# **San Diego Local Agency Formation Commission**

Regional Service Planning | Subdivision of the State of California

## City Questionnaire Municipal Service Review and Sphere of Influence 2018-2022 Study Cycle

#### **Background**

San Diego Local Agency Formation Commission (LAFCO) is directed under State law to review and update spheres of influence for all cities and special districts every five years and in line with delineating the area the Commission independently believes represents the agencies' appropriate current and future boundaries and service areas. All jurisdictional changes and outside service extensions, importantly, must be consistent with the spheres of the affected local agencies with limited exceptions. State law also specifies LAFCO must inform the sphere updates by preparing appropriately scoped evaluations – titled municipal service reviews – to determine the availability and adequacy of local governmental services within a designated area relative to current and future community needs. All municipal service reviews culminate with LAFCO preparing written statements addressing specific service factors highlighted by infrastructure needs or deficiencies, growth and population trends, and financial standing.

## Questionnaire | Purpose, Format, and Deadline

San Diego LAFCO has developed this questionnaire addressed to all 18 cities in San Diego County to help inform the development of a formal study schedule calendaring municipal service reviews and sphere updates for the 2018-2022 cycle. The information generated from the questionnaire will serve to update the baseline data previously collected by LAFCO in earlier cycles as well as help determine the appropriate scope of analysis to be performed in the upcoming cycle; the latter of which will be distinguished between abbreviated and comprehensive evaluations. Markedly, and as referenced, the questionnaire serves as a baseline inquiry and not intended to be exhaustive. Follow up with each city will be performed and based on the level of analysis ultimately deemed appropriate by LAFCO in meeting its study directive.

Accompanying the questionnaire are two maps for each recipient. The first map shows areas qualifying as disadvantaged unincorporated communities (DUCs) within or contiguous to the current sphere and based on the most recent census information released in late 2017. The second map shows any existing unincorporated islands within the current sphere as identified by staff that are at least 50.1% or more surrounded. Also note the questionnaire is divided into five distinct sections that are service-specific, and as such can be forwarded within each city to the appropriate reviewer (i.e., planning, public works, fire, etc.).

Please Return to SD LAFCO by February 12, 2018 San Diego LAFCO respectfully requests each city complete and return the questionnaire to LAFCO by the end of business on **Monday, February 12, 2018.** All related follow up correspondence on the questionnaire – including questions and submittals – should be directed to Keene Simonds by

telephone at (858) 614-7755 or by e-mail at keene.simonds@sdcounty.ca.gov.

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#### SECTION A

All Cities

- 1. Please provide electronic copies or web-links for the following materials:
  - a) Last three completed fiscal year audit reports
  - b) Current adopted fiscal year budget
  - c) Current adopted General Plan
  - d) Current adopted housing element

| 2. | Current population estimate used by the City and present build-out projection therein. |
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3. Please identify the source of the following municipal services – if any – provided within the City boundary divided between the following categories:

"Directly" refers to those services provided by the City using its own resources.

"By Contract Agency" refers to those provided by the City through an agreement with an outside entity. Examples includes contracts with other public agencies, joint-power authority arrangements, and franchise agreements.

"By Outside Agency" refers to those services provided within the City boundary but through an external public agency, and most commonly via special districts.

|  |          | By Contract   | By Outside   | Not      |
|--|----------|---------------|--------------|----------|
| Service Type                           | Directly | Agency        | Agency       | Provided |
|  |          | - Check Appli | icable Box - |          |
| Potable Water                          |          |               |              |          |
| Wastewater Collection                  |          |               |              |          |
| Wastewater Treatment and Disposal      |          |               |              |          |
| Recycled Water                         |          |               |              |          |
| Solid Waste Disposal (Garbage)         |          |               |              |          |
| Fire Protection                        |          |               |              |          |
| Emergency Medical (Ambulance)          |          |               |              |          |
| Police Protection                      |          |               |              |          |
| Parks and Recreation                   |          |               |              |          |
| Street Lighting and Landscaping        |          |               |              |          |
| Street Cleaning                        |          |               |              |          |
| Vector / Pest Control and Abatement    |          |               |              |          |
| Library                                |          |               |              |          |
| Roads (Acquire, Construct, & Maintain) |          |               |              |          |
| Public Airports (Provide & Maintain)   |          |               |              |          |
| Public Transportation                  |          |               |              |          |
| Flood Protection / Storm Drainage      |          |               |              |          |
| Power or Renewable Energy              |          |               |              |          |
| Animal Care & Control                  |          |               |              |          |
| Cemetery / Interment                   |          |               |              |          |
| Telecommunication / Broadband          |          |               |              |          |

