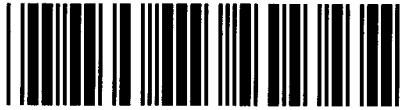


Control Number: 42954



Item Number: 1

Addendum StartPage: 0

House Bill (HB) 1600 and Senate Bill (SB) 567 83<sup>rd</sup>  
Legislature, Regular Session, transferred the functions  
relating to the economic regulation of water and sewer  
utilities from the TCEQ to the PUC effective  
September 1, 2014.

42454

RECEIVED WILLATT & FLICKINGER  
2014 SEP 25 PM 1:53 ATTORNEYS AT LAW

2001 NORTH LAMAR • AUSTIN, TEXAS 78705 • (512) 476-6604 • FAX (512) 469-9148  
PUBLIC UTILITY COMMISSION  
FILING CLERK

July 15, 2013

**VIA COURIER**

Texas Commission on Environmental Quality  
Utilities and Districts Section, MC-153  
12100 Park 35 Circle  
Building F, 3<sup>rd</sup> Floor  
Austin, Texas 78753

RECEIVED  
TOEQ  
WATER SUPPLY DIV.  
2013 JUL 16 PM 8 09

**Re: Amendment of City of Italy Water and Wastewater CCNs**

Dear Utilities and Districts Section:

Please find enclosed the following:

1. Original Application to Amend Water and Wastewater CCNs of the City of Italy, with three copies.
2. Four letter-sized copies of proposed Water CCN Boundary.
3. Four letter-sized copies of proposed Wastewater CCN Boundary.
4. Four copies of water system map.
5. Four copies of wastewater system map.
6. Four copies of CD of proposed water CCN map.
7. Four copies of CD of proposed wastewater CCN map.

Please handle in the usual way.

Very truly yours,

*Mike Willatt*

Mike Willatt

MW/hv  
Enclosures

WILLATT & FLICKINGER

July 15, 2013

Page 2

---

cc: Mr. Dean Carrell  
City of Italy City Hall  
P.O. Box 840  
Italy, Texas 76651  
(w/partial enclosure)

ORIGINAL



APPLICATION TO OBTAIN OR AMEND A  
WATER/SEWER CERTIFICATE OF  
CONVENIENCE AND NECESSITY (CCN)

\*CN# 600460026

\*RN# 101393528

\*If known (See Instructions)

PURPOSE OF THIS APPLICATION

☐ OBTAIN ☐ New Water CCN ☐ New Sewer CCN

☒ AMEND ☒ Water CCN# (s) 10885

☒ AMEND ☒ Sewer CCN#(s) 20350

1. APPLICANT INFORMATION

Utility Name City of Italy

Utility Address (City/ST/ZIP/Code) P.O. Box 840, Italy, Texas 76651

Utility Phone Number and Fax (972) 483-6212 (972) 483-2800

Contact Person: Please provide information about the person to be contacted regarding this application. Indicate if this person is the owner, operator, engineer, attorney, accountant manager, or other title related to the applicant.

Name Mike Willatt

Title Attorney

Street Address (City/ST/ZIP/Code) Willatt & Flickinger, 2001 North Lamar, Austin, TX 78705

Telephone and Fax (512) 476-6604 (512) 469-9148

E-Mail Address mwillatt@wfaustin.com

County (ies) in which service is proposed: Please list below:

Ellis County

2013 JUL 16 PM 8 09

WATER SUPPLY DIV.

TOED

RECEIVED

Check the appropriate box and provide information regarding the legal status of the applicant:

- ☐ Investor owned utility    ☐ Individual    ☐ Partnership
- ☐ Home or Property Owners Association    ☐ For-profit corporation
- ☐ Non-profit, member-owned, member-controlled cooperative corporation  
(Water Code Chapter 67, Water Supply or Sewer Service Corporation)
- ☒ Municipality    ☐ District    ☐ Other Please Explain:

If the applicant is a For-Profit business or corporation, please include the following information:

- i. Provide a copy of the corporation's "Certification of Account Status" from the Texas State Comptroller of Public Accounts.
- ii. Provide the corporation's charter number as recorded with the Office of the Texas Secretary Of State \_\_\_\_\_
- iii. Provide a listing of all stockholders and their respective percentages of ownership.
- iv. Provide a copy of the company's organizational chart, if available.
- v. Provide a list of all directors and disclose the title of each individual.
- vi. Provide a list of all affiliated organizations (if any) and explain the relationship with the applicant.

If the applicant is a Water Code Chapter 67 water supply or sewer service corporation:

- i. Provide a copy of the Articles of Incorporation and By-Laws.
- ii. Provide the corporation's charter number as recorded with the Office of the Texas Secretary of State.
- iii. Identify all members including name, address, title, and telephone number.
- iv. Provide a copy of the corporation's Certificate of Account Status from the Texas Comptroller of Public Accounts.

## 2. LOCATION INFORMATION

- A. Are there people already living in the proposed area? ☒ Yes ☐ No  
If YES, are any currently receiving utility service?  
☒ Yes ☐ No If YES, from Whom:

City of Italy, Texas

Demonstrate the Need for Service by providing the following:

- B. Have you received any requests for service in the requested service area?  
☒ Yes ☐ No If YES, provide the following:
- Describe the service area and circumstances driving the need for service in the requested area. Indicate the name(s) and address(es) of landowner(s), prospective landowner(s), tenant(s), or resident(s) that have requested service; and/or
  - Describe the economic need(s) for service in the requested area (i.e. plat approvals, recent annexation(s) or annexation request(s), building permits, septic tank permits, hospitals, etc.); and/or
  - Discuss in detail the environmental need(s) for service in the requested area (i.e. failing septic tanks in the requested area, fueling wells, etc.); and/or
  - Provide copies of any written applications or requests for service in the requested area; and/or
  - Provide copies of any reports and/or market studies demonstrating existing or anticipated growth in the requested area. If no, please justify the need for service in the proposed area.
  - If none of these items exist or are available, please justify the need for service in the proposed area in writing.

**Note:** Failure to demonstrate a need for additional service in the proposed service area may result in the delay and /or possible denial of the application.

- C. Is any portion of the proposed service area inside an incorporated city or district? ☒ Yes ☐ No

If YES, within the corporate limits of: City of Italy

Provide a copy of any franchise, permit, or consent granted by the city or district. If not available please explain:

The City only has a water CCN for facilities plus 200 feet. The City needs an area certificate to better serve the residents and businesses that are beginning to settle within the City limits and the surrounding area.

The City of Italy has gone to extreme measures to ensure that not only resident and commercial properties have plenty of water storage and safe drinking water. they have planned to secure water for 3.5 times the amount of the population as well as commercial customers.

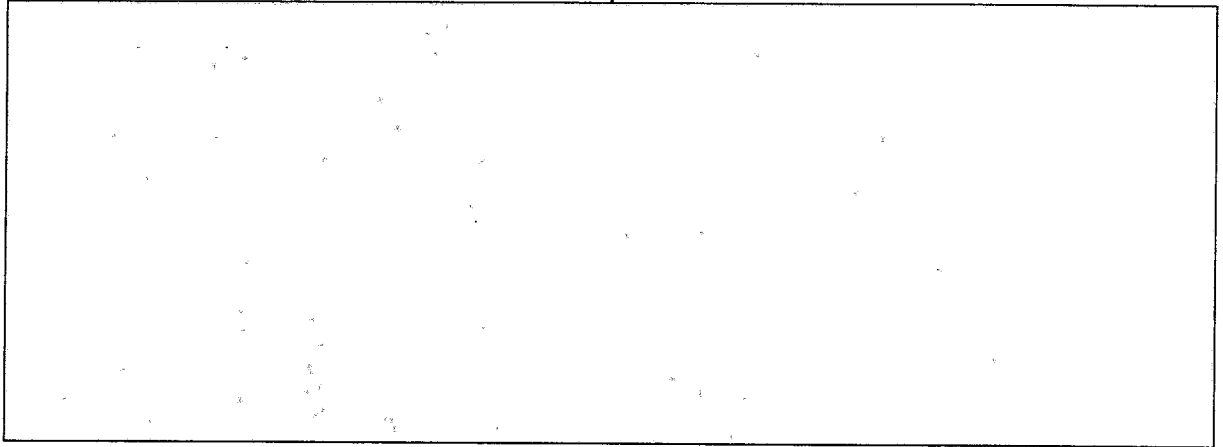
D. Is any portion of the proposed service area inside another utility's CCN area?

