

Control Number: 43173



Item Number: 1

Addendum StartPage: 0

House Bill (HB) 1600 and Senate Bill (SB) 567 83rd 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.

RECEIVED 2014 SEP 19 PM 2: 28 B & D ENVIRONMENTAL, INC.

P.O. BOX 500264

AUSTIN, TEXAS 78750

PHONE NO: (512) 264-9124

FAX NO: (512) 692-1967

CURLIC LITE ITY COMMISSION

EMAIL: bretfenner@yahoo.com

December 27, 2013

TOEO
WATEL SUPPLY DIV.

Ms. Tammy Benter, Manager Texas Commission on Environmental Quality Utilities & Districts Section, MC 153 Water Supply Division P.O. Box 13087 Austin, Texas 78711-3087

Re: Water Rate/Tariff Change Application of North Orange Water and Sewer, LLC for its Longford Place Water System (Longford Place), Certificates of Convenience and Necessity (CCN) Nos. 11511 and 20548 in Orange County.

Dear Ms. Benter:

Per your request, enclosed are an original and four copies of a completed water and sewer rate/tariff change application along with appropriate attachments for Longford Place. A copy of the notices mailed to each affected customer is also included in the rate/tariff change application.

Should you have any further questions concerning this application, please do not hesitate to contact me at (512) 264-9124.

Sincerely,

Bret W. Fenner, P.E.

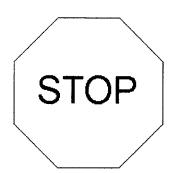
B & D Environmental, Inc.

Enclosures

REGEUVEU DEC 3 0 2013







When you are filling out this application, you cannot go from one line to the next and fill it out correctly. You will need to complete some tables partially and come back to them later in the process.

Therefore, it is important that you follow the instructions that accompany this application. They are designed to give you a step-by-step process for completing the application.



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APPLICATION FOR A RATE/TARIFF CHANGE

SECTION IA - GENERAL INFORMATION **Applicant** North Orange Water & Sewer LLC (Individual, Corporation, or Other Legal Entity) Utility Name: Longford Place Water System (If different than above) Legal form of Application: Individual **Partnership Sub Chapter-S Corporation** Corporation Provide Charter Number 0704601622 Other Please Explain: **Utility Address:** 10404 N. Highway 87, Suite 102 Orange **Texas** 77632-0525 Street Address or Location City State Zip Code County(ies) where services are provided: Orange CCN Number(s): 11511 & 20548 Contact Person: Bret W. Fenner, P.E. Telephone Number: (512) 264-9124

If the applicant is a corporation, please provide a copy of the corporation's "Certificate of Account Status" (regarding the payment of franchise taxes) from the State Comptroller's Office. This "Certificate of Account Status" can be obtained from the website at: (See Attachment A)

Austin

City

Comptroller of Public Accounts, Office Management "1 P. O. Box 13528 Austin, Texas 78711 1-800-252-5555



78750

Zip Code

Fax Number: (512) 692-1967

Texas

State

UTILITIES & DISTRICTS SECTION

1. https://ourcpa.cpa.state.tx.us/coa/Index.html

P.O. Box 500264

Street Address or Location

Position: Engineer

Address:

SECTION II A. How often and on what dates a		EOUS INFORMATION read? Last week of the mon	
B. When bills are typically sent or	it? Last week of the n	nonth	
C. Do you serve customers within If yes, which municipalities?		a municipality? If No, Go to D.	Yes <u>X</u> No
Have you filed a request to change r If no, please explain:	rates with the municipal	ity? Yes _ X No	
D. Are you currently collecting the	Regulatory Assessment	Fee from your customers?	_X Yes No
If yes, are you current in your payme Environmental Quality or the predect beginning January 1, 1992? <u>X</u>	essor agency, Texas Wa	ssessment Fee to the Texas Com ater Commission, for assessmen	nmission on ts payable
E. Water Utilities: Please indicate the	ne Public Water System	Identification numbers for each	of your systems:
System Name	TCEQ	County	Rate Increase
Longford Place Water System	PWS ID # 1810015	Orange	Applicable? Yes

For each of the systems, please provide a copy of the most recent public water system annual inspection report letter from the Texas Commission on Environmental Quality and a written explanation detailing how and when you will comply with all noted deficiencies. (See Attachment B)

F. Sewer Utilities: Please indicate the discharge permit number for each Wastewater Treatment Plant you operate:

Wastewater Treatment Plant Name	TCEQ Discharge Permit Number	County	Rate Increase Applicable?
Longford Place Treatment Facility	WQ0011155001	Orange	Yes

For each of the plants, please provide a copy of the most recent inspection report letter from the Texas Commission on Environmental Quality and a written explanation detailing how and when you will comply with all noted deficiencies. (See Attachment B)

INFORMATION REQUIRED FOR A WATER RATE/TARIFF CHANGE



SECTION II: OPERATIONAL INFORMATION – WATER

Manage	er (or owner if ser	vices are rou	tinely provid	ed to	the utility)	
	Bobby Manshac	k			Relationship to Owner:	Director
	description:					
Manage complia	s utility, financiance with TCEQ	al decisions, standards.	contract rel	ation	s; plans improvements, o	deals with regulatory issues and
Approxi	mate number of h	ours per wee	k this person	work	s for the company: 20	
Salary:	\$ 450	Hourly	Weekly	X	Monthly Annual	
-						-
Employ	ees					
Name	Cammie Vincent				Relationship to Owner:	Director
Short job	description:				•	
complian	ice response and c	orresponde	nce with gov	ernm	ent agencies.	bookkeeping, regulatory and
Salary		ours per wee	K this person	work	s for the company: 20	
Salary.	\$ 303	_ Hourly	weekiy	<u>X</u>	Monthly Annual	
-	Susan Vincent description:				Relationship to Owner:	In-Law
		1 '11'			provides bookkeeping.	
Approxir	nate number of he	ours per wee	k this person	work	s for the company: 40 Monthly Annual	
Name	Buford Moone	У			Relationship to Owner:	None
	description:		· · · · · · · · · · · · · · · · · · ·	, , , , , , , , ,		
utility.	operator for wa	iter utility; (conducts dai	ly ch	ecks and provides minor	repairs and maintenance for
Approxin	nate number of ho	ours per weel	k this person	work	s for the company: 20	
Amount 1	paid for services:	\$ 365	Hourly	7	Veekly X Monthly	Annual
•	•					7 Militari
Please pr	rovide the names	and classifi	cation of the	utili	ty's certified operators:	
Cer	tified Operator's	Name/ Class	ification			Name/Classification
Buford	l Mooney / Class	C Water; Cla	ass C Sewer	1		
	•				· · · · · · · · · · · · · · · · · · ·	

-Attach additional sheet(s) if necessary-



SECTION III. PLANT & EQUIPMENT INFORMATION – WATER

A. CUSTOMER CONTRIBUTIONS

If any of the items included in your plant and equipment were 100% financed with customer contributions, assessments, surcharges, extension fees, etc., you may not include depreciation or return on those items in your cost of service. However, if those customer contributions did not cover the entire cost of the asset, you may include the amount that the utility paid for. Please list below all items that were funded either all or in part by customer contributions and indicate amount that the customers contributed for each item.

Table III. A.

Item [A]	Date of installation [B]	Total Cost [C]	Amount of Customer Contribution [D]	Difference [E]=[C] - [D]
None				(1)
				1
				1
				1
				(1)

⁻ Attach additional sheet(s) if necessary –

1 If any amount in this column is greater than zero, enter that item in the appropriate category in Table III. B



ORIGINAL COST & DEPRECIATION SCHEDULE - WATER B.

supporting this information with invoices or other documentation. Round your figures to the nearest dollar. Amounts should be computed as of the end of Please provide the following inventory of the water utility plant being used to provide water service at the end of the test year. You will be responsible for (See Attachment C) the "test year."

Net Book Value $[G] = [D] \cdot [F]$ (7)Accumulated Depreciation [E] = [D]/[C]Annual **⊛** Table III. B. Years in Service YR Mos Days Life (yrs) when installed Original Cost Service \Box n/a 50 10 10 50 10 50 20 10 15 10 S S Installation Date Of [B] Meters and Service (taps not covered by fees) Distribution System (mains and lines) Greater than 5 hp Greater than 5 hp Heavy Equipment Office Equipment Pressure Tanks Storage Tanks Chlorinators 5 hp or less 5 hp or less Shop Tools Vehicles Fencing Masonry Wells Wood Item Land Total [A]Other: (Please list) Booster Pumps: Well Pumps: Structures:

* TCEQ Suggested Service Life ** Other Service Life (D) (a) Enter this number in Table VI. A., Line [O], Column(1) (a) If [F] is greater than [D], enter the total for [D] (a) Enter this number in Table IV. E., Line [A] - Attach additional sheet(s) if necessary -

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C. **DEVELOPER CONTRIBUTIONS - WATER**

If any of the Items listed in the Depreciation Schedule were contributed by a developer, please list those items and the associated cost below.

