY, INC.

BALANCE SHEET

Acct No.	ASSETS	BALANCE AT BEGINNING OF TEST YEAR	BALANCE AT END OF YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$ 84,457	\$ 84,672
132	Special Deposits		
135	Temporary Cash Investments		
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS	\$ 84,457	\$ 84,672
	FIXED ASSETS		
101	Utility Plant in Service	\$ 76,755	\$ 76,755
103	Property Held for Future Use	0	0
105	Construction Work in Progress	0	0
108	Accumulated Depreciation – Utility Plant	0	0
121	Non-Utility Property	\$ 395,868	\$ 395,868
122	Accumulated Depreciation – Non Utility	0	0
	TOTAL FIXED ASSETS	\$ 472,623	\$ 472,623
	TOTAL ASSETS	\$ 557,080	\$ 557,295

NOTE: Total Assets on this page should equal Total Liabilities and Capital on the following page.

COMPANY NAME

WOODRUFF UTILITY COMPANY, INC.

BALANCE SHEET (CONTINUED)

Acct No.	LIABILITIES	BALANCE AT BEGINNING OF TEST YEAR	BALANCE AT END OF YEAR
	CURRENT LIABILITIES		
231	Accounts Payable	\$ 0	\$ 0
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	TOTAL CURRENT LIABILITIES	\$ 0	\$ 0
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$ 0	\$ 0
	DEFERRED CREDITS		
252	Advances in Aid of Construction	\$	\$
253	Other Deferred Credits		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax	0	0
	TOTAL DEFERRED CREDITS	\$ 0	\$ 0
	TOTAL LIABILITIES	\$	\$
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$ 0	\$ 0
211	Other Paid in Capital	\$ 557,080	\$ 557,295
215	Retained Earnings		
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$ 557,080	\$ 557,295
	TOTAL LIABILITIES AND CAPITAL	\$ 557,080	\$ 557,295

COMPANY NAME

WOODRUFF UTILITY COMPANY, INC.

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
521	Flat Rate Revenues	\$ 0	\$ 0
522	Measured Revenues		
536	Other Wastewater Revenues		
	TOTAL REVENUES	\$ 0	\$ 0
	OPERATING EXPENSES		
701	Salaries and Wages	\$ 0	\$ 0
710	Purchased Wastewater Treatment		
711	Sludge Removal Expense		
715	Purchased Power		
716	Fuel for Power Production		
718	Chemicals		
720	Materials and Supplies		
731	Contractual Services – Professional		
735	Contractual Services – Testing		
736	Contractual Services – Other		
740	Rents		
750	Transportation Expense		
755	Insurance Expense		
765	Regulatory Commission Expense	0	0
775	Miscellaneous Expense	\$ 50	0
403	Depreciation Expense	0	0
408	Taxes Other Than Income		
408.11	Property Taxes		
409	Income Taxes	0	\$ 50
	TOTAL OPERATING EXPENSES	\$ 50	\$ 50
	OTHER INCOME/EXPENSE		
419	Interest and Dividend Income	\$ 329	\$ 165
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses	0	0
427	Interest Expense	0	0
	TOTAL OTHER INCOME/EXPENSE	\$ 329	\$ 165
	NET INCOME/(LOSS)	\$ 279	\$ 115

COMPANY NAME

WOODRUFF UTILITY COMPANY, INC.

SUPPLEMENTAL FINANCIAL DATA

Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued	Ø	Ø	Ø	Ø
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate	%	%	%	%
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

COMPANY NAME	WOODRUFF UTILITY COMPANY, INC.
Name of System:	Wastewater Inventory Number (if applicable):

WASTEWATER COMPANY PLANT DESCRIPTION
TREATMENT FACILITY

TYPE OF TREATMENT (Extended Aeration, Step Aeration, Oxidation Ditch, Aerobic Lagoon, Anaerobic Lagoon, Trickling Filter, Septic Tank, Wetland, Etc.)	PHASE I SBR DESIGNED, NOT CONSTRUCTED
DESIGN CAPACITY OF PLANT (Gallons Per Day)	PH1 = 0.25 MGD; PH2 = 1.5 MGD; PH3 = 3 MGD

LIFT STATION FACILITIES

Location	Quantity of Pumps	Horsepower Per Pump	Capacity Per Pump (GPM)	Wet Well Capacity (gals)
	∅			

FORCE MAINS

Size	Material	Length (Feet)
4-inch		∅
6-inch		∅

MANHOLES

Type	Quantity
Standard	∅
Drop	∅

CLEANOUTS

Quantity
∅
∅

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	Woodruff Utility Company, Inc.
Name of System:	Wastewater Inventory Number (if applicable):

WASTEWATER COMPANY PLANT DESCRIPTION (CONTINUED)

COLLECTION MAINS

SERVICES

Size (in inches)	Material	Length (in feet)
4		
6		
8		
10		
12		
15		
18		
21		
24		
30		

