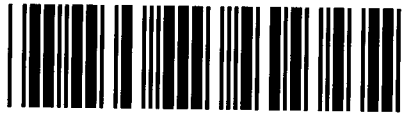


Control Number: 45391



Item Number: 1

Addendum StartPage: 0



**Application for Sale, Transfer, or Merger of a Retail Public Utility**

Pursuant to Chapter 13.251 of the Texas Water Code

**Docket Number: 45391**

(this number will be assigned by the Public Utility Commission after your application is filed)

7 copies of the application, including the original, along with one copy of the portable electronic storage medium (such as CD or DVD) containing the GIS data shall be filed with

Public Utility Commission of Texas  
Attention: Filing Clerk  
1701 N. Congress Avenue  
P.O. Box 13326  
Austin, Texas 78711-3326

PUBLIC UTILITY COMMISSION  
FILING CLERK

No later than seven days after filing the application for the boundary change, provide a copy of each paper map and a portable electronic storage medium (such as CD, flash drive or DVD) containing complete and identical data to the portable electronic storage medium submitted above to

Texas Natural Resources Information System  
1700 N. Congress Ave, Room B40  
Austin, Texas 78701

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**Part A – General Information**

\*RN#  \*CN#  \* (PRIOR TCEQ ID numbers)

1. Proposed action of application (check all the boxes that apply):

Sale of  All  Portion of the  Water system(s) under CCN No.:   
 Acquisition  Sewer system(s) under CCN No.:   
 Lease/Rental

Transfer of  All  Portion of the  Certificated water service area – CCN No.:   
 Certificated sewer service area – CCN No.:

If only a portion of a system or certificated service area is affected by this transaction, please specify the areas or subdivision involved:

and to:

Obtain a CCN for the transferee (purchaser) – indicate if purchaser will take the seller’s CCN  
 Amend the transferee’s CCN No.:   
 Merge or consolidate public utilities   
 Cancel CCN of the transferor (seller)

2. Proposed effective date of this transaction: 4/15/2016  
(Must be at least 120 days after proper notice is provided)

**Part B – Current Service Provider or Seller Information**

Questions 3 through 5 apply to the transferor (current service provider or seller)

3. For the current CCN holder or service provider please indicate:

A. Name:

(Individual, Corporation or Other Legal Entity)

who is a(n):of  Individual  Corporation  WSC  HOA or POA  Other

B. Utility Name (if different than above):

Address:  Telephone: (AC)

C. Contact person. Please provide information about the person to be contacted regarding this application. Indicate if this person is the owner, operator, engineer, attorney or accountant.

Name:  Title:   
Address:  Telephone: (AC)

Fax: (281) 356-5382

Email: YvetteC@quadvest.com

4. About the last rate increase for the system or facilities being transferred:

A. What was the effective date of the last rate increase?

3/5/2013

B. Was notice of this increase provided to the Public Utility Commission of Texas (commission or PUC) or a predecessor regulatory authority?

No  Yes- Application/Docket Number: 37508-R Date See attachment 'A'

5. Please provide a list of all customers affected by this transaction who have deposits held by the transferor or seller utility, if any, and include the following information (attach additional sheets if necessary):

Name and Address of Utility Customer	Date of Deposit	Amount of Deposit	Amount of Unpaid Interest on Deposit
Please see attached list of Customers with Deposits			
See attachment 'B'			

**Part C – Purchaser or Transferee Information**

Questions 6 through 16 refer to the transferee or purchaser.

6. For the person or entity acquiring the facilities and/or CCN:

Applicant: EMCAD Water and Wastewater, LLC

(Individual, Corporation, or Other Legal Entity)

Utility Name: EMCAD Water and Wastewater, LLC - Attn Donald J Clayton

(If different than above)

Utility Address: 2492 Matterhorn Dr., Wexford, PA 15090 -

Fax: (724) 934-1956 Email: Donald.Clayton@Tangibl.com Telephone (AC): (724) 934-1936

CCN Numbers held prior to the filing of this application: 20816, 20832, 21019

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

- Individual
- Home or Property Owners Association
- Partnership; attach copy of partnership agreement
- Corporation; provide charter number as recorded with the Office of the Secretary of State for

Texas:

Non-profit, member owned, member-controlled Cooperative Corporation (Article 1434(a) Water Sewer Service Corporation); provide charter number:

<input type="checkbox"/>	Municipally-owned utility
<input type="checkbox"/>	District (MUD, SUD, WCID, etc.)
<input type="checkbox"/>	County
<input checked="" type="checkbox"/>	Other (please explain): <input type="text" value="LLC"/>

8. If the applicant is an *Individual* or sole proprietorship, provide the following information. If not, skip to the next question. N.A.

