

Control Number: 43971



Item Number: 15

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

Admin Review:	UFR	1.state	s\36736-R Hidden	villago i oz cz tal.		4397		
Utility Name:	Hidden Village POA, Inc.				Admi	n Review No.	R-043	-10
•				Application Nos.:			36736-R	
Deposit User Report: n/a								
		<u>Adminis</u>	trative Review	v - Rate - Wa	ter &/or S	<u>Sewer</u>		
Date received By Program Area: 6/8/2010			Effective Date:			8/3/2010		
Subdivisions:				Renoticed (Y/N): County(ies): Camp				N
				• • •			-	
Contact Person:	James Sobczak, President			CCN No(s):				1 (0 = 10
Address:		4105 Cross Bend Dr.			Total Gallons Billed:			1,627,10
	Arlington, TX 7016 7(00)			Total Gallons Treated:			n/a	11
	,			Customer Number:				11
				Test Year: CY 2009 Passthru application: N				
				Passtnru ap	pucation:	N		
	Current F	Rates - Flat R	ate		Proposed	Rates - Flat Ra	ate	
Residential	Gal Incl	Base Rate	Gal. Rate	Residential	Gal Incl	Base Rate	Gal. 1	Rate
5/8" x 3/4"				5/8" x 3/4"	Flat Rate	\$19.25		
3/4"				3/4"	Flat Rate	\$19.25		
1"	ļ			1"	Flat Rate	\$19.25		·
1 1/2"				1 1/2" 2"	Flat Rate Flat Rate	\$19.25 \$19.25		
2" 3"				3"	Flat Rate	\$19.25		
3				3	1 lat Rate	\$17.23	+	
Gallonage Charg	ge (tiered rate	s)		Gallonage C	harge			
					<u></u>		<u> </u>	
Regulatory Asses	semant Face D	aid (V/N):	n/a	Filing Fees	Paid - (Y/N):	N - Requested?	-Ser	
Annual Report C		n/a	11/ a	rining rees	(1/11).	TV = Requester		*******
Deficien		11/a					- j	沼
Deficien	icics.					35	ದು	ਹੁੰ
All Pages of App	lication Com	olete and Corre	ct- (Y/N): Y			24		凹
						SR	$\supseteq$	M
Deficiencies:							ဖ	Ü
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Applicant is apply	ying for a CCN	under Applicat	ion No. 36730-C	Comals Co	<u> </u>			ц
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								,
								ALC:
Notice Correct (Y/N): Y A			Annu	ial Rev. Increase (	Y N	In City Limits:		N
Customer Notice	. Datec	5/31/20	10	Other Deficien	ncies:			
Forms of Payme		Need		Ginei Denete				
Late Charge:		\$5.0	0					
Revenues Recom	puted:	Y		e of Return Reque	ested	0.00%		
Rejection Letter Date:				eptance Letter Da		06/17/1	0	
File Assignment								
File Assigned To	· Auditor:	Flores		Engineer:	Adhikari			

Date Admin Review Complete:

Elizabeth Flores

6/17/2010