

## Checklist for Obtaining or Amending a CCN

Name of Application City of Italy

Administrative Review #A - 099 - 13

Application Number (s) 37666-C, 37667-C

Date TCEQ Received Application 7/16/13

Date Assigned to program area 7/16/13

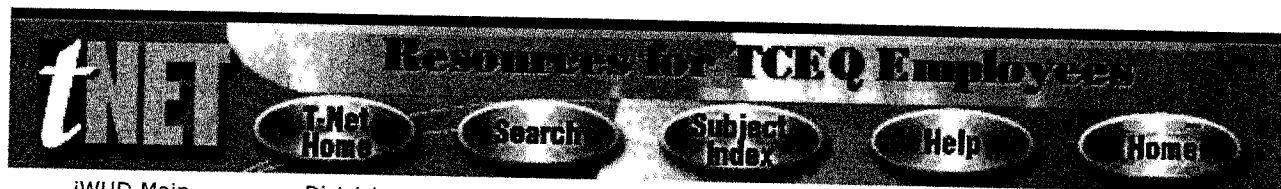
County(s) Ellis

### Purpose of Application:

- |   |  |
|---|--|
| <input type="checkbox"/> Obtain New Water CCN<br>Temporary CCN# A _____                       | <input type="checkbox"/> Obtain New Sewer CCN<br>Temporary CCN# A _____        |
| <input checked="" type="checkbox"/> Amend Water CCN # <u>10885</u>                            | <input checked="" type="checkbox"/> Amend Sewer CCN # <u>20350</u>             |
| <input checked="" type="checkbox"/> Account Fees due <u>none</u>                              | <input checked="" type="checkbox"/> Regulatory Assessment Fees due <u>none</u> |
| <input checked="" type="checkbox"/> Attach a copy of CN and RN from WUD                       |  |
| <input checked="" type="checkbox"/> Not on file with Central Registry. Core Data Form Needed. |  |
| <input checked="" type="checkbox"/> Original and three copies of application received         |  |

J:\UDS\Utilities Forms and Checklists Admin Review\CCN.doc



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## ? Utility details for CITY OF ITALY (10885)

  
Affiliations


  
Documents


  
Site Visits


  
Schedules

### Properties

CR Regulated Entity Number: RN101393528 ✓

CCEDS Status: NO ACTIVE NOE EXISTS

Utility Type: WATER UTILITY

Ownership Type: MUNICIPALITY

Primary County: ELLIS

County Code: 70

### Customers

**Reference Number**  
 CN600460026 ✓

**Name**  
 CITY OF ITALY

**Role**  
 RESPONSIBLE PARTY

### Official Address / Phone

Address: PO BOX 66

ITALY, TEXAS 76651-0000

Telephone: (972) 483-6414

### PWS for this Utility

PWS Name	PWS ID	Status	District(Number)
CITY OF ITALY	0700028	A	

Water System occurrences retrieved.

### Counties

Code	County Name	Primary
70	ELLIS ✓	Y

### Activity

Activity Status: ACTIVE

Start Date: 03/01/1986

End Date: 12/31/9999

Activity Date: 11/02/2000

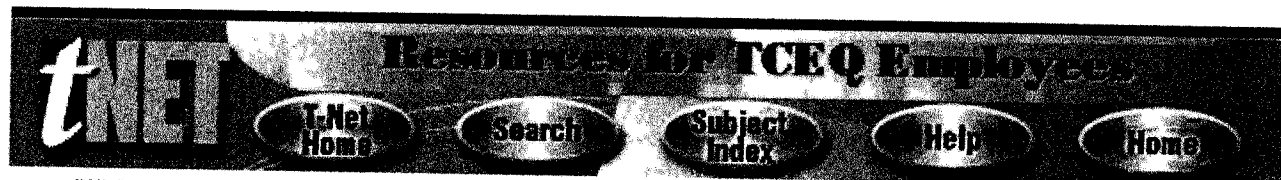
[Run Utility Cases Report](#)  
[Run Utility Summary Report](#)  
[Show Map](#)

Utility successfully retrieved.

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**For questions or comments regarding information on this page, contact the  
[TCEQ iWUD Web Manager](#)**

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## ? Utility details for CITY OF ITALY (20350)

[Affiliations](#) [Documents](#) [Site Visits](#) [Schedules](#)

### Properties

CR Regulated Entity Number: **RN101393528** ✓

CCEDS Status: **NO ACTIVE NOE EXISTS**

Utility Type: **SEWER UTILITY**

Ownership Type: **MUNICIPALITY**

Primary County: **ELLIS**

County Code: **70**

### Customers

**Reference Number**

CN600460026 ✓

**Name**

CITY OF ITALY

**Role**

RESPONSIBLE PARTY

### Official Address / Phone

Address: **PO BOX 66**

**ITALY , TEXAS 76651-0000**

Telephone: **(972) 483-6414**

### Counties

**Code**

70

**County Name**

ELLIS ✓

**Primary**

Y

### Activity

Activity Status: **ACTIVE**

Start Date: **03/01/1986**

End Date: **12/31/9999**

Activity Date: **11/02/2000**

[Run Utility Cases Report](#)  
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Utility successfully retrieved.

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To: Administrative Reviewer

Date Complete: July 17, 2013

From: Cartographer-Utilities & Districts Section

Subject: Overlap & Notice Check for Administrative Review No. A099-13/37666&7-C  
City of Italy (19885 & 20350) to amend water and sewer CCN/s in Ellis county

1. No new overlap of service areas exists.
2. An overlap:
3. Dual certification:
4. An overlap exists with the city limits of:
5. If this is a Sale, Transfer, or Merger, is additional area being requested?
7. Map submitted is digital request digital data.
9. Utility notice was sufficient.
10. Utility notice was insufficient. In addition to those systems listed in the application, they will also need to notify:

TWO MILES:

All cities and etj's within 2 miles of proposed area

Any other Utility, District or entity that would be required to receive notice

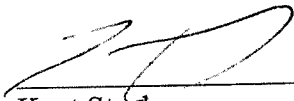
11. Notice: **DO NOT NOTICE**

- X 12. Other comments: **Maps do not meet requirements. Please submit the following. (maps do not clearly show the proposed area. Color or shading would help. Data disk contain multiple records and the proposed is not clearly labeled and there amy be areas that should be removed. It is not clear. No map B of only the proposed area. No written description of the proposed area. Need new maps for a and B to clearly show the proposed and applicant should make sure the data is the same.)**

- 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

- ii. register professional land surveyor; or  
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.

  
\_\_\_\_\_  
Kent Steelman



To: Administrative Reviewer

Date Complete: July 17, 2013

From: Cartographer-Utilities & Districts Section

Subject: Overlap & Notice Check for Administrative Review No. A099-13/37666&7-C  
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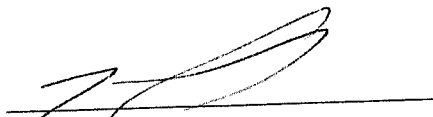
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Kent Steelman