Table III. C.

Item	Date of installation or Contribution	Total Cost	Amount of Developer Contribution	Net Book Value (from Table III.B.)
None				
Total				(1)

1 Insert this amount in Table IV. E., Line [E] - Attach additional sheet(s) if necessary -

Sl	ECTION IV - LONG TERM DEBT & EQUITY INFORMATION – WATER
A.	EQUITY How much equity or total capital does the company have in the utility? \$ 38,311 Enter also in Table IV. D., Box 3 below
В.	RATE OF RETURN What rate of return (profit) on investment in plant (equity) is expected? Enter also in Table IV. D., Box 4 below 11.00 %
NOT	E: You may choose
•	an average equity return established by the staff each year and included with the Annual Report Instructions OR
•	an interest rate that you think is fair that is less than the rate established by the staff OR to use the Rate of Return Worksheet which is attached to the Instructions .
C.	BANKRUPTCY
I	Has the utility or utility owner filed bankruptcy within the last seven years? Yes X No If YES, explain status of applicant at this time.
	DECEMBER
	KEUE IV FIN
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D. NOTES PAYABLE - WATER

List the following information concerning debt and equity of the utility and attach copies of notes payable:

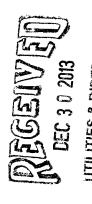
Round all percentages to two (2) decimal places.

Table IV. D.

			T T T T T T T T T			
[A]	[B]	[C]	[D] Original Amount	[E] Outstanding or	[F]	[9]
	Date of Issue	Date of	of Loan	Unpaid Balance-	Interest Rate	Weighted Average
Name of		Maturity		End of Test Year		(F] +(5)*(F)
Bank/Lender		•				
Part 1 - Debt						
Compass Bank LOC	11/15/2009	N/A	\$ 85,000	\$ 5.372*	%5.9	% 02 0
MCT 052 LOC	4/18/2008	N/A	\$ 60,000	\$ 6,485*	10.3 %	1.33 %
			\$	\$	%	%
			\$	8	%	%
		Total	\$ 145,000 (1) \$	\$ 11,857(2)		2.03 %(6)
	Part 2 - Investment/Equity	nent/Equity		\$ 38.311(3)	11.00 %@	8.40 %
	Total Debt & Equity	& Equity		\$ 50,1685		
				Rate of Return	etum	10.42%

*All loans are allocated to Longford Place's total debt for water facilities based on a percentage of net book value of each versus total net book value of all facilities of North Orange Water and Sewer (See Attachment D for calculation).

- (1) Total amount of original loans
- (2) Total amount of the outstanding balance on the loans
 - (3) Equity in the utility From Section IV. A.
 - (4) Return on Equity From Section IV. B.
 - \bigcirc Total of \bigcirc + \bigcirc
- (6) Total weighted average of debt To Table V, Line [C]
 - ② Weighted average of Investment/Equity (3)÷ ⑤*(4)
 - Sum of 6+ Ø To Table IV. E., Line [G]



E. INVESTED CAPITAL & RETURN - WATER

Table IV. E.

Net Book Value - From Table III. B., Box (3)		50,168
Working cash allowance -Amount From Table VI. A., Line [L] Column ③ , Box ⑦(÷®)	[B]	\$ 5,190
Materials and supplies	[C]	\$ 0
Subtotal - Sum of [A] thru [C]	[D]	\$ 55,358
Developer Contributions - From Table III. C., Box 1	[E]	\$ 0
Total invested capital [D] - [E]	[F]	\$ 55,358
Rate of return - From Table IV. D., Box ®	[G]	10.43%
Return/Interest - If [F] is greater than -0-, then enter [F] * [G]. If [F] is less than -0-, enter -0 Enter this amount in Table V., Line [A] and Table VI. A., Line [Q], Column (2)	[H]	\$ 5,774

SECTION V - INCOME TAX CALCULATION - WATER

Use the following table to determine the amount of income tax that can be included in your revenue requirement.

Table V.

Return - From Table IV. E., Line [H]	[A]	\$ 5,774
Interest Calculation		
Total Invested Capital - From Table IV. E., Line [F]	[B]	\$ 55,358
Weighted Cost of Debt Capital - Percentage From Table IV. D., Box 6	[C]	2.03 %
Interest [B]*[C]	[D]	\$ 1,124
Taxable Income [A] - [D]	[E]	\$ 4,650
Enter Income Tax from Tax Table (Appendix A)	[F]	\$ 882 (1)

1)To Table VI. A., Line [P], Column (2)

REGETVEND
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SECTION VI - UTILITY INCOME & EXPENSE INFORMATION – WATER

A REVENUE REQUIREMENT

Please provide the following information regarding the cost to the utility of providing water utility service over your selected twelve month "test year." Note 1 - Instead of using the percentages listed, you may take the Total Cost and multiply it by 67% to determine the fixed portion and 33% for the variable portion.

		TOTAL A TOTAL	[• 7.8 •				
01/01/12 to 12/31/12	Line	12 Month	Known and	Revenue	% of (3)	Fixed Expenses	Variable
		test,	Measurable	Requirement	that is	(Note1)	Expenses
	,	year" per	Changes	for next yr	fixed		(Note 1)
		books			(Note 1)		,
		<u>(1)</u>	(S)	3=(1)+(2)	4	S=(3)*(4)/100	6=3- 5
Salaries and Wages	[A]	16,395	0	16,395	50	8.198	8.197
Contract Labor	[B]	2,825	0	2,825	06	2.543	282
Purchased Water	[C]	0	0	0	0	0	0
Chemicals for Treatment	[D]	1,076	0	1,076	0	0	1.076
Utilities (Electricity)	[E]	3,817	0	3,817	0	0	3,817
Repairs/Maintenance/Supplies	E	8,081	0	8,081	50	4,041	4,040
Office Expenses	[G]	2,868	0	2,868	50	1,434	1,434
Accounting & Legal Fees	H	1,478	0	1,478	100	1,478	0
Insurance	Ε	59	0	59	100	59	0
Rate Case Expense	[J]	0	2,000	2,000	100	2,000	0
Miscellaneous	$\overline{\lambda}$	2,919	0	2,919	50	1,460	1,459
Subtotal-Sum of Line [Al thru Line [K]	<u> </u>	39,518	2,000	41,518 ②		21,213	20,305
Payroll Taxes	[M]	2,314	0	2,314	50	1.157	1.157
Property and Other Taxes	Z	1,299	0	1,299	100	1,299	0
Annual Depreciation and Amortization-From Table III. B. Box (1)	[0]	1,803	1,350	3,153	100	3,153	0
Income Taxes-From Table V , Line [F]	[P]		882	882	100	882	0
Return -From Table IV.E., Line[H]	<u>0</u>		5,774	5,774	100	5.774	0
Subtotal-Sum of Line [L] thru Line [Q]	[R]	44,934	10,006	54,940		33,478	21.462
	[S]	442	0	442	100	442	0
Total Cost=Line [R] – Line [S]	[T]	44,492	10,006	54,498 ®		33,036 @	21,462 ®
Alternative Allocation between Fixed and Variable [Note1]	5			S4.498 ®	22	36 51.4 @	17 004



B. KNOWN & MEASURABLE

If you listed anything in **TABLE VI**. A. above as an increase/decrease expected in the next 12 months, please provide a short explanation by item why there will be a change and how you projected the cost. Changes in cost must be known and measurable and supported by invoices or other documentation.

(See Attachment D)	

-Attach additional sheet(s) or a separate listing for sewer service if necessary-

SECTION VII - CUSTOMER INFORMATION - WATER

NUMBER OF CUSTOMERS

How many customers (active connections) did you have at the beginning and at the end of the twelve month test year?

