



August 27, 2021

Suncadia Water & Environmental
P.O. Box 457
Cle Elum, WA 98922

To whom it may concern:

RE: Suncadia Phase 3 Division 17 (Suncadia Resort, Cle Elum, Washington)

Properties within the Suncadia Resort receive water services through a centralized water system owned and managed by the Suncadia Water Company, LLC (SWC). SWC will service each of the individual residential lots up to a maximum of 80 single-family residences within the above-referenced parcel. The water system currently has the capacity to serve this parcel, the water delivered is tested at regular intervals, and the system meets all the requirements of the State Department of Health for a public water system.

Sewer service to the above-referenced parcel is provided through a centralized sewer system owned and managed by Suncadia Environmental Company, LLC (SEC). The sewer system currently has the capacity to serve up to a maximum of 80 single-family residences within this plat.

If you should have any questions, feel free to contact me.

Sincerely,

A handwritten signature in cursive script that reads "Darian Osiadacz".

Darian Osiadacz
Utility Manager

WATER FACILITIES INVENTORY (WFI) FORM - Continued

1. SYSTEM ID NO. AA317 E	2. SYSTEM NAME SUNCADIA RESORT	3. COUNTY KITITITAS	4. GROUP A	5. TYPE Comm
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	ACTIVE SERVICE CONNECTIONS	DOH USE ONLY! CALCULATED ACTIVE	DOH USE ONLY! APPROVED CONNECTIONS
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25. SINGLE FAMILY RESIDENCES (How many of the following do you have?)

A. Full Time Single Family Residences (Occupied 180 days or more per year)	227		
B. Part Time Single Family Residences (Occupied less than 180 days per year)	732		

26. MULTI-FAMILY RESIDENTIAL BUILDINGS (How many of the following do you have?)

A. Apartment Buildings, condos, duplexes, barracks, dorms	0		
B. Full Time Residential Units in the Apartments, Condos, Duplexes, Dorms that are occupied more than 180 days/year	0		
C. Part Time Residential Units in the Apartments, Condos, Duplexes, Dorms that are occupied less than 180 days/year	0		

27. NON-RESIDENTIAL CONNECTIONS (How many of the following do you have?)

A. Recreational Services and/or Transient Accommodations (Campsites, RV sites, hotel/motel/overnight units)	3		
B. Institutional, Commercial/Business, School, Day Care, Industrial Services, etc.	30		

28. TOTAL SERVICE CONNECTIONS	992		
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29. FULL-TIME RESIDENTIAL POPULATION

A. How many residents are served by this system 180 or more days per year?	726		
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30. PART-TIME RESIDENTIAL POPULATION

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
A. How many part-time residents are present each month?	2342	2342	2342	2342	2342	2342	2342	2342	2342	2342	2342	2342
B. How many days per month are they present?	4	5	6	5	7	7	8	9	7	7	4	4

31. TEMPORARY & TRANSIENT USERS

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
A. How many total visitors, attendees, travelers, campers, patients or customers have access to the water system each month?	2800	2900	2000	3400	3900	3800	6100	5300	4600	4100	3500	5300
B. How many days per month is water accessible to the public?	31	28	31	30	31	30	31	31	30	31	30	31

32. REGULAR NON-RESIDENTIAL USERS

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
A. If you have schools, daycares, or businesses connected to your water system, how many students daycare children and/or employees are present each month?	409	409	409	522	547	583	593	593	561	532	484	505
B. How many days per month are they present?	31	28	31	30	31	30	31	31	30	31	30	31

33. ROUTINE COLIFORM SCHEDULE

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
	2	2	2	2	2	2	2	2	2	2	2	2

34. NITRATE SCHEDULE

	QUARTERLY	ANNUALLY	ONCE EVERY 3 YEARS
(One Sample per source by time period)			

35. Reason for Submitting WFI:

- Update - Change
 Update - No Change
 Inactive
 Name Change
 New System
 Other

36. I certify that the information stated on this WFI form is correct to the best of my knowledge.

SIGNATURE:	DATE: 7/20/2021
PRINT NAME: Darian Osiadacz	TITLE: Utility Manager