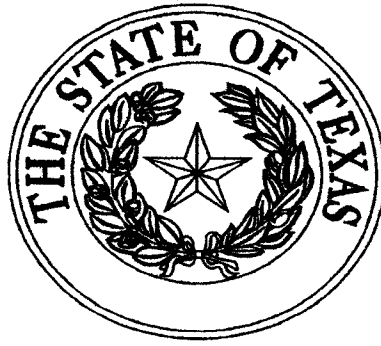


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**CLASS "C" WATER COMPANY  
PUC ANNUAL REPORT  
OF**

CCN Number

12309

Official Company Name:

FORT DAVIS ESTATES, INC.

D/B/A Name(s)

**TO THE  
PUBLIC UTILITY COMMISSION  
OF TEXAS**

***For the Year Ended*** \_\_\_\_\_

**2015**

109

# Annual Report for Class C Water and/or Sewer Utilities

PUBLIC UTILITY COMMISSION OF TEXAS  
1701 N. CONGRESS AVE., PO BOX 13326, AUSTIN, TX 78711-3326  
pursuant to TWC § 13.136

## I. NAME OF UTILITY, OFFICE MAILING ADDRESS AND AREA SERVED

1 Utility Name: FORT DAVIS ESTATES, INC.

List all assumed name(s) or d/b/a names: FORT DAVIS ESTATES

2 Certificate of Convenience and Necessity No. 1220015 Calendar Year Ending 2015

3 Street Address: 201 S Mosley Lane

4 City or Town: Alpine CCN No.: 12309

5 Email Address jean anne fort@yahoo.com

6 County: Jeff Davis Zip Code: 79830

7 TCEQ PWS Number(s) 1

8 Water Quality Discharge Permit Number(s) N/A

## II. TYPE OF ORGANIZATION AND PRINCIPAL OFFICERS

9 Type of Ownership:  
Corporation: Partnership: Individual: Other: x

10 If a corporation, list names and titles of the officers. If an individual or partnership, list the name of the individual or each partner and provide the title for each. For partnerships, please provide the percentage of ownership for each partner.

<u>Curtis Evans</u>	<u>President</u>
<u>Jean Anne Fort</u>	<u>VP, Secretary</u>

11 If the controlling ownership of this utility changed during the last twelve (12) months, state the date of ownership change and the name and address of the prior owner.

12 Date the utility was formed or incorporated: 16-Jun-86

13 Is the utility under common ownership or control by another corporation? NO If yes, by whom?

## III. PERSON TO CONTACT REGARDING THE INFORMATION SUPPLIED ON THESE FORMS

14 Name and Title: Jean Anne Fort

15 Address: 201 S Mosley Ln

16 City: Alpine

17 Telephone Number with Area Code: 432-837-5583

18 Cell Phone Number with Area Code: 432-294-0530

19 Fax Number with Area Code:

20 e-mail address: jean anne fort@yahoo.com

21 If not an officer, owner or employee, give name of firm employed by:

# 1. Balance Sheet

NA/Jan

Name of Utility: FORT DAVIS ESTATES, INC.

Line #	ASSETS	End of Year mm/dd/yyyy	End of Prior Year mm/dd/yyyy
	<u>UTILITY PLANT</u>		
1	101 Utility Plant in Service	12/31/2105	12/31/2014
2	TOTAL UTILITY PLANT		
3	108 Less: Accumulated Amortization	\$ -	\$ -
4	110 Less: Accumulated Depreciation		
5	NET UTILITY PLANT		
6	<u>CURRENT ASSETS</u>	xxxx	xxxx
7	131-135 Cash		
8	141-143 Accounts Receivable		
9	151 Plant Materials and Supplies (not previously expensed)		
10	171-174 Other Current Assets		
11	TOTAL CURRENT ASSETS		
12	<u>TOTAL ASSETS*</u>		

## LIABILITIES & EQUITY

### EQUITY

13	201 Common Stock	\$ -	\$ -
14	211 Other paid in capital	\$ -	\$ -
15	215 Retained Earnings	\$ -	
16	218 Proprietary Capital	\$ -	
17	TOTAL STOCKHOLDERS' EQUITY		