TABLE VII

Connection Type	Line	Beginning of period	End of period	Equivalency Factor	Equivalents 4=2*3
Non-Metered Connections:					
Residential	[A]			1	
Commercial	[B]			1	
Standby	[C]			1	
Metered Connections:					
5/8" x 3/4"	[D]	100	100	1	100
3/4"	[E]			1.5	
1"	[F]			2.5	
11/2"	[G]			5	
2"	[H]			8	
3"	[I]			15	
Other:	[J]				
Total	[K]	100	100		100 ⑤

To Table IX. B., Line [B] AND Table X. A., Line [F]



SECTION VIII - PRODUCTION & CONSUMPTIONINFORMATION - WATER

Please provide the following information regarding water utility operations over your selected twelve month "test year".

Table VIII

Total number of gallons pumped (total master meter reading for the year)	[A]	7,395,000	gallons
Total number of gallons purchased from another source for sale to customers (if any)	[B]	0	gallons
Total number of gallons provided to customers [C]=[A]+[B]	[C]	7,395,000	gallons
Total number of gallons billed to your customers (total customer consumption)	[D]	6,210,000(1)	gallons
System losses: ([C] - [D]) $\times 100\% = [E]$	[E]	16.02	%
[C]			
Source of Purchased water			

1 To Table IX. A., Line [B] AND Table X. A., Line [B]



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SECTION IX - RATE DESIGN - WATER

VARIABLE RATE CALCULATIONS Ą.

Table IX. A.

	Line		Instructions
Total Variable Costs	[V]	[A] \$ 17,984	From Table VI. A., Line [T], Box @ or Line [U], Box @
stomers	[B]	[B] 6,210,000	From Table VIII, Line [B]
Total # of 1,000 Gallons billed	[c]	6,210	Divide Line [B] by 1,000
Variable Cost per 1,000 gallons	[D]	\$ 2.90	Divide Line [A] by Line [C] Transfer to Table IX. B., Lines [E] through [J], Box (6)

BASE RATE CALCULATIONS m

	lad	l able IX. B.						
		Line			# of 1000	Variable	Variable	Total base
					gallons	cost ber	cost to be	rate per
		•			in base	1,000 gals	added to	meter size
					bill		base rate	
			(1)	((2)	(8)	(4)=(2)*(3)	$\mathfrak{S} = (1) + (4)$
Total fixed costs - From Table VI. A., Line [T], Box @ or Line [U]	A., Line [T], Box @ or Line [U], Box @	[A]	8	36,514))
Total meter equivalents at end of test year - From Table VII, Line	t year - From Table VII, Line [K], Box ⑤	[B]		100				
Base charge per meter equivalent or for each unmetered connection and then divide by 12	for each unmetered connection [A] +[B]	[2]	€9	30.43				
Base charge per meter size								
5/8" x 3/4" or unmetered	Multiply [C] by 1					9		
3/4"	Multiply [C] by 1.5	E E				9		
1"	Multiply [C] by 2.5	E				9		
11/2"	Multiply [C] by 5.0	[5]				(e)		
2"	Multiply [C] by 8.0	E				(
3"	Multiply [C] by 15.0	E				9		
Other:						9		
				-)		

(6) From Table IX. A., Line [D]



UTILITIES & DISTRICTS
SECTION

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SECTION X - ALTERNATE METHOD OF RATE DESIGN - WATER

After you have performed the calculations in SECTION IX, you may find that the cost per 1,000 gallons is not what you think your customers will approve. If that is the case, then the following will allow you to calculate a rate structure that still recovers your revenue requirement, but with rates that you think may be more appropriate for your customers.

Table X. A.

		1 T 1 T A T A T A T A T A T A T A T A T	
	Line		
Cost per 1,000 gallons	[A]		2.95 This is the rate that you think is appropriate Enter in Table X .
			B., Column (3), Lines [B] through [H]
Total # of 1,000 Gallons billed	[B]	6,210	6,210 From Table IX. A., Line [C]
Total Cost to be recovered through gallonage charge	[c]	\$ 18,320	18,320 Multiply Line [A] times Line [B]
Total Revenue Requirement	[D]	\$ 54,498	54,498 From Table VI. A., Line [T] Box ®
Total to be recovered through base rate	[E]	\$ 36,178	36,178 Subtract Line [C] from Line [D]
Total number of meter equivalents	[F]	100	100 From Table VII, Line [K], Box ©
Base rate per meter equivalent	[G]	8	30.15 Divide Line [E] by Line [F] & then divide by 12months Enter
			this in Table X. B, Line [A] Column (1)

_		:
	Y	
ì	×	
,	٩	?
,	2	3
Ę	_	4

				able A. B	Š			
		Line			# of 1000	Variable cost	Variable cost	Total base bill
					gallons in base	per 1,000 gals	added to	per meter size
					bill		base	ı
				(1)	(2)	3	(4)=(2)*(3)	$\mathfrak{S} = (1) + (4)$
Base charge per meter equivalent or for each unmetered	ent or for each unmetered	[A]	S	30.15				
connection From Table X. A, Line [G]	Line [G]	7						
	Base rate per meter size							
5/8" x $3/4$ " or unmetered	Multiply [A] (1) by 1	[B]	S	30.15	0	\$ 2.95(6)	0	\$ 30.15
3/4"	Multiply [A] (1) by 1.0	[2]	S	30.15	0	\$ 2.95(6)	0	\$ 30.15
1"	Multiply [A] (1) by 2.5	<u>a</u>	S	75.38	0	\$ 2.95(6)	0	\$ 75.38
11/2"	Multiply [A] (1) by 5.0	ョ	8	150.75	0	\$ 2.95(6)	0	\$ 150.75
2"	Multiply [A] (1) by 8.0	(F)	S	241.20	0	\$ 2.95(6)	0	\$ 241.20
3"	Multiply [A] (1) by 15.0	[G]	\$	452.25	0	\$ 2.95(6)	0	\$ 452.25
Other: 4"	Multiply [A] (1) by 25.0	[H]	8	753.75	0	\$ 2.95(6)	0	\$ 753.75



INFORMATION REQUIRED FOR A SEWER RATE/TARIFF CHANGE



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SECTION II: OPERATIONAL INFORMATION – SEWER

	er (or owner if se Bobby Mansha		inely provid		•	,	o Owner	Dimostor
	b description:	ICR			_ ICIALIOI	isinp (o Owner.	Director
Manag			contract rela	ations	s; plans ir	npro	vements, d	eals with regulatory issues and
	imate number of l							
Salary:	\$ 450	_ Hourly	_ Weekly	<u>X</u>	Monthly		Annual	
Employ								
Name	Cammie Vince	nt			Relation	ship t	o Owner:	Director
Office 1	b description: manager; prepar nce response and						er service, l	oookkeeping, regulatory and
	imate number of l							
Salary:	\$ 365	_ Hourly	Weekly	<u>X</u>	Monthly		_ Annual	
Name	Susan Vincent				Relation	ship t	o Owner:	In-Law
	b description: strative assistant	4 1 *23*						
Approxi	imate number of l \$ 700	nours per week	this person	work	s for the c	compa	nny: 40	
Name	Buford Moone							
	b description: d operator for w	ater utility; c	onducts dai	ly ch	ecks and	provi	des minor	repairs and maintenance for
Approxi Amount	mate number of he paid for services	nours per week : \$365	this person Hourly	work W	s for the c eekly	ompa X	my: 20 Monthly	Annual
	provide the name	· · · · · · · · · · · · · · · · · · ·		e utili				
·	rtified Operator's				Cert	ified	Operator's	Name/Classification
Buford	Mooney / Class	C Water; Cla	ass C Sewer	<u> </u>				
				-	······		****	
								
	· · · · · · · · · · · · · · · · · · ·							

-Attach additional sheet(s) if necessary-



SECTION III. PLANT & EQUIPMENT INFORMATION – SEWER

A. CUSTOMER CONTRIBUTIONS

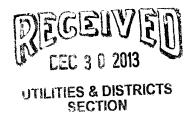
If any of the items included in your plant and equipment were 100% financed with customer contributions, assessments, surcharges, extension fees, etc., you may not include depreciation or return on those items in your cost of service. However, if those customer contributions did not cover the entire cost of the asset, you may include the amount that the utility paid for. Please list below all items that were funded either all or in part by customer contributions and indicate amount that the customers contributed for each item.

Table III. A.

Item	Date of	Total Cost	Amount of	Difference
[A]	installation	[C]	Customer	[E] = [C] - [D]
	[B]		Contribution	
			[D]	
None				1
				1
				1
				1

⁻ Attach additional sheet(s) if necessary –

1 If any amount in this column is greater than zero, enter that item in the appropriate category in Table III. B



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ORIGINAL COST & DEPRECIATION SCHEDULE - SEWER

similar list). You will be responsible for supporting this information with invoices or other documentation. Round your figures to the nearest dollar. Please provide the following inventory of the water utility plant being used to provide water service at the end of the test year (for sewer attach a Figures should be computed as of the end of the "test year." (See Attachment C)

Table III. B.