☐ Yes ☒ No

If YES, has the current CCN holder agreed to decertify the proposed area?

☐ Yes ☐ No

If NO, are you seeking dual or single certification of the area? Explain why decertification of the area is in the public interest.



### 3. MAP REQUIREMENTS:

**Attach the following hard copy maps with each copy of the application:**

- A. A general location map delineating the proposed service area with enough detail to accurately locate the proposed area within the county.
- B. A map showing only the proposed area by:
  - i. metes and bounds survey certified by a licensed state or register professional land surveyor; or
  - ii. projectable digital data with metadata (proposed areas should be in a single record and clearly labeled). Also, a data disk labeled with the applicant's name must be provided; or
  - iii. following verifiable natural and man-made landmarks; or
  - iv. a copy of recorded plat map with metes and bounds.
- C. A written description of the proposed service area.
- D. Provide separate and additional maps of the proposed area(s) to show the following:
  - i. all facilities, illustrating separately facilities for production, transmission, and distribution of the applicant's service(s); and
  - ii. any facilities, customers or area currently being served outside the applicant's certificated area(s).

**Note:** Failure to provide adequate mapping information may result in the delay or possible denial of your application. Digital data submitted in a format other than ESRI ArcGIS may result in the delay or inability to review applicant's mapping information.

**4. NEW SYSTEM INFORMATION OR UTILITIES REQUESTING A CCN FOR THE FIRST TIME**

- A. Please provide the following information:
- i. a list of public drinking water supply system(s) or sewer system(s) within a 2 mile radius of the proposed system;
  - ii. copies of written requests seeking to obtain service from each of the public drinking water systems or sewer systems listed in #4.A.i above or documentation that it is not economically feasible to obtain service from each entity;
  - iii. copies of written responses from each system or evidence that they did not reply; and
  - iv. for sewer utilities, documentation showing that you have obtained or applied for a wastewater discharge permit.
- B. Were your requests for service denied?
- i. If yes, please provide documentation of the denial of service and go to 4.C.
  - ii. If no, please provide a detailed analysis which justifies your reasons for not accepting service. A separate analysis must be prepared and submitted for each utility that granted your request for service.
- C. Please summarize how the proposed utility system will be constructed and describe each projected construction phase, if any:

The requested area is surrounded by the water CCN of South Ellis Water Supply Corporation. The City's municipal water and sewer system is being designed to provide service within the requested area. Property within the requested area is already served by the City, or can be served by the City pursuant to planned expansions of the City's water and sewer systems.

- D. Date of plat approval, if required: \_\_\_\_\_  
Approved by: \_\_\_\_\_
- E. Date Plans & Specifications submitted for approval: \_\_\_\_\_  
Log # \_\_\_\_\_ Attach copy of approval letter if available.
- F. Date construction is scheduled to commence: \_\_\_\_\_
- G. Date service is scheduled to commence: \_\_\_\_\_



## 5. EXISTING SYSTEM INFORMATION

A. Please provide the following information for each water and/or sewer system, attach

additional sheets if necessary.

i. Water system's TCEQ Public Water System identification number(s):

0	7	0	0	0	2	8														
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ii. Sewer system's TCEQ Discharge Permit number(s)

W	Q	0	0	1	4	1	-	9	5	0	W	Q					-			
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W	Q						-				W	Q					-			
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W	Q						-				W	Q					-			
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iii. Date of last inspection: \_\_\_\_\_

iv. Attach a copy of the most recent inspection report letter.

v. For each system deficiency listed in the inspection report letter; attach a brief explanation listing the actions taken or being taken by the utility to correct the listed deficiencies, including the proposed completion dates.

B. Provide the following information about the utility's certified operators

Name	Classes	License Number
Dean Carrell	C	WG0003885
Shedric Walker	D	W000213124(EX)
Jacob Hopkins	C	W00026174(EX)
Cameron Carrell	D	W00031426
Clint McCasland	D	W00032267

- Attach additional sheet(s) if necessary -

C. Using the current number of customers, is any facility component in systems named in #5A above operating at 85% or greater of minimum standard capacity?

☐ Yes ☒ No

Attach an explanation listing the actions to be taken to make system improvements including proposed completion dates (See 291.93(3)(A) of TCEQ Rules).

- D. In the table below, the number of existing and/or proposed metered and non-metered connections (by size). The proposed number should reflect the information presented in the business plan or financial documentation and reflect the number of service requests identified in Question 2.b in the application.

Water System			Sewer System		
Connection	Existing	Proposed	Connection	Existing	Proposed
5/8" or 3/4" meter	724	844	Residential	708	N/A
1" meter or larger	46	50	Commercial	70	N/A
Non-Metered			Industrial	0	N/A
Other:			Other:	0	N/A
Total Water	770	894	Total Sewer	814	814

- E. If this application is for a water CCN only, please explain how sewer service is or will be provided:

--

- F. If this application is for a sewer CCN only, please explain how water service is or will be provided:

--

- G Effect of Granting a Certificate Amendment.  
Explain in detail the effect of granting of a certificate or an amendment, including, but not limited to regionalization, compliance and economic effects on the following:
- i the applicant,
  - ii any retail public utility of the same kind already serving the proximate area; and
  - iii any landowner(s) in the requested area.

H. Do you currently purchase or plan to purchase water or sewer treatment capacity from another source?

- i ☒ No, (skip the rest of this question and go to #6)  
ii ☐ Yes, Water

Purchased on a ☐ Regular ☐ Seasonal ☐ Emergency basis?

Source	% of Total Treatment

iii Sewer treatment capacity,

iv ☐ Yes

Purchased on a ☐ Regular ☐ Seasonal ☐ Emergency basis?

Source	% of Total Treatment

vi Provide a signed and dated copy of the most current water or sewer treatment capacity purchase agreement or contract.

I. Ability to Provide Adequate Service.

Describe the ability of the applicant to provide adequate service, including meeting the standards of the commission, taking both of the following items into consideration:

- i. the current and projected density, and  
ii. the land use of the requested area.

J. wEffect on the Land.

Explain the effect on the land to be included in the certificated area.

The effect on the land to be included in the certificated area is that the land will be provided with water and sewer service, subject to municipal standards.

## 6. FINANCIAL INFORMATION

- A. For new systems and for applicants with existing CCNs who are constructing a new stand alone system:
- i. the applicant must provide an analysis of all necessary costs for constructing, operating, and maintaining the system, and the source of that capital (such as a financial statement for the developing entity) for which the CCN is requested for at least the first five years. In addition, if service has been offered by an existing water service provider as stated in #4.A., but the applicant has determined that the cost of service as finally offered renders the project not economically feasible, the applicant must provide a comparison analysis of all necessary costs for acquiring and continuing to receive service from the existing system for the same period.
  - ii. Attach projected profit and loss statements, cash flow worksheets, and balance sheets (projected five year financial plan worksheet is attached) for each of the first five years of operation. Income from rates should correlate to the projected growth in connections, shown on the projected profit and loss statement.
  - iii. Attach a proposed rate schedule or tariff. Describe the procedure for determining the rates and fees and indicate the date of last change, if applicable. Attach copies of any cost of service studies or rate analysis worksheets.
- B. For existing systems:
- i. Attach a profit and loss statement and current balance sheet for existing businesses (end of last fiscal year is acceptable). Describe sources and terms for borrowed capital such as loans, bonds, or notes (profit and loss and balance sheet worksheets are attached, if needed).
  - ii. Attach a proposed rate schedule or tariff.  
★NOTE: An existing system may be required to provide the information in 6.A.i. above during the technical review phase if necessary for staff to completely evaluate the application.
- C. Identify any funds you are required to accumulate and restrict by lenders or capital providers.
- D. In lieu of the information in #6.A. thru #6.C., you may provide information concerning loan approvals within the last three (3) years from lending institutions or agencies including the most recent financial audit of the applicant.