| 4. | Please identify the date (month/year) the current City General Plan was adopted.   |
|----|--|
| 5. | Please identify the date (year) the City anticipates initiating a General Plan update.   |
| 6. | In step with referencing the attached map, briefly describe any potential sphere changes (expansions or reductions) the City believes may be warranted within the next five to ten years. A mark-up of the current sphere map showing the potential changes is encouraged. |
|    |  |
| 7. | If applicable, please indicate whether the City believes it is appropriate to retain, expand, or remove any special study areas assigned to the sphere by San Diego LAFCO.   |
|    |  |
| 8. | If applicable, briefly describe any germane City policies and/or procedures with respect to encouraging or discouraging the future annexation of any unincorporated islands or disadvantaged unincorporated communities within or contiguous to the current sphere.        |
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#### SECTION B

Only Applies to Cities Providing Wastewater Services

1. Please identify wastewater system <u>demands</u> with respect to the following categories.

| Category   | 2015 | 2016 | 2017 |
|--|------|------|------|
| <ul> <li>a) Number of Residential Connections</li> </ul> |      |      |      |
| b) Number of Non-Residential Connections                 |      |      |      |
| c) Average Day Flow (mg)                                 |      |      |      |
| d) Average Dry-Weather Day Flow (mg)                     |      |      |      |
| e) Average Wet-Weather Day Flow (mg)                     |      |      |      |
| f) Peak-Day Flow (mg)                                    |      |      |      |
| g) Peak-Hourly Flow (mg)                                 |      |      |      |

mg = million gallons

2. Please identify treatment system <u>capacities</u> with respect to the following categories. If the City maintains more than one treatment facility please identify capacity at each site.

| Category                              |  |
|---------------------------------------|--|
| a) Design Treatment Capacity (mgd)    |  |
| b) Permitted Treatment Capacity (mgd) |  |
| c) Total Storage Capacity (mg)        |  |

mgd = million gallons day

| 3. | Has the City committed wastewater treatment capacity to any planned or proposed development? If yes, please briefly describe any significant commitments.  |
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| 1. | Does the City maintain any wastewater service connections outside its jurisdictional boundary? It so, briefly identify the total number of outside service connections and their general location. |
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#### SECTION C

## Only Applies to Cities Providing <u>Potable Water</u> Services

1. Please identify potable water system <u>demands</u> with respect to the following categories.

| Cat | egory                                  | 2015 | 2016 | 2017 |
|-----|--|------|------|------|
| a)  | Number of Residential Connections      |      |      |      |
| b)  | Number of Non-Residential Connections  |      |      |      |
| c)  | Total Demand   Metered and Losses (af) |      |      |      |
| d)  | Peak-Day Demand (mg)                   |      |      |      |

af = acre feet mg = million gallons

2. Please identify potable water system <u>capacities</u> with respect to the following categories. If the City maintains more than one treatment facility please identify capacity at each site.

| Cat | egory                             |  |
|-----|-----------------------------------|--|
| a)  | Treatment Facility Capacity (mgd) |  |
| b)  | Citywide Storage Capacity (mgd)   |  |

mgd = million gallons day

| 3. | Has the City committed potable water supplies to any planned or proposed development? If yes please briefly describe any significant commitments.   |
|----|---|
|    |   |
|    |   |
| 4. | Does the City maintain any potable water service connections outside its jurisdictional boundary: If so, briefly identify the total number of outside service connections and their general location. |
|    |   |
|    |   |