[A]	[B]					Del	Depreciation		
		Service Life	I ife				4		
	Date of	(yrs)	(1)	Original Cost	Years in	Years in Service	[E]= [7]/[C]	F	-[c] -[c] -[c]
Item	Installation	*	*	when installed (\$)	Yrs Mos	Days OOO	Annual (\$)	Accumulated 1 (\$)	Net Book Value
Land		n/a							9
Collection Sewers									
Gravity		50							
Force		50							
Pumping Equipment		2							
Treatment & Disposal Equipments		25							
Structures									
Wood		15					Approximate the second		
Masonry		30							
Plant Sewers		50							
Outfall sewer lines		50							
Laboratory Equipment		10							
Meters and Service (taps not covered by fees)	***	20							
Office Equipment		10							
Vehicles		S							
Shop Tools		15							
Heavy Equipment		10							
Fencing		20							
Other: (Please list)									
Total							(1)	(2)	(3)
	* TOFO Suggested Coming Life ** Other Comming Life	od Coming	J: I ou	** Other Com	is I if				

* TCEQ Suggested Service Life ** Other Service Life

(1) Enter this number in Table VI. A., Line [O], Column (1), (2) if [F] is greater than [D], enter the total for [D], (3) Enter this number in Table IV.E., Line [A]

(2) F. G. S. M. Line [O], Column (1), (2) if [F] is greater than [D], enter the total for [D], (3) Enter this number in Table IV.E., Line [A]

(3) F. G. S. M. Line [O], Column (1), (2) if [F] is greater than [D], enter the total for [D], (3) Enter this number in Table IV.E., Line [A]

UTILITIES & DIS FRAG & SECTION CEC 3 0 203

C. DEVELOPER CONTRIBUTIONS - SEWER

If any of the Items listed in the Depreciation Schedule were contributed by a developer, please list those items and the associated cost below.

Table III. C.

Item	Date of installation or Contribution	Total Cost	Amount of Developer Contribution	Net Book Value (from Table III.B.)
None				
Total				1)

1 Insert this amount in Table IV. E., Line [E]

- Attach additional sheet(s) if necessary - SECTION IV - LONG TERM DEBT & EQUITY INFORMATION - SEWER

How much equity or total capital does the company have in the utility? \$ 68,650 Enter also in **Table IV. D., Box** (3) below

B. RATE OF RETURN

What rate of return (profit) on investment in plant (equity) is expected? ______ %
Enter also in **Table IV. D., Box (4)** below

NOTE: You may choose

- an average equity return established by the staff each year and included with the Annual Report Instructions **OR**
- an interest rate that you think is fair that is less than the rate established by the staff **OR**
- to use the Rate of Return Worksheet which is attached to the Instructions.

C. BANKRUPTCY

Has the utility or utility owner filed bankruptcy within the last seven years?	Yes	X	No	
If YES, explain status of applicant at this time.				



DEBT & EQUITY - SEWER Ö.

List the following information concerning debt and equity of the utility and attach copies of notes payable:

Round all percentages to two (2) decimal places.

Table IV. D. SEWER

[A]	[B]	[c]	[D]	[<u>E</u>]		[F]	[6]
		,	Original Amount of	Outstanding or	ng or	1	
	Date of Issue	Date of	Loan	Unpaid Balance-	lance-	Interest	Weighted Average
Name of		Maturity		End of Test Year	it Year	Rate	E O*FF
Bank/Lender		•					
Part 1 - Debt							
Compass Bank LOC	11/15/2009	N/A	\$ 85,000	\$	9,633*	%05'9	0.70 %
MCT 052 LOC	4/18/2008	N/A	000'09	8	11,628*	10.30 %	1.33 %
			\$	\$		%	%
			\$	\$		%	%
			\$	\$		%	%
		Total	\$ 145,000 (1)	S	21,261(2)		2.03 %(6)
		Part 2 - Investment/Equity	ent/Equity \$	(8) 059/89	11	11.00 %(4)	8.40 %
		Total Debi	Debt & Equity \$	89,911 ⑤			
					Rate	Rate of Return	10.43 %®

*All loans are allocated to Longford Place's total debt for sewer facilities based on a percentage of net book value of each versus total net book value of all facilities of North Orange Water and Sewer (See Attachment D for calculation).

- 1 Total amount of original loans
 2 Total amount of the outstanding balance on the loans
 3 Equity in the utility From Section IV. A.
- (4) Return on Equity From Section IV. B.
 - (3) Total of (2)+(3)
- (6) Total weighted average of debt To **Table V**, Line [C] Weighted average of Investment/Equity (3)+(5)*(4)
- Sum of 6 + ∅ To Table IV. E., Line [G]



INVESTED CAPITAL & RETURN - SEWER Ŧ

Table IV. E.

Net Book Value - From Table III. B., Box (3) [A] \$	89,911
Working cash allowance - (Amount From Table VI. A., Line [L] Column (3), Box $\mathbb{O}(\div 8)$ [B] \$	6,490
Materials and supplies [C] \$	0
Subtotal - Sum of [A] thru [C] [D] \$	96,401
Developer Contributions - From Table III. C., Box (1) [E] \$	0
Total invested capital [D] - [E] [F] \$	96,401
Rate of return - From Table IV. D., Box ® [G]	10.43 %
Return/Interest - If [F] is greater than -0-, then enter [F] * [G]. If [F] is less than -0-, enter -0 [H] \$	10,055
Enter this amount in Table V., Line [A] and Table VI. A., Line [Q], Column (2)	

SECTION V - INCOME TAX CALCULATION - SEWER

Use the following table to determine the amount of income tax that can be included in your revenue requirement.

Table V.

1,500(1)	€	$[\mathrm{H}]$	Enter Income Tax from Tax Table (Appendix A) [F]
8,095	\$	[E]	Taxable Income [A] - [D]
1,960	8	[a]	Interest [B]*[C]
2.03 %		[c]	Weighted Cost of Debt Capital - Percentage From Table IV. D., Box (6)
96,401	\$	[B]	Total Invested Capital - From Table IV. E., Line [F] [B]
			Interest Calculation
10,055	\$	[Y]	Return - From Table IV. E., Line [H] [A] \$

(1)To Table VI. A., Line [P], Column (2)



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SECTION VI - UTILITY INCOME & EXPENSE INFORMATION – SEWER

A REVENUE REQUIREMENT

Please provide the following information regarding the cost to the utility of providing sewer utility service over your selected twelve month "test year." Note 1 - Instead of using the percentages listed, you may take the Total Cost and multiply it by 67% to determine the fixed portion and 33% for the

TABLE VI. A. variable portion.

es Variable	_	(Note 1)	-	00 (e)=(3)-(g)	\vdash	345	2,739	1,315	4,666	4,939	1,753	0	0	0	1,221	26,997	1,414	0	0	0	
Fixed Expenses	(Note1)			(5=(3)*(4)/100	10,019	3,108	0	0	0	4,939	1,753	1,806	73	2,000	1,221	24,919	1,415	1,588	3,132	1,500	`
% of (3)	that is	fixed	(Note 1)	4	50	06	0	0	0	50	50	100	100	100	50		50	100	100	100	_
Revenue	Requirement	for next yr		3=(1)+(2)	20,038	3,453	2,739	1,315	4,666	9,878	3,506	1,806	73	2,000	2,442	51,916 ②	2,829	1,588	3,132	1,500	
Known and	Measurable	Changes		(2)	0	0	0	0	0	0	0	0	0	2,000	0	2,000	0	0	(100)	1,500	
12 Month	"test	year" per	books	(1)	20,038	3,453	2,739	1,315	4,666	9,878	3,506	1,806	73	0	2,442	49,916	2,829	1,588	3,232		
Line					[A]	[B]	[C]	[a]	[E]	[F]	[G]	[H]		[J]	[K]	[1]	[M]	[N	[0]	[P]	
to 12/31/12					nd Wages	st Labor	Hauling	or Treatment	Electricity)	mance/Supplies	:xpenses	& Legal Fees	ance	Expense	aneous	ne [Al thru Line [K]	Taxes	Other Taxes	Annual Depreciation and Amortization-From Table III. B. Box (1)	Table V, Line [F]	
Test Year 01/01/12					Salaries and Wages	Contract Labor	Sludge Hauling	Chemicals for Treatment	Utilities (Electricity)	Repairs/Maintenance/Supplies	Office Expenses	Accounting & Legal Fees	Insurance	Rate Case Expense	Miscellaneous	Subtotal-Sum of Line [Al thru Line [K]	Payroll Taxes	Property and Other Taxes	preciation and Amortiza	Income Taxes-From Table V, Line [F]	