**Note:** Failure to provide adequate financial information may result in the delay or possible denial of your application.

## 7. NOTICE REQUIREMENTS

- A. All proposed notice forms must be completed and submitted with the application. However, do not mail or publish them until you receive written approval from the Commission to do so.
- B. The Commission cannot grant a CCN until proper notice of the application has been given. **Commission rules do not allow a waiver of these notice requirements for CCN applicants.**

- C. **It is the applicant's responsibility to ensure that proper notice is given to all entities that are required to receive notice.**
- D. Recommended notice forms for publication, neighboring cities and systems, landowners with 25 acres or more, and customers are included with this application to use in preparing your proposed notices. (These notice forms are also available in Spanish upon request.)
- E. After reviewing and, if necessary, modifying the proposed notice, the Commission will send the notice to the applicant after the application is accepted for filing along with instructions for publication and/or mailing. Please review the notice carefully and note any additional neighboring utilities which may be included in the acceptance letter.
- F. Notice For Publication:  
The applicant shall publish the notice in a newspaper having general circulation in the county or counties where a CCN is being requested, once each week for two consecutive weeks beginning with the week after the notice is received from the Commission. Proof of publication in the form of a publisher's affidavit shall be submitted to the Commission within 30 days of the last publication date. The affidavit shall state with specificity each county in which the newspaper is of general circulation.
- G. Notice To Neighboring Utilities:  
i. List all neighboring retail public utilities and cities providing the same utility service within the following vicinities of the applicant's proposed certificate area.  
ii. For applications for the issuance of a **NEW** CCN, the applicant must mail the notice with a copy of the proposed CCN map to all cities and neighboring retail public utilities providing the same utility service within **five (5) miles** of the requested service area.  
iii. For applications for the **AMENDMENT** of a CCN, the applicant must mail the notice with a copy of the proposed CCN map to all cities and neighboring retail public utilities providing the same utility service within **two (2) miles** of the requested service area.
- H. Notice to Customers  
Investor Owned Utilities (IOUs) that are currently providing service without a CCN must provide individual mailed notice to all current customers. The notice must contain the current rates, the date those rates were instituted and any other information required in the application. The notice must also list all zip codes affected by the application.
- I. The Commission may require the applicant to deliver notice to other affected persons or agencies.

**Do not publish or send copies of the proposed notices to anyone at the time you submit the application to the Commission. Wait until you receive written authorization to do so. This will occur after the Commission has reviewed the notices for completeness, and your application has been accepted for filing. Once the application is accepted for filing, you will receive written authorization to provide notice. Please check the notices for accuracy before providing them to the public. It is the applicant's burden to ensure that correct and accurate notice is provided.**

# OATH

STATE OF TEXAS  
COUNTY OF ELLIS

I, Dean Carrell, being duly sworn, file this application as Public Works Director, Employee of City of Italy (indicate relationship to Applicant, that is, owner, member of partnership, title as officer of corporation, or other authorized representative of Applicant); that, in such capacity, I am qualified and authorized to file and verify such application, am personally familiar with the maps and financial information filed with this application, and have complied with all the requirements contained in this application; and, that all such statements made and matters set forth therein are true and correct. I further state that the application is made in good faith and that this application does not duplicate any filing presently before the Texas Commission on Environmental Quality.

I further represent that the application form has not been changed, altered or amended from its original form available only from the Commission.

**I further represent that the Applicant will provide continuous and adequate service to all customers and qualified applicants for service within its certificated service area.**

  
AFFIANT  
(Utility's Authorized Representative)

If the Affiant to this form is any person other than the sole owner, partner, officer of the Applicant, or its attorney, a properly verified Power of Attorney must be enclosed.

SUBSCRIBED AND SWORN TO BEFORE ME, a Notary Public in and for the State of Texas,  
This day 3<sup>rd</sup> of July 20 13

SEAL



  
NOTARY PUBLIC IN AND FOR THE  
STATE OF TEXAS

Jeniffer Concienne  
PRINT OR TYPE NAME OF NOTARY

MY COMMISSION EXPIRES

9.21.2014

## Notice for Publication

NOTICE OF APPLICATION FOR CERTIFICATE OF CONVENIENCE AND NECESSITY (CCN) TO  
PROVIDE WATER/SEWER UTILITY SERVICE IN

ELLIS COUNTY(IES), TEXAS

Name of Applicant City of Italy has filed an application for a  
CCN to obtain or amend CCN No. (s) 10885 and 20350 and to  
decertify a portion(s) of N/A with the  
(Name of Decertificated Utility)

Texas Commission on Environmental Quality to provide water & sewer  
(specify 1) water or 2) sewer or 3) water & sewer)

utility service in Ellis County(ies).

The proposed utility service area is located approximately within 1 miles  
[direction] of downtown Italy, [City or Town] Texas, and is  
generally bounded on the north by Carter; on the east by  
FM 667; on the south by IH-35; and on the west by intersection of George Scott & Stafford

### ***See enclosed map of the proposed service area.***

The total area being requested includes approximately 1,240 acres and 900  
current customers.

The proposed amendment affects customers and/or areas located in the following zip  
code(s):

76651

### ***(List All Affected Zip Codes)***

A copy of the proposed service area map is available at (Utility Address and Phone  
Number): City of Italy, Public Works Department, 413 Clark Street, Italy, Texas 76651 Ph: (972) 483-6212

A request for a public hearing must be in writing. You must state (1) your name, mailing  
address, and daytime telephone number; (2) the applicant's name, application number or  
another recognizable reference to this application; (3) the statement, "I/we request a  
public hearing"; (4) a brief description of how you or the persons you represent, would be  
adversely affected by the granting of the application for a CCN; and (5) your proposed  
adjustment to the application or CCN which would satisfy your concerns and cause you to  
withdraw your request for a hearing.

**Persons who wish to intervene or comment should write the:**

Texas Commission on Environmental Quality  
Water Supply Division  
Utilities and Districts Section, MC-153  
P. O. Box 13087  
Austin, TX 78711-3087

within thirty (30) days from the date of this publication or notice. A public hearing will be held only if a legally sufficient hearing request is received or if the Commission on its own motion requests a hearing. Only those individuals who submit a written hearing request or a written request to be notified if a hearing is set will receive notice if a hearing is scheduled.

If a public hearing is requested, the Executive Director will not issue the CCN and will forward the application to the State Office of Administrative Hearings (SOAH) for a hearing. If no settlement is reached and an evidentiary hearing is held, the SOAH will submit a recommendation to the Commission for final decision. If an evidentiary hearing is held, it will be a legal proceeding similar to a civil trial in state district court.

If you are a landowner with a tract of land at least 25 acres or more, that is partially or wholly located within the proposed area, you may request to be excluded from the proposed area (or "opt out") by providing written notice to the Commission within (30) days from the date that notice was provided by the applicant. All requests to opt out of the requested service area must include a scaled, general location map and a metes and bounds description of the tract of land.

Persons who meet the requirements to opt out, and wish to request this option should file the required documents with the:

Texas Commission on Environmental Quality  
Water Supply Division  
Utilities and Districts Section, MC-153  
P. O. Box 13087  
Austin, TX 78711-3087

A copy of the request to opt out of the proposed area must also be sent to the applicant. Staff may request additional information regarding your request.