Name:	<input type="text"/>	Email:	<input type="text"/>
Address:	<input type="text"/>		
Telephone (AC):	<input type="text"/>	Fax (AC):	<input type="text"/>

9. If the applicant is other than an *Individual*, provide the following information regarding the officers or partners of the legal entity applying for the transfer. You must complete either question 8 or question 9, whichever applies to the transferee applicant.

•Name:	<input type="text" value="See attachment 'C'"/>	Telephone (AC):	<input type="text"/>
Address:	<input type="text"/>		
Position:	<input type="text"/>	Ownership % (if applicable):	<input type="text" value="0.00%"/>

•Name:	<input type="text"/>	Telephone (AC):	<input type="text"/>
Address:	<input type="text"/>		
Position:	<input type="text"/>	Ownership % (if applicable):	<input type="text" value="0.00%"/>

•Name:	<input type="text"/>	Telephone (AC):	<input type="text"/>
Address:	<input type="text"/>		
Position:	<input type="text"/>	Ownership % (if applicable):	<input type="text" value="0.00%"/>

•Name:	<input type="text"/>	Telephone (AC):	<input type="text"/>
Address:	<input type="text"/>		
Position:	<input type="text"/>	Ownership % (if applicable):	<input type="text" value="0.00%"/>

•Name:	<input type="text"/>	Telephone (AC):	<input type="text"/>
Address:	<input type="text"/>		
Position:	<input type="text"/>	Ownership % (if applicable):	<input type="text" value="0.00%"/>

•Name:	<input type="text"/>	Telephone (AC):	<input type="text"/>
Address:	<input type="text"/>		
Position:	<input type="text"/>	Ownership % (if applicable):	<input type="text" value="0.00%"/>

- Attach additional sheet(s) if necessary -

**Important:** • If the applicant is a for-profit corporation, please provide a copy of the corporation's "Certification of Account Status" from the State Comptroller Office. This "Certification of Account Status" can be obtained from:

Texas Comptroller of Public Accounts

P. O. Box 13528, Capitol Station

Austin, Texas 78711

1-800-252-5555

- If the applicant is an Article 1434a water supply or sewer service corporation or other non-profit corporation, please provide a copy of the Articles of Incorporation and By-Laws.

10. Contact person. Please provide information about the person to be contacted regarding this application. Indicate if this person is the owner, operator, engineer, attorney or accountant.

Name:	Yvette Castro	Title:	Secretary
Address:	PO Box 409	Telephone (AC):	(281) 356-5347
Fax #	(281) 356-5382	Email	yvettec@quadvest.com
Relationship to the applicant:	Selling utility		

- IF THERE ARE MORE THAN TWO PARTIES INVOLVED IN THIS TRANSACTION, PLEASE ATTACH SHEETS PROVIDING THE INFORMATION REQUIRED IN QUESTION 6 THROUGH QUESTION 10 FOR EACH PARTY

11. Please respond to each of the following questions. Attach additional sheets if necessary.

- A. Describe the experience and qualifications of the applicant to provide adequate utility service to the requested area

management has more than 50 years of experience in providing utility service. Please see attached

- B. Has the applicant acquiring the CCN or facilities or an affiliated interest of the applicant been under enforcement action by the PUC, TCEQ, Texas Department of Health (TDH), the Office of the Attorney General (OAG) or the Environmental Protection Agency (EPA) in the past for noncompliance with rules, orders or State Statutes?  Yes  No

If yes, please attach copies of any correspondence with these regulatory agencies concerning these enforcement actions and describe any actions and efforts to comply with those requirements. Attach additional sheets if needed.