Divide this amount by 8 and enter the result in Table IV. E., Line [B], To Table X. A., Line [D] To Table IX. B., Line [A] To Table IX. A., Line [A]

28,411 ® 23,291 ®

୭|୭

42,167

442

001

442

71,020

13,455

57,565

 $\mathbb{Z}\mathbb{Z}\mathbb{E}$

Subtotal-Sum of Line [L] thru Line [Q]

Other Revenues

*2*9

@

70,578

13,455

442 57,123

5

Alternative Allocation between Fixed and Variable [Note1]

Total Cost=Line [R] - Line [S]

28,411

42,609



B. KNOWN & MEASURABLE

If you listed anything in **TABLE VI. A.** above as an increase/decrease expected in the next 12 months, please provide a short explanation by item why there will be a change and how you projected the cost. Changes in cost must be known and measurable and supported by invoices or other documentation.

(See Attachment D)		

-Attach additional sheet(s) or a separate listing for sewer service if necessary-

SECTION VII - CUSTOMER INFORMATION – SEWER NUMBER OF CUSTOMERS

How many customers (active connections) did you have at the beginning and at the end of the twelve month test year?

TABLE VII

Connection Type	Line	Beginning of	End of period	Equivalency	Meter
		period	2	Factor	Equivalents
		1		3	4=2*3
Non-Metered Connections:					
Residential	[A]			1	
Commercial	[B]			1	
Standby	[C]			1	
Metered Connections:					
5/8" x 3/4"	[D]	100	100	1	100
3/4"	[E]			1.5	
1"	[F]			2.5	
11/2"	[G]			5	
2"	[H]			8	
3"	[I]			15	
Other:	[J]				
Total	[K]	100	100		100 ⑤

To Table IX. B., Line [B] AND Table X. A., Line [F]



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SECTION VIII - TREATMENT INFORMATION - SEWER

Please provide the following information regarding sewer utility operations over your selected twelve month "test year".

Table VIII

Total number of gallons treated (total master meter reading for the year) [A] 5,919,996 gallons Total number of gallons treated by another source for sale to customers (if any) [B] [C] 5,919,996 (1) gallons Total number of gallons treated [C]=[A]+[B] [C] 5,919,996 (1) gallons Source of Purchased Treatment				
her source for sale to customers (if any) [B] 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Total number of gallons treated (total master meter reading for the year)	[A]	5,919,996	
number of gallons treated [C]=[A]+[B] [C] 5,919,996 (1) Source of Purchased Treatment	Total number of gallons treated by another source for sale to customers (if any)		0	gallons
Source of Purchased Treatment	Total number of gallons treated [C]=[A]+[B]	ည	5,919,996 (1)	gallons
	Source of Purchased Treatment			

(1) To Table IX. A., Line [B] and Table X. A., Line [B]



SECTION IX - RATE DESIGN - SEWER

A. VARIABLE RATE CALCULATIONS

Table IX. A.

	Line		Instructions
Total Variable Costs	[A]	\$ 23,291	From Table VI. A., Line [T], Box ® or Line [U], Box
Total # of Gallons Treated	[B]		From Table VIII, Line [B]
Total # of 1,000 Gallons Treated	[C]	5,920	Divide Line [B] by 1,000
Variable Cost per 1,000 gallons	[D]	\$ 3.93	Divide Line [A] by Line [C] Transfer to Table IX. B.,

B. BASE RATE CALCULATIONS

Table IX. B.

	1 adio	CIA.	D.		
	Line			# of 1000	Variable
				gallons in	cost per
				base bill	1,000 gals
			1	2	3
Total fixed costs - From Table VI. A., Line [T], Box @	[A]	\$	47,287		
Total meter equivalents at end of test year - From Table VII,	[B]		100		
Line [K], Box S					
Base charge per meter equivalent or for each unmetered	[C]	\$	39.40		
connection [A]÷[B] and then divide by 12				<u>, </u>	Ĺ

Base charge per meter size

5/8" x 3/4" or unmetered	Multiply [C] by 1	[D]	6
3/4"	Multiply [C] by 1.5	[E]	6,
1"	Multiply [C] by 2.5	[F]	<u> </u>
1 1/2"	Multiply [C] by 5.0	[G]	<u>(6)</u>
2"	Multiply [C] by 8.0	[H]	6
3"	Multiply [C] by 15.0	[I]	6
Other:		[J]	(6)

6 From Table IX. A., Line [D]

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SECTION X - ALTERNATE METHOD OF RATE DESIGN - SEWER

After you have performed the calculations in SECTION IX, you may find that the cost per 1,000 gallons is not what you think your customers will approve. If that is the case, then the following will allow you to calculate a rate structure that still recovers your revenue requirement, but with rates that you think may be more appropriate for your customers.

Table X. A.

	Line			
Cost per 1,000 gallons	[A]	89	2.95	2.95 This is the rate that you think is appropriate
Total # of 1,000 Gallons billed	[B]		5,920	5,920 From Table IX. A., Line [C]
Total Cost to be recovered through gallonage charge	[C]	s	17,464	17,464 Multiply Line [A] times Line [B]
Total Revenue Requirement	[D]	\$	70,578	70,578 From Table VI. A., Line [T] ®
Total to be recovered through base rate	[E]	\$	53,114	53,114 Subtract Line [C] from Line [D]
Total number of meter Equivalents	[F]		100	100 From Table VII, Line [K], Box \$\mathbb{G}\$
Base rate per meter equivalent	[9]	\$	44.26	44.26 Divide Line [E] by Line [F] & then divide by 12months
				Enter this in Table X. B, Line [A] Column (1)

Table X. B.

			I and V. D.				
		Line		# of 1000	Variable	Variable cost	Total base
				gallons in base	cost per	added to base	bill per
				bill	1,000 gals		meter size
			(1)	(2)	(3)	4=2*3	$\mathfrak{S} = (1) + (4)$
Base charge per meter equivalent or for each unmeter	alent or for each unmetered	[A]	\$ 44.26				
connection From Table X. A, Line [G]	A, Line [G]	1				, ,,	
Base rate per meter size							
5/8" x $3/4$ " or unmetered	Multiply [A] (1) by 1	[B]	\$ 44.26	0	\$ 2.95(6)	0	\$ 44.26
3/4"	Multiply [A] (1) by 1.0	[2]	\$ 44.26	0	\$ 2.956	0	\$ 44.26
1"	Multiply [A] (1) by 2.5	[<u>a</u>]	\$ 110.65	0	\$ 2.95(6)	0	\$ 110.65
1 1/2"	Multiply [A] (1) by 5.0	Ξ	\$ 221.30	0	\$ 2.95(6)	0	\$ 221.30
2"	Multiply [A] (1) by 8.0	[F]	\$ 354.08	0	\$ 2.956	0	\$ 354.08
3"	Multiply [A] (1) by 15.0	[G]	06.699 \$	0	\$ 2.956	0	\$ 663.90
Other: 4"	Multiply [A] (1) by 25.0		\$ 1,106.50	0	\$ 2.95(6)	0	\$ 1,106.50
				1			

DEGENVEN

(6) From Table X. A., Line [A]

AFFIDAVIT WATER &/OR SEWER RATE/TARIFF CHANGE



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AFFIDAVIT

STATE OF TEXAS
COUNTY OF CRANGE
I, Bobby Wanshack being duly sworn, file this NOTICE OF PROPOSED RATE CHANGE as President.
(indicate relationship to Utility, that is, owner, member of partnership, title as officer of corporation, or other authorized representative of Utility); that, in such capacity, I am qualified and authorized to file and verify such NOTICE; and that all statements made and matters set forth herein are true and correct.
I further represent that a copy of the attached NOTICE was provided by
to each customer or other affected party on or about <u>Secember 31</u> , 20 (mail or hand delivery)
(Utility's Authorized Representative)
If the Affiant to this form is any person other than the sole owner, partner, officer of the Utility, or its attorney, a properly verified Power of Attorney must be enclosed.
SUBSCRIBED AND SWORN TO BEFORE ME, this the day of day of
LINDA MICHELE TURLEY Notary Public STATE OF TEXAS NOTARY PUBLIC IN AND FOR THE
My Comm. Exp. 03/28/2016 STATE OF TEXAS