### LONG-TERM DEBT

18	224 Long-term debt (more than 1 year)	\$ -	\$ -
		xxxx	xxxx
		xxxx	xxxx

### CURRENT LIABILITIES (less than 1 year)

19	231 Accounts Payable		
20	232 Notes Payable	\$ -	\$ -
21	241.0 Other Current Liabilities		\$ -
	TOTAL CURRENT LIABILITIES		

### OTHER LIABILITIES and DEFERRED CREDITS

22	253 Other Deferred Credits	\$ -	
23	271-272 Net Contributions in Aid of Construction	\$ -	\$ -
24	TOTAL OTHER LIABILITIES and DEFERRED CREDITS	\$ -	
25	<u>TOTAL LIABILITIES &amp; EQUITY*</u>		

Add NARUC accounts as needed, and if not shown above.

## 2. Statements of Income

Name of Utility: Fort Davis Estates, Inc.

Line #	Report Calendar Year	2015	Water	Sewer	Total
			Report Year	Report Year	Report Year
			2015	2015	
			A	B	C=A+B
1	<b>Total Revenue:</b>		\$ 12,936	\$ -	\$ 12,936
	<b>Operating Expenses:</b>				
2	601 O & M Salaried Labor		\$ -	\$ -	\$ -
3	604 Employee Benefits		\$ -	\$ -	\$ -
4	631, 635, 636 O & M Contract labor		\$ 7,900	\$ -	\$ 7,900
5	620 Operating/Maint Supplies		\$ 373	\$ -	\$ 373
6	610 Purchased Water				
7	615 Purchased Power		\$ 1,502	\$ -	\$ 1,502
8	635 Testing Expense		\$ 70	\$ -	\$ 70
9	618 Chemicals				
10	656-659 Insurance				
11	601 General Office Salaries				
12	675 General Office Expenses		\$ 404		\$ 404
13	632 Contract Accounting		\$ 700	\$ -	\$ 700
14	633 Legal				
15	634 Management				
16	666 Amortization- Rate Case Expense				
17	403 Depreciation Expense				
18	667-675 Other Misc. Expenses				
	<b>Taxes:</b>		xxxx	xxxx	xxxx
19	409 Federal Income Taxes		\$ -	\$ -	\$ -
20	409.0 State Franchise Taxes/Reg Assess.		\$ 391	\$ -	\$ 391
21	408 All Other Taxes		\$ 400	\$ -	\$ 400
22	<b>Total Expenses</b>		\$ 11,740	\$ -	\$ 11,740
23	<b>Net Operating Income</b>		\$ 1,196	\$ -	\$ 1,196
24	421, 433 Non-Operating Income				
	<b>Non-Operating Deductions:</b>				
25	426 Other				
26	427 Interest				
27	<b>Net Income</b>		\$ 1,196	\$ -	\$ 1,196

N/A Jay

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**Name of Utility:** FORT DAVIS ESTATES, INC.

N/A Jay

**Date Plant  
Installed/Retired**

### Plant Additions

## **Plant Retirements**

### Changes Since the Last Plant

mm/yyyy

### List Major Items by Class

## Amounts

### List Major Items by Class

### Amounts

## Adjustments

## Annual Report

# WATER

[illegible]

SEWER

[illegible]