NA

- C. Describe the source and availability of funds required to make the planned or required improvements, if any, to meet minimum requirements of the TCEQ and PUC and ensure continuous and adequate service.

EMCAD is funded through personal equity and bank financing. Addition Funding information will be provided upon request.

D. Describe the anticipated impact of this transaction on the quality of utility service and explain any anticipated changes in the quality of service.

No change in the quality of service

E. How will the transaction serve the public interest?

EMCAD has acquired additional systems in the area that will allow more cost effective operations.

12. Please describe the nature of the proposed transaction:

EMCAD will purchase that assets in the Sugartree subdivision from Ranch Utilities, LP

13. If the transferee applicant is an Investor Owned Utility (IOU) and will be under the rate jurisdiction of the PUC, please provide the following information. Water supply or sewer service corporations and political subdivisions of the state should mark this section N/A:

- A.
  - Total Purchase Price:
  - Total Original Cost (as recorded on books of seller or merging entity):
  - Accumulated Depreciation as of the proposed effective date of the transaction:
  - Contributions in Aid of Construction:
    - Specific surcharges approved by TCEQ or PUC:
    - Revenues from explicit customer agreements:

- Developer Contributions (please explain):

None

- Other Contributions (please explain):

None

Total Contributions in Aid of Construction

• Net Book Value:

- If the Original Cost or any of the above items has been established in a rate case proceeding by the PUC, the TWC or the TCEQ, please provide the Application/Docket Number and date:

Application/Docket Number:  Date:

- If the applicant is not under the rate jurisdiction of the TCEQ, only the purchase price and information related to Contributions in Aid of Construction is required.

Please provide any other information concerning the nature of the transaction you believe should be given consideration if not explained elsewhere in the application.  
[attach additional sheet(s) if necessary]:

None

- C. Complete the following proposed entries listed below as shown in books of purchasing (or surviving) company. Additional entries may be made; the following are suggested only, and not intended to pose descriptive limitations.

Utility Plant in Service:	\$ 235,131.00
Plant Acquisition Adjustment:	\$ 66,440.00
Extraordinary Loss on Purchase:	
Accumulated Depreciation of Plant:	\$ 90,571.00
Cash:	\$ 211,000.00
Notes Payable:	
Mortgage Payable:	
Others (please list):	

As the purchaser, I understand that it is **my responsibility** in any future rate proceeding to provide written evidence and support for the original cost and installation date of all facilities used and useful for providing utility service.

Purchaser's Initials:  Date:

14. Please indicate the proposed effect of this transaction on the rates to be charged to the affected customers:

All the customers will be charged the same rates as they were charged before the transaction.  
 Some  All customers will be charged different rates than they were charged before the transaction.



If rates are changing, please explain:

NA

Applicant is an IOU and intends to file with the commission or municipal regulatory authority an application to change rates of some/all of its customers as a result of this transaction. If so, please explain:

NA

Other. Please explain:

NA

15. List all neighboring water and /or sewer utilities, cities, and political subdivisions providing the same service within two (2) miles of area affected by this proposed transaction. This information should be available from the water utility database (WUD) or Applicant's licensed water operator.

None

16. Financial, Managerial and Technical information for the acquiring entity.

**Part D – Historical Financial Information**

<b>HISTORICAL BALANCE SHEETS</b>	<b>CURRENT YEAR (A)</b>	<b>A-1 YEAR</b>	<b>A-2 YEAR</b>	<b>A-3 YEAR</b>	<b>A-4 YEAR</b>	<b>A-5 YEAR</b>
<b>CURRENT ASSETS</b>						
Cash						
Accounts Receivable						
Inventories						
Income Tax Receivable						
Other						
<b>Total</b>						
<b>FIXED ASSETS</b>						
Land						
Collection/Distribution System						
Buildings						
Equipment						
Other						
Less: Accum. Depreciation or Reserves						
<b>Total</b>						
<b>TOTAL ASSETS</b>						
<b>CURRENT LIABILITIES</b>						
Accounts Payable						
Notes Payable, Current						
Accrued Expenses						
Other						
<b>TOTAL</b>						
<b>LONGTERM LIABILITIES</b>						
Notes Payable, Long-term						
Other						
<b>TOTAL LIABILITIES</b>						
<b>OWNER'S EQUITY</b>						
Paid in Capital						
Retained Equity						
Other						
Current Period Profit or Loss						
<b>TOTAL OWNER'S EQUITY</b>						
<b>TOTAL LIABILITIES AND EQUITY</b>						
<b>WORKING CAPITAL</b>						
<b>CURRENT RATIO</b>						
<b>DEBT TO EQUITY RATIO EQUITY TO TOTAL ASSETS</b>						