MY COMMISSION EXPIRES 3-28.2014

NOTICE OF RATE/TARIFF CHANGE TO BE PROVIDED TO CUSTOMERS



NOTICE OF PROPOSED RATE CHANGE

North Orange Water & Sewer, LLC

11511 & 20548

Company Name

CCN Number

has submitted a rate change application to the Texas Commission on Environmental Quality (Commission). The proposed rates listed on the next page will apply to service received after the effective date provided below. If the Commission receives protests to the proposed increase from 10 percent of the ratepayers or from any affected municipality before the 91st day after the proposed effective date, a public hearing will be scheduled to determine if the proposed rates are reasonable. Protests should be mailed to:

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

UTILITIES & DISTRICTS
SECTION

DEC 3 0 2013

Unless protests are received from 10 percent of the ratepayers or the Commission staff requests a hearing, no hearing will be held and rates will be effective as proposed. Please read the following information carefully:

Longford Place Water & Sewer: PWS ID #1810015

Subdivisions or Systems Affected by Rate Change

10404 North Highway 87, Suite 102OrangeTexas77632(409) 746-9640Company AddressCityStateZipTelephone

\$ 23,451 December 31, 2013

Annual Revenue Increase Date Customer Notice Mailed

October 1, 2008 Last week of the month

Date of Last Rate Change Date Meters Typically Read

EFFECTIVE DATE OF PROPOSED INCREASE: March 3, 2014

Reason(s) for proposed Rate Change:

Allow the utility to generate enough revenue to cover those expenses that are reasonable and necessary to provide service to the ratepayers and allow the utility a reasonable opportunity to earn a reasonable return on its invested capital used and useful in rendering service to the public.

BILLING COMPARISON

Water

Proposed	10,000 gallons: 10,000 gallons:	\$ _ \$ _	49.81 /mo 59.65 /mo	_	30,000 gallons: 30,000 gallons:	\$ \$	92.81 /mo 118.65 /mo
<u>Sewer</u> Existing	10,000 gallons:	\$	71.29 /mo	Proposed	10.000 gallons:	\$	73 76 V/mo

The proposed rates will apply to all service rendered after the effective date and will be reflected on the bill you receive approximately 30 to 45 days after the effective date.

In the event that the application is set for hearing, the specific rates requested by the utility may be decreased or increased by order of the Commission. If the Commission orders a lower rate to be set, the utility may be ordered to refund or credit against future bills all sums collected during the pendency of the rate proceeding in excess of the rate finally ordered plus interest. You may inspect a copy of the rate change application at your utility's office or at the Commission's office at Park 35 - Building F, 12015 Park 35 Circle, Suite 3101, Austin, Texas, west side of IH-35, south of Yager Lane. Additional information about the application can be obtained by contacting the Utilities and Districts Section at 512/239-4691. Information about how you can participate in the rate setting process can be obtained by contacting the Public Interest Counsel at 512/239-6363.

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

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CURRENT	RATES				PROPO	SED RATES			
Monthly bas	e rate including		0	gallons	Monthly	base rate incl	uding	0	gallons
Meter Size:				-	Meter Si	ize:			
RESIDENT	IAL				RESIDI	ENTIAL			
"5/	8/or ³ /4"	\$		28.31	٤.	'5/8/or ³ / ₄ "	\$		30.15
	1"	\$		70.78		1"	\$		75.38
1	1/2"	\$		141.55		1 1/2"	\$		150.75
	2"	\$		226.48		2"	\$		241.20
	3"	\$		424.65		3"	\$		425.25
Other: 4"		\$		707.75	Other:	4"	\$		753.75
						6"	\$		1,507.50
						8"	\$		2,412.00
GALLONA	GE CHARGE:				GALLO	NAGE CHAI	RGE:		
\$ 2.15 minimum.	for each addition	al 1000	0 gallons	over the	\$ 2.95 minimur		dditional 1	000 gal	lons over the

MISCELLANEOUS FEES		MISCELLANEOUS FEES			
Tap Fee	\$ 600.00		Tap Fee	\$	600.00
Reconnect fee:			Reconnect fee:		
Non-payment			Non-payment		
(Maximum - \$25.00)	\$	25.00	(Maximum - \$25.00)	\$	25.00
Customer's Request	\$	50.00	Customer's Request	\$	50.00
Transfer Fee	\$	35.00	Transfer Fee	\$	35.00
			Late charge: (Indicate		
Late Charge		10 %	either \$5.00 or 10%)	\$	10 %
Returned Check Charge	\$	25.00	Returned Check Charge	\$	30.00
Deposit	\$	50.00	Deposit (Maximum		
			\$50.00)	\$	50.00
Meter test fee	\$	25.00	Meter test fee	\$	25.00

Regulatory Assessment of 1% is added to base rate and gallonage charges.

If applicable, list any bill payment assistance programs to low income Ratepayers.

None

Pass Through Provision:

For utilities subject to changes in cost imposed by any non-affiliated provider of purchased water or sewer or subject to the jurisdiction of any regional water authority, groundwater reduction plan and/or groundwater conservation district, these increases or decreases shall be passed through as an adjustment to customer rates according to the formula:

Adjusted Gallonage Rate (AG) = G + [B/(1-L)], Where:

AG = adjusted gallonage charge, rounded to nearest one cent;

G = approved gallonage charge, per 1,000 gallons;

B = change in fee (per 1,000 gallons);

L = water or sewer line loss for the preceding 12 months, not to exceed 0.15 (15 %)

UTILITIES & DISTIGN S SECTION

To implement or modify the pass through provision, the utility must comply with all notice and other requirements of 30 TAC 291.21 (h).

NOTICE OF F	PROPOSED	RATE CHANG	GE - SEWER (Con	t.)	Page 3			
CUR	RENT RATES		PROPOSED RATES					
Monthly base rate inclu	ding 0	gallons	Monthly base rate including 0 gallon					
Meter Size:	- 100		Meter Size:					
RESIDENTIAL			RESIDENTIAL					
5/8/or ³ / ₄ "	\$	41.79	5/8/or ³ / ₄ ''	\$	44.26			
1"	\$	104.48	1"	\$	110.65			
1 1/2	\$	208.95	1 1/2	\$	221.30			
2"	\$	334.32	2"	\$	354.08			
3"	\$	626.85	3"	\$	663.90			
Other: 4"	\$	1,044.75	Other: 4"	\$	1,106.50			
	\$		6''	\$	2,213.00			
	\$		8''	\$	3,540.80			
GALLO	NAGE CHAR	GE:	GALLONAGE CHARGE:					
\$ 2.95 for eac over the minimum	h additional 10	00 gallons	\$ 2.95 for each additional 1000 gallons over the minimum					
Gallonage charges are d consumption for winter following months: D	period which in	ncludes the	Gallonage charges are determined based on average consumption for winter period which includes the following months: December, January & February					

MISCELL	ANEOUS FEES		MISCELLANEOUS FEES			
Tap Fee	\$	600.00	Tap Fee	\$	600.00	
Reconnect fee:			Reconnect fee:			
Non-payment			Non-payment			
(Maximum - \$25.00)	\$	25.00 ·	(Maximum - \$25.00)	\$	25.00	
Customer's Request	\$	50.00	Customer's Request	\$	50.00	
Transfer Fee	\$	35.00	Transfer Fee	\$	35.00	
Late Charge		10 %	Late charge: (Indicate		10 %	
			either \$5.00 or 10%)			
Returned Check Charge	\$	25.00	Returned Check Charge	\$	30.00	
Deposit			Deposit			
	\$	50.00	(Maximum \$50.00)	\$	50.00	

Regulatory Assessment of 1% is added to base rate and gallonage charges.

If applicable, list any bill payment assistance programs to low income Ratepayers.

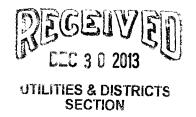
None



UTILITIES & DISTRICTS SECTION

WATER & SEWER

TARIFF PAGES



TCEQ-10423 (04/01/2013) Page 37 of 42

Longford Place Water & Sewer

(Water Utility Name)

Revision Date:

March 3, 2014

SECTION 1.0 -RATE SCHEDULE

Section 1.01 – Rates

Monthl	v base rat	e including	ncluding 0		gallons		
sale in the sale i							
	Meto	er Size:					
		Reside	ntial				
			5/8" or 3/4"	\$	30.15		
			1"	\$	75.38		
			1 1/2"	\$	150.75		
			2"	\$	241.20		
			3"	\$	452.25		
Other:	4"			\$	753.75		
	6"			\$	1,507.50		
	8"			\$	2,412.00		
		Gallona	ge Charge:	\$	2.95		

UTILITIES & DISTRICTS SECTION

for each additional 1000 gallons over the minimum.