***Si desea informacion en Espanol, puede llamar al 1-512-239-0200.***



## Notice to Neighboring Systems, Landowners and Cities

NOTICE OF APPLICATION FOR CERTIFICATE OF CONVENIENCE AND NECESSITY (CCN) TO  
PROVIDE WATER/SEWER UTILITY SERVICE IN

ELLIS \_\_\_\_\_ COUNTY(IES), TEXAS

To: \_\_\_\_\_ Date Notice Mailed \_\_\_\_\_ 20 13  
(Neighboring System, Landowner or City)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
City State Zip

Name of Applicant City of Italy has filed an application for a  
CCN to obtain or amend CCN No. (s) 10885 and 20350 and to  
decertify a portion(s) of \_\_\_\_\_ with the  
(Name of Decertificated Utility)

Texas Commission on Environmental Quality to provide water and sewer  
(specify 1) water or 2) sewer or 3) water & sewer)  
utility service in Ellis County(ies).

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[direction] of downtown Italy, [City or Town] Texas, and is  
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FM 667; on the south by IH-35; and on the west by intersection of George Scott & Stafford

**See enclosed map of the proposed service area.**

The total area being requested includes approximately 1,240 acres and 900  
current customers.

The proposed amendment affects customers and/or areas located in the following zip  
code(s):  
\_\_\_\_\_  
\_\_\_\_\_

(List All Affected Zip Codes)

A request for a public hearing must be in writing. You must state (1) your name, mailing address, and daytime telephone number; (2) the applicant's name, application number or another recognizable reference to this application; (3) the statement, "I/we request a public hearing"; (4) a brief description of how you or the persons you represent, would be adversely affected by the granting of the application for a CCN; and (5) your proposed adjustment to the application or CCN which would satisfy your concerns and cause you to withdraw your request for a hearing.

**Persons who wish to intervene or comment should write the:**

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Austin, TX 78711-3087

A copy of the request to opt out of the proposed area must also be sent to the applicant. Staff may request additional information regarding your request.

**Si desea informacion en Espanol, puede llamar al 1-512-239-0200.**

8:09 AM

09/09/13

Accrual Basis

**Water Bond Project 2011-2003770**  
**Profit & Loss Budget vs. Actual**  
 October 2012 through September 2013

	Oct '12 - Sep 13	Budget	\$ Over Budget	% of Budget
Income				
Interest	7,175.08			
Total Income	7,175.08			
Expense				
City Projects				
Contingencies	7,521.92	21,921.94	-14,400.02	34.3%
SCADA System	10,726.32	14,020.50	-3,294.18	76.5%
Water Well Upgrades	18,305.98	29,511.72	-11,205.74	62.0%
City Projects - Other	80.67			
Total City Projects	36,634.89	65,454.16	-28,819.27	56.0%
Project A				
500,000 Gallon Concrete GST	1,088,533.57	825,000.00	263,533.57	131.9%
Add'l/Modified Cooling Facil...	0.00	125,000.00	-125,000.00	0.0%
Chemical Building	0.00	200,000.00	-200,000.00	0.0%
Contingencies A	67,554.05	144,713.10	-77,159.05	46.7%
Engineering A	68,501.12	147,145.35	-78,644.23	46.6%
Pump Station Modifications	42,856.37	69,196.50	-26,340.13	61.9%
Standby Generator	0.00	125,000.00	-125,000.00	0.0%
Total Project A	1,267,445.11	1,636,054.95	-368,609.84	77.5%
Project B				
Contingencies B	1,313.43	23,041.50	-21,728.07	5.7%
Engineering B	6,905.92	0.00	6,905.92	100.0%
Radio Read Drive By Meters	0.00	0.00	0.00	0.0%
Total Project B	8,219.35	23,041.50	-14,822.15	35.7%
Total Expense	1,312,299.35	1,724,550.61	-412,251.26	76.1%
Net Income	-1,305,124.27	-1,724,550.61	419,426.34	75.7%

# TCEQ EXIT INTERVIEW FORM: Potential Violations and/or Records Requested

Regulated Entity/Site Name	City of Italy		TCEQ Add. ID No. RN No. (optional)	0700028
Investigation Type	CC	Contact Made In-House (Y/N)	Potential	
Regulated Entity Contact	Dean Carroll		Telephone No.	972-483-7321
Title	Public Works Director		Date Contacted	1/14/13
			Date Faxed	

NOTICE: The information provided in this form is intended to provide clarity to issues that have arisen during the investigation process between the TCEQ and the regulated entity named above and does not represent final TCEQ findings related to violations. Any potential or alleged violations discovered after the date on this form will be communicated by telephone to the regulated entity representative prior to the issuance of a notice of violation or enforcement. Conclusions drawn from this investigation, including additional violations or potential violations discovered (if any) during the course of this investigation, will be documented in a final investigation report.

Issue		For Records Request: identify the necessary records, the company contact and date due to the agency. For Alleged and Potential Violation issues: include the rule in question with the clearly described potential problem. Other type of issues: fully describe.	
No.	Type <sup>1</sup>	Rule Citation (if known)	Description of Issue
1	AV	30 TAC 290	Failure to maintain a plant operations manual. ✓
2	AV	30 TAC 290	Failure to maintain a monitoring plan. ✓
3	AV	30 TAC 290	Failure to maintain the backflow prevention test results. ✓
4	AV	30 TAC 290	Failure to maintain calibration records for the Hach colorimeter. ✓
5	AV	30 TAC 290	Failure to properly seal the wellhead on well #3. ✓
6	AV	30 TAC 290	Failure to properly maintain the concrete sealing block on well #3. ✓
7	AV	30 TAC 290	Failure to maintain functioning upper fan in gas chlorine room. ✓

<sup>1</sup>Issue Type Can Be One or More of: AV (Alleged Violation), PV (Potential Violation), O (Other), or RR (Records Request)

Did the TCEQ document the regulated entity named above operating without proper authorization?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Did the investigator advise the regulated entity representative that continued operation is not authorized?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

**Document Acknowledgment.** Signature on this document establishes only that the regulated entity (company) representative received a copy of this document and associated continuation pages on the date noted. If contact was made by telephone, document will be faxed to regulated entity; therefore, signature not required.

Investigator Name (Signed & Printed)	Date	Regulated Entity Representative Name (Signed & Printed)	Date
Crystal Watkins	1-14-13	Dean Carroll	1-14-13

If you have questions about any information on this form, please contact your local TCEQ Regional Office. Individuals are entitled to request and review their personal information that the agency gathers on its forms. They may also have any errors in their information corrected. To review such information, call 512-239-3282.

# TCEQ EXIT INTERVIEW FORM: Potential Violations and/or Records Requested

Regulated Entity/Site Name	City of El Paso		TCEQ Add. ID No. RN No. (optional)	0700028
Investigation Type	CCI	Contact Made In-House (Y/N)	Y	
Regulated Entity Contact	Dean Carroll		Purpose of Investigation	Routine
Title	Public Works Director		Telephone No.	
			Fax No.	
			Date Contacted	1/14/13
			Date Faxed	

NOTICE: The information provided in this form is intended to provide clarity to issues that have arisen during the investigation process between the TCEQ and the regulated entity named above and does not represent final TCEQ findings related to violations. Any potential or alleged violations discovered after the date on this form will be communicated by telephone to the regulated entity representative prior to the issuance of a notice of violation or enforcement. Conclusions drawn from this investigation, including additional violations or potential violations discovered (if any) during the course of this investigation, will be documented in a final investigation report.

Issue		For Records Request: identify the necessary records, the company contact and date due to the agency. For Alleged and Potential Violation issues: include the rule in question with the clearly described potential problem. Other type of issues: fully describe.
No.	Type <sup>1</sup>	Description of Issue
8	AV	30 TAC 290 Failure to have a working well meter on wells #1 & 2 ✓
9	AV	30 TAC 290 Failure to properly maintain the gauging. ✓
10	RR	Please provide a copy of the NSF Certification for gas chlorine ✓
11	RR	Please provide a copy of the most recent well meter calibration ✓
12	AI	Please update the drought contingency plan. ✓

<sup>1</sup>Issue Type Can Be One or More of: AV (Alleged Violation), PV (Potential Violation), O (Other), or RR (Records Request)

Did the TCEQ document the regulated entity named above operating without proper authorization?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Did the investigator advise the regulated entity representative that continued operation is not authorized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Document Acknowledgment.** Signature on this document establishes only that the regulated entity (company) representative received a copy of this document and associated continuation pages on the date noted. If contact was made by telephone, document will be faxed to regulated entity; therefore, signature not required.