<b>HISTORICAL INCOME STATEMENT</b>	<b>CURRENT YEAR (A)</b>	<b>A-1 YEAR</b>	<b>A-2 YEAR</b>	<b>A-3 YEAR</b>	<b>A-4 YEAR</b>	<b>A-5 YEAR</b>
<b>METER NUMBER</b>						
Existing Number of Taps						
New Taps Per Year						
<b>Total Meters at Year End</b>						
<b>METER REVENUE</b>						
Fees Per Meter						
Cost Per Meter						
<b>Operating Revenue Per Meter</b>						
<b>GROSS WATER REVENUE</b>						
Fees						
Other						
<b>Gross Income</b>						
<b>OPERATING EXPENSES</b>						
General & Administrative						
Interest						
Other						
<b>NET INCOME</b>						

<b>HISTORICAL EXPENSE DETAIL</b>	<b>CURRENT YEAR (A)</b>	<b>A-1 YEAR</b>	<b>A-2 YEAR</b>	<b>A-3 YEAR</b>	<b>A-4 YEAR</b>	<b>A-5 YEAR</b>
<b>GENERAL/ADMINISTRATIVE EXPENSES</b>						
Salaries						
Office Expense						
Computer Expense						
Auto Expense						
Insurance Expense						
Telephone Expense						
Utilities Expense						
Depreciation Expense						
Property Taxes						
Professional Fees						
Other						
<b>Total</b>						
<b>% Increase Per Year</b>						
<b>OPERATIONAL EXPENSES</b>						
Salaries						
Auto Expense						
Utilities Expense						
Depreciation Expense						
Repair & Maintenance						
Supplies						
Other						
<b>Total</b>						
<b>% Increase Per Year</b>						
<b>ASSUMPTIONS</b>						
Interest Rate/Terms						
Utility Cost/gal.						
Depreciation Schedule						
Other						

**Part E – Projected Information**

**PROJECTED BALANCE SHEETS**

	START UP	YEAR 1	YEAR 2	YEAR 3	YEAR 4	YEAR 5
<b>CURRENT ASSETS</b>						
Cash						
Accounts Receivable						
Inventories						
Income Tax Receivable						
Other						
<b>Total</b>						
<b>FIXED ASSETS</b>						
Land						
Collection/Distribution System						
Buildings						
Equipment						
Other						
Less: Accum. Depreciation or Reserves						
<b>Total</b>						
<b>TOTAL ASSETS</b>						
<b>CURRENT LIABILITIES</b>						
Accounts Payable						
Notes Payable, Current						
Accrued Expenses						
Other						
<b>Total</b>						
<b>LONGTERM LIABILITIES</b>						
Notes Payable, Long-term						
Other						
<b>TOTAL LIABILITIES</b>						
<b>OWNER'S EQUITY</b>						
Paid in Capital						
Retained Equity						
Other						
Current Period Profit or Loss						
<b>TOTAL OWNER'S EQUITY</b>						
<b>TOTAL LIABILITIES AND EQUITY</b>						
<b>WORKING CAPITAL</b>						
<b>CURRENT RATIO</b>						
<b>DEBT TO EQUITY RATIO</b>						
<b>EQUITY TO TOTAL ASSETS</b>						