Regulatory Assessment Fee

1%

A REGULATORY ASSESSMENT, EQUAL TO ONE PERCENT OF THE CHARGE FOR RETAIL WATER SERVICE ONLY, SHALL BE COLLECTED FROM EACH RETAIL CUSTOMER

Section 1.02 - Miscellaneous Fees

TAP FEE

600.00

TAP FEE IS BASED ON THE UTILITY'S ACTUAL COST FOR MATERIALS AND LABOR FOR STANDARD RESIDENTIAL CONNECTION OF %" X 34" METER.

RECONNECTION FEE

THE RECONNECT FEE WILL BE CHARGED BEFORE SERVICE CAN BE RESTORED TO A CUSTOMER WHO HAS BEE DISCONNECTED FOR THE FOLLOWING REASONS:

> Non payment of bill (Maximum \$25.00) a)

25.00 50.00

Customer's request Or other reasons listed under Section 20CF of this tariff

50.00

TRANSFER FEE

35.00

THE TRANSFER FEE WILL BE CHARGED FOR CHANGING AN ACCOUNT NAME AT THE SAME SERVICE LOCATION WHEN THE SERVICE IS NOT DISCONNECTED.

b)

LATE CHARGE (Not more than \$5.00 or 10%)(Indicate one)

10 %

A ONE TIME PENALTY MADE ON DELINQUENT BILLS BUT MAY NOT BE APPLIED TO ANY BALANCE TO WHICH THE PENALTY WAS APPLIED IN A PREVIOUS BILLING.

RETURNED CHECK CHARGE

30.00

CUSTOMER DEPOSIT (Maximum \$50)

50.00

METER TEST FEE (actual cost of testing the meter up to)

25.00

THIS FEE MAY BE CHARGED IF A CUSTOMER REQUESTS A SECOND METER TEST WITHIN A TWO YEAR PERIOD AND THE TEST INDICATES THAT THE METER IS RECORDING ACCURATELY

RATES LISTED ARE EFFECTIVE ONLY IF THIS PAGE HAS TCEO APPROVAL STAMP

(Water Utility Name)

-		•		-	4
ĸ	Q171	CL	nn		ate:
1.		31	UH	v	au.

March 3, 2014

SECTION 1.0 – RATE SCHEDULE (Conti.)

Pass Through Provision:

For utilities subject to changes in cost imposed by any non-affiliated provider of purchased water or sewer or subject to the jurisdiction of any regional water authority, groundwater reduction plan and/or groundwater conservation district, these increases or decreases shall be passed through as an adjustment to customer rates according to the formula:

Adjusted Gallonage Rate (AG) = G + [B/(1-L)], Where:

AG = adjusted gallonage charge, rounded to nearest one cent;

G = approved gallonage charge, per 1,000 gallons;

B = change in fee (per 1,000 gallons);

L = water or sewer line loss for the preceding 12 months, not to exceed 0.15 (15 %)

To implement or modify the pass through provision, the utility must comply with all notice and other requirements of 30 TAC 291.21 (h).

DEC 3 0 2013

UTILITIES & DISTRICTS
SECTION

North Orange Water & Sewer, LLC dba **Longford Place Water & Sewer**

Sewer Tariff Page No. 2

(Sewer Utility Name)

Revision Date:

March 3, 2014

SECTION 1.0 - RATE SCHEDULE

Monthl	y bas	e rate including	0	gallons
		Meter Size:		
		Reside	ntial	
			5/8" or ³ / ₄ "	\$ 44.26
			1"	\$ 110.65
			1 1/2"	\$ 221.30
			2"	\$ 354.08
			3"	\$ 663.90
Other:	4"		, , , , , , , , , , , , , , , , , , , ,	\$ 1,106.50
	6"			\$ 2,213.00
	8"			\$ 3,540.80
		Gallona	ge Charge:	\$ 2.95

UTILITIES & DISTRICTS SECTION

for each additional 1000 gallons over the minimum.

Regulatory Assessment Fee

A REGULATORY ASSESSMENT, EQUAL TO ONE PERCENT OF THE CHARGE FOR RETAIL WATER SERVICE ONLY, SHALL BE COLLECTED FROM EACH RETAIL CUSTOMER

Gallonage charges are determined based on average consumption for winter period which includes the following months: December, January and February

Section 1.02 - Miscellaneous Fees

TAP FEE

600.00

TAP FEE IS BASED ON THE UTILITY'S ACTUAL COST FOR MATERIALS AND LABOR FOR STANDARD RESIDENTIAL CONNECTION

RECONNECTION FEE

THE RECONNECT FEE WILL BE CHARGED BEFORE SERVICE CAN BE RESTORED TO A CUSTOMER WHO HAS BEE DISCONNECTED FOR THE FOLLOWING REASONS

a)	Non payment of bill (Maximum \$25.00)	\$
b)	Customer's request	\$

Or other reasons listed under Section 20CF of this tariff \$ 50.00

TRANSFER FEE

THE TRANSFER FEE WILL BE CHARGED FOR CHANGING AN ACCOUNT NAME AT THE SAME SERVICE LOCATION WHEN THE SERVICE IS NOT DISCONNECTED.

LATE CHARGE (Not more than \$5.00 or 10%)(Indicate one)

10%

25.00 50.00

A ONE TIME PENALTY MADE ON DELINQUENT BILLS BUT MAY NOT BE APPLIED TO ANY BALANCE TO WHICH THE PENALTY WAS APPLIED IN A PREVIOUS BILLING.

RETURNED CHECK CHARGE

30.00

CUSTOMER DEPOSIT (Maximum \$50)

50.00

RATES LISTED ARE EFFECTIVE ONLY IF THIS PAGE HAS TCEO APPROVAL STAMP

TCEQ-10423 (04/01/2013)