Investigator Name (Signed & Printed)	Date	Regulated Entity Representative Name (Signed & Printed)	Date
Crystal Watkins	1-14-13	Dean Carroll	1-14-13

If you have questions about any information on this form, please contact your local TCEQ Regional Office. Individuals are entitled to request and review their personal information that the agency gathers on its forms. They may also have any errors in their information corrected. To review such information, call 512-239-3282.

CITY OF ITALY

# TCEQ Exit Interview Response

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#### Violations List

The City of Italy is responding to the investigation by TCEQ that took place on January 14, 2013. Chrystal D. Watkins was the investigator and performed the exit interview. The number, type and rule citation are listed below.

1. AV 30 TAC 290 Failure to maintain a plant operations manual.
2. AV 30 TAC 290 Failure to maintain a monitoring plan.
3. AV 30 TAC 290 Failure to maintain backflow prevention test results.
4. AI 30 TAC 290 Failure to maintain calibrations records for the Hach colorimeter.
5. AV 30 TAC 290 Failure to properly seal the well head on well #3.
6. AV 30 TAC 290 Failure to maintain the concrete sealing block on well #2&3.
7. AV 30 TAC 290 Failure to maintain functioning upper fan in gas chlorine room.
8. AV 30 TAC 290 Failure to have working well meter on wells #1&2.
9. AV 30 TAC 290 Failure to properly maintain the grounds.
10. RR Please provide a copy of the NSF certification for gas chlorine.
11. RR Please provide the most recent well meter calibration records.
12. AI Please update drought contingency plan.

### **Violations Responses**

- I. Failure to maintain Plant Operations Manual
  - A. The Plant Operations Manual has been updated and is on file.
- II. Failure to maintain a Monitoring Plan
  - A. The Monitoring Plan has been updated and is on file.
- III. Failure to maintain the backflow prevention test results.
  - A. The Backflow Prevention Assembly Test and Maintenance Report and copies of the letters sent to addresses requiring backflow assemblies are on file with the Director of Public Works.
- IV. Failure to maintain calibration records for the Hach Colorimeter.
  - A. The City of Italy primarily uses a Hach Color Wheel but will start calibrating our Colorimeter and keeping said calibrations on file.
- V. Failure to properly seal the well head on well #3
  - A. See Appendix 1
- VI. Failures to properly maintain the concrete sealing block on wells #2 and #3.
  - A. The sealing block for both wells will be rehabbed after the insurance company releases the city to do so. Well #3 will be done first then Well #2.
- VII. Failure to maintain functioning upper fan in gas chlorine room.
  - A. The gas chlorine room is under construction and is slated to be moved to a new location. See Appendix 2.
- VIII. Failure to have a working well meter on Wells #1 and #2.
  - A. The City has contracted to have the meters repaired. The invoice for these repairs is on file with the Public Works Director. See Appendix 3 for documentation of damage and needed repairs.
- IX. Failure to properly maintain the grounds.



- A. The City is under construction adding a half million gallon concrete clearwell, SCADA piping, a cooling tower and a chemical room at this location. See Appendix 4. MSDS Sheets on file with Director of Public Works.
- X. NSF certification for gas chlorine not available.
  - A. NSF Sheets on file with Director of Public Works.
- XI. No copy available of most recent well meter calibrations.
  - A. Current well meter calibrations are on file with the Public Works Director.
- XII. Updated Drought Contingency Plan
  - A. The Drought Contingency Plan must be voted on by the City Council. This plan requires penalties be assessed and the City Council must vote on what those penalties will be. An updated plan is being drafted to put before the City Council for a vote. This process may take several months to complete.

Bryan W. Shaw, Ph.D, *Chairman*  
Carlos Rubinstein, *Commissioner*  
Toby Baker, *Commissioner*  
Zak Covar, *Executive Director*



PWS/1234567/CO/08-14-2013/Drought Ltr

## Texas Commission on Environmental Quality

*Protecting Texas by Reducing and Preventing Pollution*

August 14, 2013

0700028

CITY OF ITALY  
CYNTHIA OLGUIN,  
PO BOX 840  
ITALY, TX 76651-0840

RECEIVED AUG 19 2013

Re: Water Conservation and Water Supply Reporting

Dear Public Water System Official:

Texas continues to suffer the effects of a long term drought. Despite recent rains, drought conditions are not improving and the strain on Texas water supplies continues. The Texas Commission on Environmental Quality (TCEQ) is encouraging public water systems to take reasonable measures to increase conservation and extend water supplies.

Your Drought Contingency Plan (DCP) is an important tool in conserving and managing your water supply during drought. We encourage you to review your DCP and be prepared to implement restrictions. If you have already implemented restrictions, review your DCP and be prepared to move to the next stage of restrictions, if necessary.

You are required to notify TCEQ when you implement your DCP *and* as the stages of your DCP change. The TCEQ has developed an on-line form to facilitate reporting:

<http://www.DroughtReport.org>

This form should also be used for water supply reporting. Effective September 1, 2013, state statute requires water utilities to determine available water supply and report to TCEQ when supply is less than 180 days.

If you don't have reliable internet access, need help completing the form, or if you have questions, please call our Small Business and Local Government Assistance hotline at 1-800-447-2827.

Sincerely,

A handwritten signature in black ink, appearing to read "R. A. Hyde".

Richard A. Hyde, P.E.  
Deputy Executive Director

cc: TCEQ Region 4

# The City of Italy

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## Plant Operations Manual

**1/25/2013**

The City of Italy serves a population of 2160 with 739 connections with three wells, one in Woodbend and two in the trinity aquifer. The water system is disinfected by a vacuum chlorination system with ISO 150 pound cylinder at a residual of 0.2 mg/L of free chlorine. There is one 7500 gallon clear well, one 200,000 gallon ground storage clear well and one 300,000 gallon elevated tank. The pump system includes 3-25 hrs jockey pumps and 2-50 hrs booster pumps. All of the system is operated by SCADA.

1. Daily Rounds

Daily Rounds-Water Department						
Well readings						
Well #1		Time		On		Off
Well #2		Time		On		Off
Well #3		Time		On		Off

Contract Meters #1 \_\_\_\_\_ #2 \_\_\_\_\_  
 Clear well Level \_\_\_\_\_

Pump Stations

A 413 Clark Ice House  
 B Pump #1 On \_\_\_\_\_ Off \_\_\_\_\_  
 C Pump #2 On \_\_\_\_\_ Off \_\_\_\_\_  
 D Pump #3 On \_\_\_\_\_ Off \_\_\_\_\_  
 E Pump Station Master Meter \_\_\_\_\_

Pump Station Boosters

A #1 Pump 50 Hrs  
 B #2 Pump 50 hrs

Master Meter Read \_\_\_\_\_

\*All rounds start at 8:00 am. Prior to starting rounds all personnel are required to check the SCADA system for any problems (alarms, pumpage, wells down, storage tank down, elevated down).

2.

a.

	Tank Levels		Residuals	PSI
Barn				
Clear Well				
Ground Storage				
Elevated Tower				

b. Cooling Tower On ☐ Off ☐

c. 413 Clark St

		Weight	Before	After	Use
Chlorine	#1				
Scales	#2				

d. Daily Residual (sample sites)

Chlorine Residual #1 \_\_\_\_\_ Address \_\_\_\_\_  
 Chlorine Residual #2 \_\_\_\_\_ Address \_\_\_\_\_

3. Fill in Monthly Water Production Log. Blanks are in the computer and completed files are kept in cabinet marked Monthly Water Production.
4.
  - a. Work Orders will be generated from City Hall. Personnel assigned to WO are to complete orders and fill out Work Order Request stating what work was done (i.e., water leak – checked for location and scope of leak, completed repairs to pipe) and file is to be turned in to Public Works Director to be filed.
  - b. The City will pull B.T.'s each month using the addressees below:
    - i. 516 Waco
    - ii. 409 Venice
    - iii. 621 Cherie
    - iv. 512 Rankin
    - v. 400 S. Ward
  - c. The sample site map will remain posted. It is important to alternate each site.
  - d. B.T.'s will go to:

Environmental Monitoring Lab  
 6145 S. HWY 171  
 Hillsboro, Texas, 76645  
 254-582-2622

5. Disinfectant Level Quarterly Operating Report (DL-QOR).
6. Keep Mapping up-to-date at all times.
7. Work Values system.
8. Perform flushing on a monthly basis and report.
9. Keep Monitoring Plan up-to-date as a reference.
10. Keep all grounds clean and entrance resistant.
11. Keep all files and paperwork in order and organized on a daily basis.
12. Keep the Department updated to TCEQ's and EPA rules and regulations.