**PROJECTED INCOME STATEMENT**

	YEAR 1	YEAR 2	YEAR 3	YEAR 4	YEAR 5	TOTALS
<b>METER NUMBER</b>						
Existing Number of Taps						
New Taps Per Year						
<b>Total Meters at Year End</b>						
<b>METER REVENUE</b>						
Fees Per Meter						
Cost Per Meter						
<b>Operating Revenue Per Meter</b>						
<b>GROSS WATER REVENUE</b>						
Fees						
Other						
<b>Gross Income</b>						
<b>OPERATING EXPENSES</b>						
General & Administrative						
Interest						
Other						
<b>NET INCOME</b>						

**PROJECTED EXPENSE DETAIL**

	YEAR 1	YEAR 2	YEAR 3	YEAR 4	YEAR 5	TOTALS
<b>GENERAL/ADMINISTRATIVE EXPENSES</b>						
Salaries						
Office Expense						
Computer Expense						
Auto Expense						
Insurance Expense						
Telephone Expense						
Utilities Expense						
Depreciation Expense						
Property Taxes						
Professional Fees						
Other						
<b>Total</b>						
<b>% Increase Per Year</b>	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
<b>OPERATIONAL EXPENSES</b>						
Salaries						
Auto Expense						
Utilities Expense						
Depreciation Expense						
Repair & Maintenance						
Supplies						
Other						
<b>Total</b>						
<b>% Increase Per Year</b>	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
<b>ASSUMPTIONS</b>						
Interest Rate/Terms						
Utility Cost/gal.						
Depreciation Schedule						
Other						

**PROJECTED SOURCES AND USES OF CASH STATEMENTS**

	YEAR 1	YEAR 2	YEAR 3	YEAR 4	YEAR 5	TOTALS
<b>SOURCES OF CASH</b>						
Net Income						
Depreciation (If Funded)						
Loan Proceeds						
Other						
<b>Total Sources</b>						
<b>USES OF CASH</b>						
Net Loss						
Principle Portion of Pmts.						
Fixed Asset Purchase						
Reserve						
Other						
<b>Total Uses</b>						
<b>NET CASH FLOW</b>						
<b>DEBT SERVICE COVERAGE</b>						
Cash Available for Debt						
<b>SERVICE (CADS)</b>						
Net Income (Loss)						
Depreciation, or Reserve Interest						
<b>Total</b>						
<b>REQUIRED DEBT SERVICE (RDS)</b>						
Principle Plus Interest						
<b>DEBT SERVICE COVERAGE RATIO</b>						
CADS Divided by RDS						



**Part F – TCEQ Public Water or Sewer System Information**

Please answer questions 17 through 22 on a different sheet for each physically Distinct system being transferred or acquired.

17. A. For Water Systems. TCEQ Public Water System Identification Number:

Date of last inspection:

B. For Wastewater Systems:

-TCEQ Discharge Permit Number: W Q 14163 - 001

-Name of Permittee: Ranch Utilities, L.P.

-Date of application to transfer Discharge Permit submitted: 11/30/2015

-Date of application to transfer Discharge Permit approved by TCEQ: Pending STM Approval

18. A. Are any improvements required to meet TCEQ or PUC standards?  Yes  No. If yes, please explain:

B. Is there a moratorium on new connections?  Yes  No. If yes, please explain:

C. Provide details of each required major capital improvement to correct the deficiencies and meet the TCEQ or PUC standards (attach additional sheets if necessary):

Description of the Required Improvement	Schedule to Complete	Estimated Cost
None		

19. Does the system being transferred operate within the city limits of a municipality or within district boundaries?  Yes  No

If yes, indicate the number of customers within the city limits or district boundaries:

Water                  Sewer

Attach copy of franchise agreement or consent letter from the city or district.

20. Do you currently purchase water or sewer treatment capacity from another source?  Yes  No  
 Water  Sewer Purchased on a  Regular  Seasonal  Emergency Basis

• Source: \_\_\_\_\_ % of total supply:

21. List the number of existing connections to be effected by this transaction.

Water			Sewer		
	-Non Metered		-2"meter	-Residential Connection	82
	-5/8" or 3/4" meter		-3" meter	-Commercial Connection	
	-1" meter		-4" meter	-Industrial Connection	
	-1 1/2" meter		-Other	-Other	
Total Water Connections:			Total Sewer Connections		82