INCOME TAX TABLE

DEGELVEU EEC 3 0 2013 UTILITIES & DISTRICTS SECTION

If your T	AXABI	E INCO	ME from '	Γable V.	Line [E]	lis					
More	Less	The tax		Less	The tax	More	Less	The tax	More	Less	The tax is
0	501	88	25,000	25,501	4,500	50,000	50,501	10,166	75,000	75,501	21,091
500	1,001	176	25,500	26,001	4,588	50,500	51,001	10,333	75,500	76,001	21,349
1,000	1,501	265	26,000	26,501	4,676	51,000	51,501	10,500	76,000	76,501	21,606
1,500	2,001	353	26,500	27,001	4,765	51,500	52,001	10,666	76,500	77,001	21,864
2,000	2,501	441	27,000	27,501	4,853	52,000	52,501		77,000	77,501	22,121
2,500	3,001	529	27,500	28,001	4,941	52,500	53,001	11,000	77,500	78,001	22,410
3,000	3,501	618	28,000	28,501	5,029	53,000	53,501	11,166	78,000	78,501	22,730
3,500	4,001	706	28,500	29,001	5,118	53,500	54,001	11,333	78,500	79,001	23,049
4,000	4,501	794	29,000	29,501	5,206	54,000	54,501	11,500	79,000		23,370
4,500	5,001	882	29,500	30,001	5,294	54,500	55,001	11,666	79,500	80,001	23,689
5,000	5,501	971	30,000	30,501	5,382	55,000	55,501	11,833	80,000		24,008
5,500	6,001	1,059	30,500	31,001	5,471	55,500	56,001	12,000	80,500	81,001	24,328
6,000	6,501	1,147	31,000	31,501	5,559	56,000	56,501	12,166	81,000	81,501	24,648
6,500	7,001	1,235	31,500	32,001	5,647	56,500	57,001	12,333	81,500	82,001	24,967
7,000	7,501	1,324	32,000	32,501	5,735	57,000	57,501	12,500	82,000	82,501	25,287
7,500	8,001	1,412	32,500	33,001	5,824	57,500	58,001	12,666	82,500	83,001	25,607
8,000	8,501	1,500	33,000	33,501	5,912	58,000	58,501	12,833	83,000	83,501	25,926
8,500	9,001	1,588	33,500	34,001	6,000	58,500	59,001	13,000	83,500	84,001	26,246
9,000	9,501	1,676	34,000	34,501	6,088	59,000	59,501	13,166	84,000	84,501	26,566
	10,001	1,765	34,500	35,001	6,176	59,500	60,001	13,333	84,500	85,001	26,885
	10,501	1,853	35,000	35,501	6,265	60,000	60,501	13,500	85,000	85,501	27,205
	11,001	1,941	35,500	36,001	6,353	60,500	61,001	13,666	85,500	86,001	27,525
	11,501	2,029	36,000	36,501	6,441	61,000	61,501	13,879	86,000	86,501	27,844
	12,001	2,118	36,500	37,001	6,529	61,500	62,001	14,136	86,500	87,001	28,164
	12,501	2,206	37,000	37,501	6,618	62,000	62,501	14,394	87,000	87,501	28,484
		2,294	37,500	38,001	6,706	62,500	63,001	14,652	87,500	88,001	28,803
13,000		2,382	38,000	38,501	6,794	63,000	63,501	14,909	88,000	88,501	29,123
13,500		2,471	38,500	39,001	6,882	63,500	64,001	15,167	88,500	89,001	29,443
	14,501	2,559	39,000	39,501	6,971	64,000	64,501	15,424	89,000	89,501	29,762
	15,001	2,647	39,500	40,001	7,059	64,500	65,001	15,682	89,500	90,001	30,082
15,000	15,501	2,735	40,000	40,501	7,147	65,000	65,501	15,939	90,000	90,501	30,402
	16,001	2,824	40,500	41,001	7,235	65,500		16,197	90,500	91,001	30,721
16,000		2,912		41,501	7,324	66,000	66,501	16,455	91,000	91,501	31,041
16,500		3,000	41,500	42,001	7,412	66,500		16,712	91,500	92,001	31,361
17,000		3,088		42,501	7,500	67,000	67,501	16,970	92,000	92,501	31,680
17,500		3,176	42,500	43,001	7,666	67,500	68,001	17,227	92,500	93,001	32,000
18,000		3,265		43,501	7,833	68,000	68,501	17,485	93,000	93,501	32,320
18,500		3,353		44,001	8,000	68,500	69,001	17,742	93,500	94,001	32,639
19,000		3,441	44,000		8,166	69,000	69,501	18,000	94,000	94,501	32,959
19,500		3,529	44,500		8,333	69,500		18,258	94,500	95,001	33,279
20,000		3,618	45,000		8,500	70,000	70,501	18,515	95,000	95,501	33,598
	21,001	3,706		46,001	8,666	70,500	71,001	18,733	95,500	96,001	33,918
	21,501	3,794		46,501	8,833	71,000	71,501	19,030	96,000	96,501	34,238
	22,001	3,882		47,001	9,000			19,288	96,500	97,001	34,557
22,000		3,971		47,501	9,166	72,000		19,545	97,000	97,501	34,877
	23,001	4,059	47,500		9,333	72,500	73,001	19,803	97,500	98,001	35,197
		4,147		48,501	9,500	73,000		20,061	98,000	98,501	35,516
	24,001	4,235		49,001	9,666	73,500	74,001	20,318	98,500	99,001	35,836
		4,324		49,501	9,833			20,576	99,000	99,501	36,156
24,500	25,001	4,412	49,500	50,001	10,000	74,500	75,001	20.8 33	99,500		36,475
						D) 5 (C	VIII SI	11812			
						IN S	A SECTION OF	->UI			
TCEQ-10423 (04/01/2013)					U DE	3 0 20	13 Pa	nge 42 of 42		
							- 0 010				

ATTACHMENT A





Franchise Tax Account Status

As of: 12/03/2013 08:30:20 AM

This Page is Not Sufficient for Filings with the Secretary of State

NORTH ORANGE WATER & SEWER, LLC

Texas Taxpayer Number 17605922180

Mailing Address 10404 HIGHWAY 87 N STE 102

ORANGE, TX 77632-0525

Right to Transact Business ACTIVE

in Texas

State of Formation TX

Effective SOS Registration 01/14/1999

Date

Texas SOS File Number 0704601622

Registered Agent Name CAMMIE MANSHACK

Registered Office Street 10404 N. HWY 87, SUITE 102

Address ORANGE, TX 77632



ATTACHMENT B



Bryan W. Shaw, Ph.D., *Chairman*Buddy Garcia, *Commissioner*Carlos Rubinstein, *Commissioner*Mark R. Vickery, P.G., *Executive Director*



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

Protecting Texas by Reducing and Preventing Pollution

October 25, 2010

RECEIVED

APR 0 2 2012

TCEQ CENTRAL FILE ROOM

CERTIFIED MAIL {7008 1140 0002 4411 9921} RETURN RECEIPT REQUESTED

Mr. Bobby Manshack, President North Orange Water & Sewer LLC 10406 Highway 87 N Orange, Texas 77632-0578 DEC 3 0 2013

UTILITIES & DISTRICTS SECTION

Re:

Notice of Violation for the Public Water Supply Comprehensive Compliance Investigation at: Longford Place Water System, Oragne County, Texas PWS ID No.: 1810015, Investigation No.: 870939

Dear Mr. Manshack:

On September 30, 2010, Mr. Lance Simmons of the Texas Commission on Environmental Quality (TCEQ) Beaumont Region Office conducted an investigation of the above-referenced facility to evaluate compliance with applicable requirements for public water supply. Enclosed is a summary which lists the investigation findings. During the investigation, certain outstanding alleged violations were identified for which compliance documentation is required. Please submit to this office by **December 24, 2010**, a written description of corrective action taken and the required documentation demonstrating that compliance has been achieved for each of the outstanding alleged violations. Please note the attached Additional Issue.

In the listing of alleged violations, we have cited applicable requirements, including TCEQ rules. If you would like to obtain a copy of the applicable TCEQ rules, you may contact any of the sources listed in the enclosed brochure entitled "Obtaining TCEQ Rules."

The TCEQ appreciates your assistance in this matter. Please note that the Legislature has granted TCEQ enforcement powers which we may exercise to ensure compliance with environmental regulatory requirements. We anticipate that you will resolve the alleged violations as required in order to protect the State's environment. If you have additional information that we are unaware of, you have the opportunity to contest the violation(s) documented in this notice. Should you choose to do so, you must notify the Beaumont Region Office within 10 days from the date of this letter. At that time, Mr. Ronald Hebert Water Section Manager will schedule a violation review meeting to be conducted within 21 days from the date of this letter. However, please be advised that if you decide to participate in the violation review process, the TCEQ may still require you to adhere to the compliance schedule included in the attached Summary of Investigation Findings until an official decision is made regarding the status of any or all of the contested violations.

Mr. Bobby Manshack Page 2 October 25, 2010

If you or members of your staff have any questions, please feel free to contact Mr. Lance Simmons in the Beaumont Region Office at (409) 898-3838.

Sincerely,

Alexander Hinz \(\bigcup\) Water Section Work Leader Beaumont Region Office

AH/LS/bd

Enclosures:

Summary of Investigation Findings

Obtaining TCEQ Rules

REGETY EU

UTILITIES & DISTRICTS SECTION

Summary of Investigation Findings

LONGFORD PLACE WATER & SEWER

Investigation #870939

10406 HIGHWAY 87 N

Investigation Date: 09/30/2010

ORANGE, ORANGE COUNTY, TX 77632

Additional ID(s): 1810015

OUTSTANDING ALLEGED VIOLATION(S) ASSOCIATED TO A NOTICE OF VIOLATION

Track No: 414548 Compliance Due Date: 12/24/2010

30 TAC Chapter 290.46(s)(1)

Alleged Violation:

Investigation: 870939 Comment Date: 10/18/2010

Failure to conduct accuracy checks on well meters at Well numbers 1 & 2 within the last three years.

During the investigation, it was noted that the water system failed to conduct accuracy checks on the well meters at Well Numbers 1 & 2 within the last three years.

Well meters required by §290.41(c)(3)(N) of this title shall be calibrated at least once every three years.

Recommended Corrective Action: Conduct an accuracy check on the two well meters. If the percent error is greater than plus or minus five percent, the meter must be calibrated. Provide a copy of the accuracy check which must include the instrument used for the accuracy check, percent error, results and date. If the meter is calibrated, please submit a copy of the calibration certification. If replaced with a new meter, please send a copy of the purchase receipt and calibration certification from the manufacturer. Submit the required documentation to the Beaumont Region Office.