#### SECTION D

#### Only Applies to Cities Providing Recycled Water Services

1. Please identify recycled water system <u>demands</u> with respect to the following categories:

| Category                                  | 2015 | 2016 | 2017 |
|---|------|------|------|
| a) Number of Connections                  |      |      |      |
| b) Total Demand   Metered and Losses (af) |      |      |      |
| c) Peak-Day Demand (mg)                   |      |      |      |

af = acre feet mg = million gallons

2. Please identify recycled water system <u>capacities</u> with respect to the following categories. If the City maintains more than one treatment facility please identify capacity at each site.

| Category                             |  |
|--------------------------------------|--|
| a) Treatment Facility Capacity (mgd) |  |
| b) Citywide Storage Capacity (mgd)   |  |

mgd = million gallons day

| 3. | Has the City committed recycled water supplies to any planned or proposed development? If yes, please briefly describe any significant commitments.  |
|----|--|
|    |  |
|    |  |
| 4. | Does the City maintain any recycled water service connections outside its jurisdictional boundary? If so, briefly identify the number of outside service connections and their general location. |
|    |  |

#### SECTION E

## Only Applies to Cities Providing Fire Protection Services

1. Please provide <u>FY2016-2017</u> information about auto-aid agreements between the City and other local agencies as outlined below. This includes identifying whether an applicable auto-aid agreement commits the City to serving any disadvantaged unincorporated community (DUC) as shown in the attached map.

|                        | Auto-Aid<br>With Agency | Total #<br>Auto-Aids | Total #<br>Auto-Aids | Do Auto-Aids<br>Cover DUCs? |    |     |
|------------------------|-------------------------|----------------------|----------------------|-----------------------------|----|-----|
| Contracting Agency     | (Check Box)             | Received in FY17     | Given in FY17        | Yes                         | No | N/A |
| Alpine FPD             | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| Bonita Sunnyside FPD   | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| Borrego Springs FPD    | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| CSA No. 115            | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| CSA No. 135            | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| Deer Springs FPD       | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| Julian-Cuyamaca FPD    | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| Lakeside FPD           | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| Lower Sweetwater FPD   | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| Mootami MWD            | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| North County FPD       | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| Pauma MWD              | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| Pine Valley FPD        | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| Ramona MWD             | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| Rancho Santa Fe FPD    | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| Rincon Del Diablo MWD  | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| San Marcos FPD         | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| San Miguel FPD         | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| Valley Center FPD      | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| Vista FPD              | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| Yuima MWD              | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| City of Carlsbad       | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| City of Chula Vista    | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| City of Coronado       | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| City of Del Mar        | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| City of El Cajon       | Y 🔲 N 🗀                 |                      |                      |                             |    |     |
| City of Escondido      | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| City of Imperial Beach | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| City of La Mesa        | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| City of Lemon Grove    | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| City of National City  | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| City of Oceanside      | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| City of Poway          | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| City of San Diego      | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| City of San Marcos     | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| City of Santee         | Y 🗆 N 🗆                 |                      |                      |                             |    |     |
| City of Solana Beach   | Y 🗆 N 🗆                 |                      |                      |                             |    |     |

|    | City of Vista                               |   | Y 🗆 N |                 |                 |             |           |         |
|----|---|---|-------|-----------------|-----------------|-------------|-----------|---------|
| 2. | Briefly summarize involving fire prote      | • | •     | _               |                 | isting auto | -aid agre | eements |
|    |   |   |       |                 |                 |             |           |         |
| 3. | Please identify any<br>of responses met 0   |   | -     | e time goals in | volving fire pr | otection. V | Vhat per  | centage |
|    |   |   |       |                 |                 |             |           |         |
| 4. | Briefly describe ar<br>service area that re |   | -     |                 | -               |             |           |         |
|    |   |   |       |                 |                 |             |           |         |
| -  |   |   |       |                 |                 |             |           |         |