#### 4. Other Operating Information

<u><b>Connection information</b></u>		End of Year 12/31/2015	End of Prior Year 12/31/2014	<u><b>Connection information</b></u>		End of Year mm/dd/yyyy	End of Prior Year
<b>WATER:</b>				<b>SEWER:</b>			
1 Number of active water connections	5/8" or 3/4"	37	37	Number of active sewer connections	NONE	NONE	
	3/4"	36	36	Residential			
	1"			Non-residential			
	1 1/2"						
	2"	1	1				
List all additional meter sizes:				List all additional meter sizes:			
Unmetered water connections		11	11	Unmetered water connections			
2 Number of inactive water connections	5/8" or 3/4"	50	50	Number of inactive water connections			
	3/4"	50	50				
	1"						
	1 1/2"						
	2"						
List all additional meter sizes:				List all additional meter sizes:			
Unmetered, inactive connections				Unmetered, inactive connections			
3 Number of active sewer connections		0		Number of active sewer connections			
4 Number of inactive sewer connections		0		Number of inactive sewer connections			
5 Total gallons purchased		0					
6 Total gallons pumped		2237367					
Total Water Produced		2237367					
7 Total gallons sold		2183260					
8 Gallons unaccounted for		23417					
				Total amount of sewer treated (gallons)			
<u><b>Management and Operations</b></u>				Yes or No			
1. Do you have an Application form or formal process for new customers?				yes			
2. Do you have a copy of your approved tariff and TCEQ approved drought contingency plan for customer review?				yes			
3. Do you have written operating procedures for routine operations?				yes			
4. Do you have a written emergency action plans?				yes			
5. Do you have written personnel policies and procedures?				yes			
6. Do you have risk management and safety procedures?				yes			
7. Do you have customer service policies (including billing and collection)?				yes			
8. Do you prepare an annual written budget for financial planning purposes?				yes			
9. Provide a list of all affiliates and entities under Common Control (if any).							
10. If you purchase wholesale water or sewer services, please list the name(s) of the wholesaler and describe the service(s) purchased from each.							
11. If you have a current capital improvement/replacement plan, please attach a copy.							



Name of Utility: Fort Davis Estates, Inc.

### 5. Affiliated Transactions

**Charges by an Affiliate to the Reporting Utility**

Name of Affiliated company: None

NA/00

NARUC Account and/or type of service		Total Affiliated Company	Total Texas	Total for reporting entity
Account #	Account name or type of service	(Dollars transacted)	(Dollars transacted)	(Dollars transacted)

**Charges by an Reporting Utility to Affiliates**

Name of Affiliated company: \_\_\_\_\_

NARUC Account and/or type of service		Total Affiliated Company	Total Texas	Total for reporting entity
Account #	Account name or type of service	(Dollars transacted)	(Dollars transacted)	(Dollars transacted)

## VERIFICATION

### OATH

(To be made by the officer having control of the accounting of the respondent)

State of \_\_\_\_\_

as:

County of \_\_\_\_\_

\_\_\_\_\_ makes oath and says that he/she is \_\_\_\_\_  
(Name of affiant) (Official title of affiant)

of \_\_\_\_\_  
(Exact legal title or name of the respondent)

The signed officer has reviewed the report.

Based on the officer's knowledge, the report does not contain any untrue statements of a material fact or omit to state a material fact necessary in order to make the statements made, in light of the circumstances under which such statements were made, not misleading.

Based on such officer's knowledge, the financial statements, and other financial information included in the report, fairly present in all material respects the financial condition and results of operations of the issuer as of, and for, the periods presented in the report.

He/she swears that all other statements contained in the said report are true, and that the said report is a correct and complete statement of the business and affairs of the above-named respondent during the period of time from and including \_\_\_\_\_ to and including \_\_\_\_\_

Subscribed and sworn to and before me, a \_\_\_\_\_  
in and for the State and County above-named, this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
(Signature of affiant)

My commission expires \_\_\_\_\_  
(Signature of officer authorized to administer oaths)

### SUPPLEMENTAL OATH

(By the president or other chief officer of the respondent)

State of TEXAS

as:

County of BREWSTER

Curtis Evans mak \_\_\_\_\_  
(Name of affiant)

of Fort Davis Estates  
(Exact legal title or name of the respondent)

\_\_\_\_\_  
(Official title of affiant)

that he/she has carefully examined the foregoing report; that he/she swears that all statements of fact contained in the said report are true, and that the said report is a statement of the business and affairs of the above named respondent during the period of time from and including Jan. 1, 2015 to and including Dec. 31, 2015

Subscribed and sworn to before me, a TEXAS NOTARY  
in and for the State and County above-named, this 29th day of MAY, 2016

\_\_\_\_\_  
(Signature of affiant)

My commission expires 11/13/2019  
(Signature of officer authorized to administer oaths)