THE CITY OF ITALY

# Monitoring Plan

---

Public Works ID 0706028

**Responsible Official Mayor Frank Jackson**

**Director of Public Works Dean Carrell**

- I. The City of Italy operates a public water system that is ground water based from the Trinity and Woodbind aquifers. The city has a current population of 2160 with 739 connections.
  - a. There are three raw water samplings:
    - i. Well #1
    - ii. Well #2
    - iii. Well #3
    1. In plant sampling
  - b. There are no water treatments other than chlorination through the use of ISO cylinders with gas chlorine.
  - c. Entry point sampling

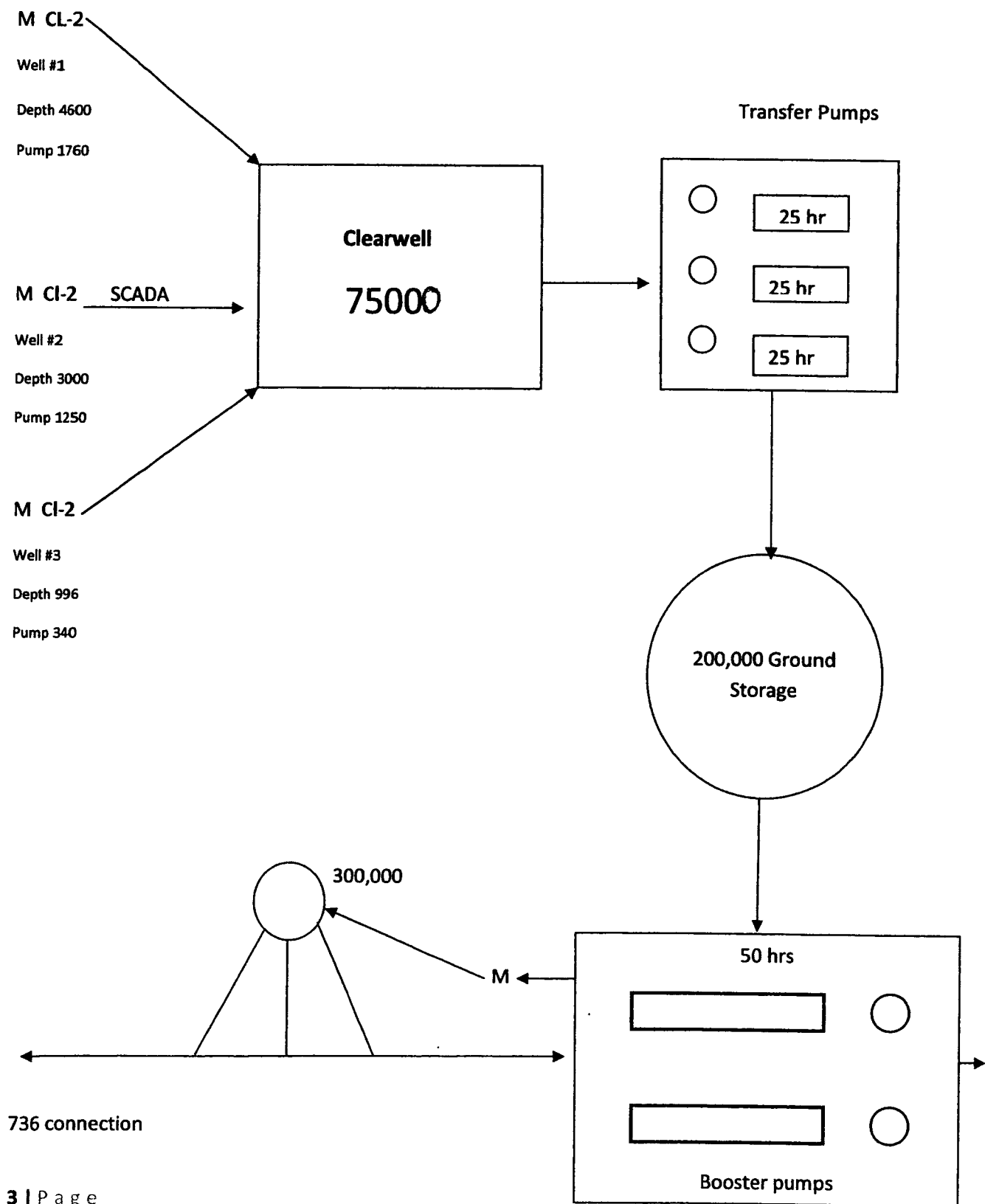
Entry	Sample Site	Source	Plant Name
001	Sample tap at 75,000 ground clean well	Trinity/Woodbind	Wells 1,2,3
002	Sample site at 2,000 gallon ground storage tank	Trinity/Woodbind	Wells 1,2,3
003	Sample site at 3,000 ths elevated	Trinity/Woodbind	Wells 1,2,3

**Table 1**

Coli form and Disinfection Monitoring Sites		
A	516 Waco	
B	409 Venice	
C	621 Cherie	
D	512 Rankin	
E	40 S. Ward	