Size (in inches)	Material	Quantity
4		
6		
8		
12		
15		

FOR THE FOLLOWING FIVE ITEMS, LIST THE UTILITY OWNED ASSETS IN EACH CATEGORY PER WASTEWATER SYSTEM

SOLIDS PROCESSING AND HANDLING FACILITIES	— NONE —
DISINFECTION EQUIPMENT (Chlorinator, Ultra-Violet, Etc.)	— NONE
FILTRATION EQUIPMENT (Rapid Sand, Slow Sand, Activated Carbon, Etc.)	— NONE —
STRUCTURES (Buildings, Fences, Etc.)	— NONE —
OTHER (Laboratory Equipment, Tools, Vehicles, Standby Power Generators, Etc.)	— NONE —

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	WOODRUFF UTILITY COMPANY, INC.
Name of System:	Wastewater Inventory Number (if applicable):

WASTEWATER FLOWS

MONTH/YEAR (Most Recent 12 Months)	NUMBER OF SERVICES	TOTAL MONTHLY SEWAGE FLOW	SEWAGE FLOW ON PEAK DAY
January	∅	∅	∅
February			
March			
April			
May			
June			
July			
August			
September			
October			
November			
December			

**PROVIDE THE FOLLOWING INFORMATION AS APPLICABLE
PER WASTEWATER SYSTEM**

Method of Effluent Disposal (leach field, surface water discharge, reuse, injection wells, groundwater recharge, evaporation ponds, etc.)	- NONE -
Groundwater Permit Number	- NONE -
ADEQ Aquifer Protection Permit Number	P- 105597
ADEQ Reuse Permit Number	- NONE -
EPA NPDES Permit Number	- NONE -

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME:	WOODRUFF UTILITY COMPANY, INC.
Name of System:	Wastewater Inventory Number (if applicable):

UTILITY SHUTOFFS / DISCONNECTS

MONTH	Termination without Notice R14-2- 609.B	Termination with Notice R14-2- 609.C	OTHER
JANUARY	∅	∅	∅
FEBRUARY			
MARCH			
APRIL			
MAY			
JUNE			
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			
TOTALS →	∅	∅	∅

OTHER (description):

COMPANY NAME WOODRUFF UTILITY COMPANY, INC. YEAR ENDING 12/31/2013

INCOME TAXES

For this reporting period, provide the following:

Federal Taxable Income Reported _____
Estimated or Actual Federal Tax Liability _____

State Taxable Income Reported _____
Estimated or Actual State Tax Liability _____

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances _____
Amount of Gross-Up Tax Collected _____
Total Grossed-Up Contributions/Advances _____

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

SIGNATURE DATE

PRINTED NAME TITLE

— EXTENSION FILED —

COMPANY NAME WOODRUFF UTILITY COMPANY, INC. YEAR ENDING 12/31/2013

PROPERTY TAXES

Amount of actual property taxes paid during Calendar Year 2013 was: \$ Ø

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. WOODRUFF UTILITY COMPANY OWNS NO LAND.

VERIFICATION
AND
SWORN STATEMENT
Taxes

RECEIVED

FEB 18 2014

AZ CORP COMM
Director - Utilities

VERIFICATION

STATE OF ARIZONA
I, THE UNDERSIGNED
OF THE

COUNTY OF (COUNTY NAME)	<u>MARICOPA</u>
NAME (OWNER OR OFFICIAL) TITLE	<u>SON P. COULTER AUTHORIZED AGENT</u>
COMPANY NAME	<u>WOODRUFF UTILITY COMPANY, INC.</u>

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2013

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

Jon P. Coulter
SIGNATURE OF OWNER OR OFFICIAL
480.563.5247
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 16TH DAY OF

COUNTY NAME	<u>MARICOPA</u>	
MONTH	<u>JANUARY</u>	<u>2014</u>

(SEAL)



LISA M. LOPEZ
Notary Public - Arizona
Maricopa County
Expires on 04/06/2016

MY COMMISSION EXPIRES APRIL 6, 2016

[Signature]
SIGNATURE OF NOTARY PUBLIC

**VERIFICATION
AND
SWORN STATEMENT
RESIDENTIAL REVENUE
INTRASTATE REVENUES ONLY**

RECEIVED

FEB 18 2014

AZ CORP COMM
Director - Utilities

VERIFICATION
STATE OF ARIZONA

COUNTY OF (COUNTY NAME) <u>MARICOPA</u>	
NAME (OWNER OR OFFICIAL) <u>JOHN P. COULTER</u>	TITLE <u>AUTHORIZED AGENT</u>
COMPANY NAME <u>WOODRUFF UTILITY COMPANY, INC.</u>	

I, THE UNDERSIGNED
OF THE

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2013

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2013 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES
\$ <u>0</u>

(THE AMOUNT IN BOX AT LEFT INCLUDES \$ 0 IN SALES TAXES BILLED, OR COLLECTED)

*RESIDENTIAL REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED.

John P. Coulter
SIGNATURE OF OWNER OR OFFICIAL
480.563.5247
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 16th DAY OF

(SEAL)

MY COMMISSION EXPIRES

NOTARY PUBLIC NAME <u>LISA M. LOPEZ</u>	
COUNTY NAME <u>MARICOPA</u>	
MONTH <u>JANUARY</u>	20 <u>14</u>

[Signature]
SIGNATURE OF NOTARY PUBLIC