**Table 2**

Diagram 1

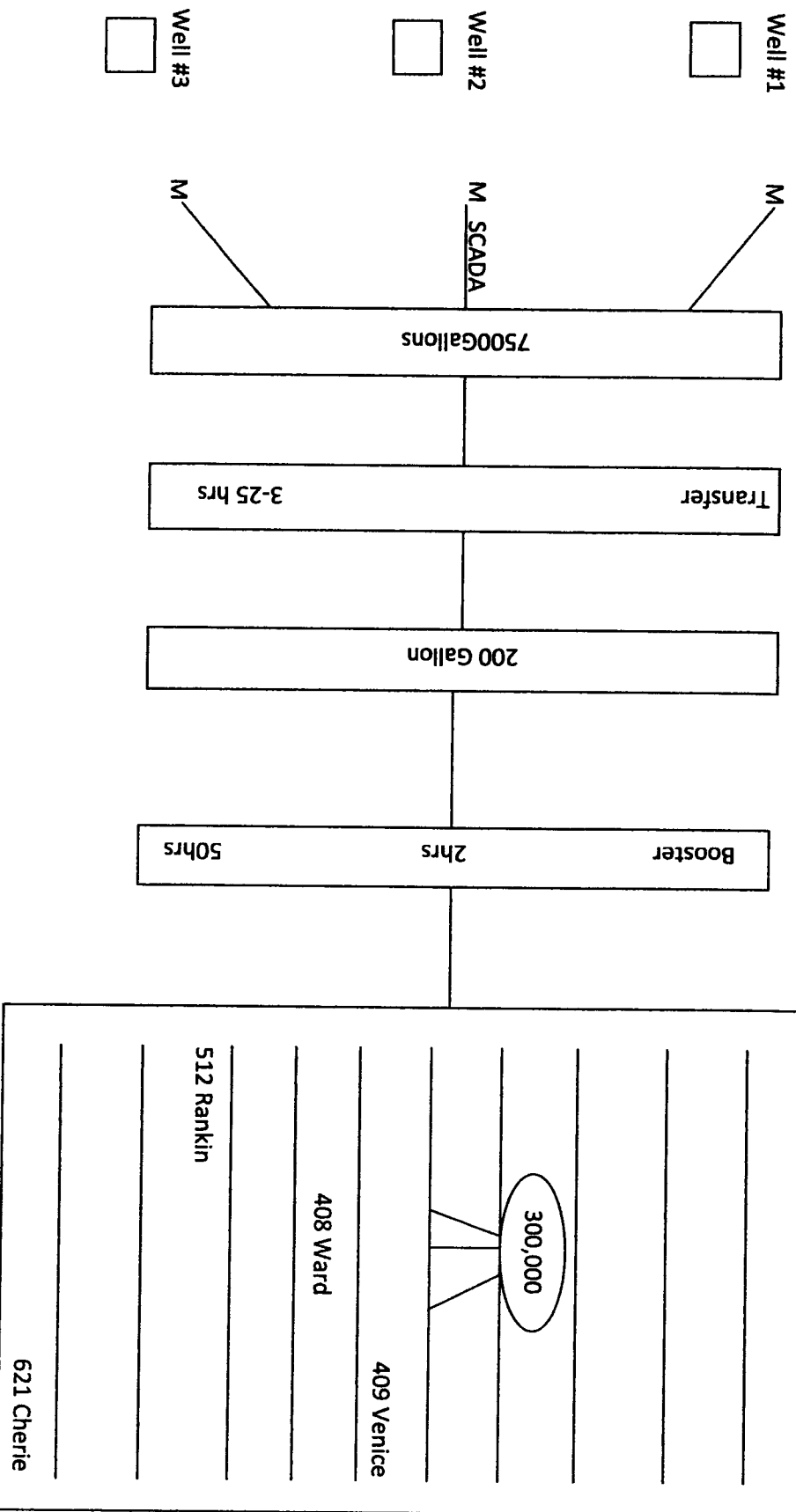




- II. Disinfectant Entering the Distribution System
  - a. The City of Italy operates vacuum chlorination to chlorinate the water from the wells.
  - b. The water system delivers water to the customer as a lower chlorine residual.
  - c. The chlorine is in compliance with TCEQ's rules by serving an entry of 0.2mg/L residual.
- III. Distribution System Sampling
  - a. Appendix 1 shows the distribution of the system.
    - i. Coli form Samples
      - 1. Two coli form samples are taken monthly at each site and rotated as shown in Table 2.
- IV. Method
  - a. Coli form samples are collected by the City of Italy operator and sent to:

Environmental Monitoring Lab  
6145 S. Hwy 171  
Hillsboro, Texas 76645  
254-582-2622
  - b. The City of Italy follows the rules of TCEQ to ensure there are no repeat samples.
    - i. No repeat following fecal or E. coli
    - ii. No more than one repeat if samples are Coli form positive and none of the repeats are fecal or E. coli positive.
- V. Disinfectant Residual – Free or Total Chlorine
  - a. Frequency
    - i. The disinfection residual is measured at the same time every day.
    - ii. Due to the system size (over 250 and less than 5000) the residual is measured every day.
  - b. Disinfection Byproducts
    - i. DBP's, TTHM's, HAH's
      - 1. Since The City of Italy is ground water only, there is no requirement to test for these DBP's.
    - ii. Lower River Colorado samples each well annually to ensure the City's compliance. This is an area water sampling test.
      - 1. The City is not required to monitor lead or copper levels. TCEQ has informed the City regarding this compliance.
    - iii. The City does not monitor for Asbestos as TCEQ has not mandated any requirement.

# Appendix 1. Distribution Sampling System



## NOTICE TO SUPPLIERS/CONTRACTORS

The City of Italy will receive quotations for Water Meter Replacement Project until 3:30 pm on Wednesday, February 22, 2012 at the City Hall, 101 W. Main Street, Italy, Texas at which time and place the sealed bids will be publicly opened and read aloud.

Bids are invited for several items as follows:

1. Furnish 875 - 3/4", 2 - 1", and 7 - 2" Radio Read Water Meters
2. Furnish 1 Handheld Data Collector
3. Furnish Software and Computer for Data Collection

Specifications and/or proposal forms for the Project may be viewed and downloaded free of charge with the option to purchase hard copies at [www.civcastusa.com](http://www.civcastusa.com). Printed copies of the Contract Documents may be viewed at the Engineer's office located at **8875 Synergy Drive, McKinney TX 75070, (972-542-2995)**.

Please submit questions for this project at least 5 business days prior to bid opening through [www.civcastusa.com](http://www.civcastusa.com) in the Q&A portal or to Scott Hoelzle, P.E. at [shoelzle@ksaeng.com](mailto:shoelzle@ksaeng.com). All addenda issued for this project will **only** be posted on [www.civcastusa.com](http://www.civcastusa.com). A bid bond in the amount of 5 percent of the bid issued by an acceptable surety shall be submitted with each bid. A certified check or bank draft payable to the City of Italy or negotiable U.S. Government Bonds (as par value) may be submitted in lieu of the Bid Bond. The City of Italy reserves the right to reject any or all bids or to waive any informalities in the bidding. Bids may be held by City of Italy for a period not to exceed 60 days from the date of the bid opening for the purpose of reviewing the bids and investigating the bidder's qualifications prior to the contract award.

**City of Italy**  
**PROJECT SCHEDULE**  
**FOR THE**  
**Tank and Pump Station Improvements**

**Version: May 10, 2012**

Description	Duration (Days)	Estimated Competition Date
Preliminary Design		Thursday, May 10, 2012
Review by City	7	Thursday, May 17, 2012
Final Design	90	Wednesday, August 15, 2012
Review by City	7	Wednesday, August 22, 2012
Deliver Final Plans and Specifications to City and TCEQ	14	Wednesday, September 05, 2012
TCEQ Review and Approval	60	Sunday, November 04, 2012
Advertise for Bids	9	Friday, September 14, 2012
Advertise for Bids	7	Friday, September 21, 2012
Receive Bids	14	Friday, October 05, 2012
Deliver Bid Tabs to City	2	Sunday, October 07, 2012
Award Construction Contracts	3	Wednesday, October 10, 2012
Issue Notice to Proceed	35	Wednesday, November 14, 2012
Estimated Construction Completion Date	360	Saturday, November 09, 2013



# BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

Following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water suppliers for record keeping purposes.

## BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

NAME OF PWS: CITY OF ITALY

PWS I.D.# 0700028

MAILING ADDRESS: PO BOX 0840, ITALY, TX 76651-0840

CONTACT PERSON: Robert Butts

LOCATION OF SERVICE: TRINITY MISSION HEALTH @ REHAB of ITALY

The backflow prevention assembly detailed below has been tested and maintained as required by commission regulations and is certified to be operating within acceptable parameters.

### TYPE OF ASSEMBLY

- ☒ Reduced Pressure Principle  
☐ Double Check Valve  
☐ Pressure Vacuum Breaker

- ☐ Reduced Pressure Principal-Detector  
☐ Double Check-Detector  
☐ Spill-Resistant Pressure Vacuum Breaker

Manufacturer WATTS  
Model Number 009MSOT RP  
Serial Number 181696

Size 2"  
Located At RISER ROOM NEXT TO KITCHEN

Is the assembly installed in accordance with manufacturer recommendations and/or local codes?

	Reduced Pressure Principal Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve
	1st Check	2nd Check			
Initial Test	Held at <u>8.2</u> psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Held at <u>8.0</u> psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Opened at <u>2.4</u> psid Did Not Open <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Held at _____ psid Leaked <input type="checkbox"/>
Repairs and Materials Used					
Test After Repair	Held at _____ psid Closed Tight <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psid	Opened at _____ psid	Held at _____ psid

Tested gauge used: Make/Model Com BRACO 40-200<sup>TX</sup> SN: 249631 Calibration Date: 8-29-12

Remarks: \_\_\_\_\_

The above is certified to be true at the time of testing.

Firm Name BERRYMAN FIRE Certified Tester RODNEY MILLER

Firm Address 442 W CENTER DUN TX 75116 Cert. Tester No BP 0614459

Firm Phone # 214-331-0660 Date 1-2-13

\* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS

\*\*USE ONLY MANUFACTURER'S REPLACEMENT PARTS

January 18, 2013

Charles Hyles  
PO Box 0627  
Italy, TX 76651-0627



RE: CROSS CONNECTION/BACKFLOW PREVENTION ASSEMBLY  
PER ORDINANCE NO. 10-1108-02

Dear Mr. Hyles:

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to protect the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

According to the Public Works records, this address is required to have a backflow prevention device installed and tested on an annual basis.

Per Ordinance No 10-1108-02 Article II, Section 2.12 Testing of Assemblies (4) It is the responsibility of the property owner and the person in control of the premises to have all backflow prevention assemblies tested in accordance with this ordinance.

Per Ordinance No. 10-1108-02 Article V, Section 5.01 (1) A person who violates any provision of this Ordinance by performing an act prohibited or failing to perform an act required is guilty of a misdemeanor; each day the violation continues shall be a separate offense. Also be advised that the City has the right to suspend service to any premises without prior notice.

This is a service that the City of Italy can provide for a minimal fee of \$75. You may contact the Backflow Assembly Contractor of your choice, however this contractor must register with the City.

Please consider this official notice that the backflow testing requirement is past due and must be submitted to the City no later than February 7, 2013. After this date, further action will be taken by the City, which may include a citation being issued by the code enforcement division.

If you have any questions, concerns, or for a copy of this ordinance please do not hesitate to contact City Hall at 972-483-7329 X 0 or Dean Carrell, Public Works Director at 972-483-6212.

Sincerely,

Dean Carrell  
Public Works Director

January 18, 2013

Jan Wolaver  
400 S Ward  
Italy, TX 76651-3644



RE: CROSS CONNECTION/BACKFLOW PREVENTION ASSEMBLY  
PER ORDINANCE NO. 10-1108-02

Dear Ms. Wolaver:

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to protect the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

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If you have any questions, concerns, or for a copy of this ordinance please do not hesitate to contact City Hall at 972-483-7329 X 0 or Dean Carrell, Public Works Director at 972-483-6212.

Sincerely,

Dean Carrell  
Public Works Director

January 18, 2013

Italy Independent School District  
300 College  
Italy, TX 76651-3775



RE: CROSS CONNECTION/BACKFLOW PREVENTION ASSEMBLY  
PER ORDINANCE NO. 10-1108-02

Dear Sir/Madam:

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to protect the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

According to the Public Works records, this address is required to have a backflow prevention device installed and tested on an annual basis.

Per Ordinance No 10-1108-02 Article II, Section 2.12 Testing of Assemblies (4) It is the responsibility of the property owner and the person in control of the premises to have all backflow prevention assemblies tested in accordance with this ordinance.

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If you have any questions, concerns, or for a copy of this ordinance please do not hesitate to contact City Hall at 972-483-7329 X 0 or Dean Carrell, Public Works Director at 972-483-6212.

Sincerely,

Dean Carrell  
Public Works Director



January 18, 2013

Jimmy Weaver  
PO Box 0158  
Italy, TX 76651-0158



RE: CROSS CONNECTION/BACKFLOW PREVENTION ASSEMBLY  
PER ORDINANCE NO. 10-1108-02

Dear Mr. Weaver:

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to protect the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

According to the Public Works records, this address is required to have a backflow prevention device installed and tested on an annual basis.

Per Ordinance No 10-1108-02 Article II, Section 2.12 Testing of Assemblies (4) It is the responsibility of the property owner and the person in control of the premises to have all backflow prevention assemblies tested in accordance with this ordinance.

Per Ordinance No. 10-1108-02 Article V, Section 5.01 (1) A person who violates any provision of this Ordinance by performing an act prohibited or failing to perform an act required is guilty of a misdemeanor; each day the violation continues shall be a separate offense. Also be advised that the City has the right to suspend service to any premises without prior notice.

This is a service that the City of Italy can provide for a minimal fee of \$75. You may contact the Backflow Assembly Contractor of your choice, however this contractor must register with the City.

Please consider this official notice that the backflow testing requirement is past due and must be submitted to the City no later than February 7, 2013. After this date, further action will be taken by the City, which may include a citation being issued by the code enforcement division.

If you have any questions, concerns, or for a copy of this ordinance please do not hesitate to contact City Hall at 972-483-7329 X 0 or Dean Carrell, Public Works Director at 972-483-6212.

Sincerely,

Dean Carrell  
Public Works Director

January 18, 2013

Tommy Davis  
PO Box 0882  
Italy, TX 76651-0882



RE: CROSS CONNECTION/BACKFLOW PREVENTION ASSEMBLY  
PER ORDINANCE NO. 10-1108-02

Dear Mr. Davis:

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to protect the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

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If you have any questions, concerns, or for a copy of this ordinance please do not hesitate to contact City Hall at 972-483-7329 X 0 or Dean Carrell, Public Works Director at 972-483-6212.

Sincerely,

Dean Carrell  
Public Works Director

January 18, 2013

Italy Family Medicine  
PO Box 0539  
Italy, TX 76651-0539



RE: CROSS CONNECTION/BACKFLOW PREVENTION ASSEMBLY  
PER ORDINANCE NO. 10-1108-02

Dear Sir/Madam

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to protect the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

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If you have any questions, concerns, or for a copy of this ordinance please do not hesitate to contact City Hall at 972-483-7329 X 0 or Dean Carrell, Public Works Director at 972-483-6212.

Sincerely,

Dean Carrell  
Public Works Director

January 18, 2013

Craig Rudolph  
225 Lakeshore Dr.  
Waxahachie, TX 75165-6803



RE: CROSS CONNECTION/BACKFLOW PREVENTION ASSEMBLY  
PER ORDINANCE NO. 10-1108-02

Dear Mr. Rudolph:

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to protect the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

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Sincerely,

Dean Carrell  
Public Works Director

January 18, 2013

Kristen Bouchard  
11 Ridgewood Dr  
Trophy Club, TX 76262-3404



RE: CROSS CONNECTION/BACKFLOW PREVENTION ASSEMBLY  
PER ORDINANCE NO. 10-1108-02

Dear Ms. Bouchard:

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to protect the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

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Sincerely,

Dean Carrell  
Public Works Director January 18, 2013

January 18, 2013

Dunlap Library  
PO Box 0390  
Italy, TX 76651-0390



RE: CROSS CONNECTION/BACKFLOW PREVENTION ASSEMBLY  
PER ORDINANCE NO. 10-1108-02

Dear Ms. French:

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to protect the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

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Sincerely,

Dean Carrell  
Public Works Director

January 18, 2013

Kevin Muller  
320 S Ward  
Italy, TX 76651-3774



RE: CROSS CONNECTION/BACKFLOW PREVENTION ASSEMBLY  
PER ORDINANCE NO. 10-1108-02

Dear Mr. Muller:

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to protect the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

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Sincerely,

Dean Carrell  
Public Works Director

January 18, 2013

Celest Carroll  
PO Box 0888  
Italy, TX 76651-0888



RE: CROSS CONNECTION/BACKFLOW PREVENTION ASSEMBLY  
PER ORDINANCE NO. 10-1108-02

Dear Ms. Carroll:

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to protect the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

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Sincerely,

Dean Carrell  
Public Works Director



January 18, 2013

Browder Tatum  
313 S Ward  
Italy, TX 76651-3580



RE: CROSS CONNECTION/BACKFLOW PREVENTION ASSEMBLY  
PER ORDINANCE NO. 10-1108-02

Dear Mr. Tatum:

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to protect the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

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Sincerely,

Dean Carrell  
Public Works Director

January 18, 2013

David Jenkins  
901 Martin  
Italy, TX 76651-3858



RE: CROSS CONNECTION/BACKFLOW PREVENTION ASSEMBLY  
PER ORDINANCE NO. 10-1108-02

Dear Mr. Jenkins:

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to protect the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

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Sincerely,

Dean Carrell  
Public Works Director