20. Has the system reached 85% of its capacity based on TCEQ's minimum requirements?  Yes  No  
 If yes, please explain what steps are being taken to address the capacity issues:

23. List the name, class, and license number of the operator(s) that will be responsible for the system:

Name	Class	License#
David L. Bowman	B	WLD0012791

24. Attach the following maps with each copy of the application: **Attachment 'F'**

- a. One small scale map clearly showing affected service area with enough detail to accurately locate the area if the application is for the transfer of all or a portion of a CCN.
- b. One large scale map showing the proposed service area boundaries being sold, transferred, or merged and, if available, the existing and proposed facilities. Color coding should be used to differentiate existing from proposed facilities. Facilities and service area boundaries should be shown with such exactness that they can be located on the ground. If transferring area not currently in a CCN or a portion of an existing CCN area please attach the following hard copy maps with each copy of the application:
  1. A general location map delineating the proposed service area with enough detail to accurately locate the proposed area within the county.
  2. A map showing only the proposed area by:
    - i. metes and bounds survey certified by a licensed state or registered professional land surveyor; or
    - ii. projectable digital data with metadata (proposed areas should be in a single record and clearly labeled, data disk should be included); or
    - iii. following verifiable natural and man-made landmarks, or
    - iv. a copy of recorded plat map with metes and bounds.
  3. A written description of the proposed service area.

**Part G – Oaths and Notices**

**OATH FOR SELLER OR FORMER SERVICE PROVIDER**

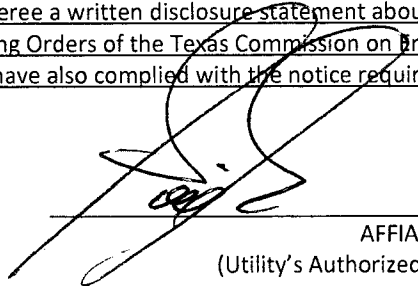
STATE OF Texas

COUNTY OF Montgomery

I, Simon Sequeira, being duly sworn, file this application for sale, lease, rental or merger or consolidation as President

(*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 documents filed with this application, and have complied with all the requirements contained in the application; and, that all such statements made and matters set forth therein with respect to applicant are true and correct. Statements about other parties are made on information and belief. I further state that the application is made in good faith and that this application does not duplicate any filing presently before the Commission.

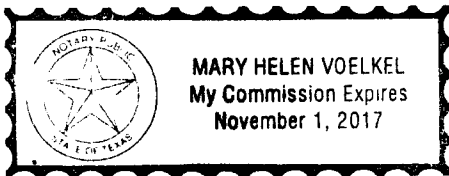
I further state that I have provided to the purchaser or transferee a written disclosure statement about any contributed property as required under Section 13.301(j) and copies of any outstanding Orders of the Texas Commission on Environmental Quality, the Public Utility Commission of Texas, or Attorney General and have also complied with the notice requirements in Section 13.301(k) of the Texas Water Code.

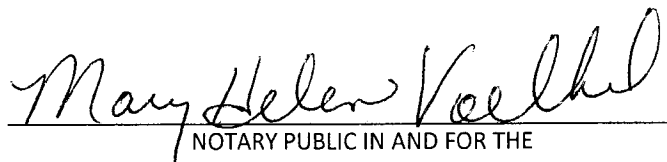
  
\_\_\_\_\_  
AFFIANT  
(Utility's Authorized Representative)

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 16th of Nov., 20 16.

SEAL



  
\_\_\_\_\_  
NOTARY PUBLIC IN AND FOR THE  
STATE OF TEXAS  
MARY Helen Voelkel  
PRINT OR TYPE NAME OF NOTARY  
MY COMMISSION EXPIRES 11-1-2017

One copy of this page must be submitted for each utility involved in this transaction.

**OATH FOR PURCHASER OR ACQUIRING ENTITY**


STATE OF COMMONWEALTH OF PENNSYLVANIA  
COUNTY OF COUNTY OF ALLEGHENY

COMMONWEALTH OF PENNSYLVANIA  
COUNTY OF ALLEGHENY

I, Ronald J. Clayton, being duly sworn, file this application for

sale, lease, rental or merger or consolidation as member  
*(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 documents filed with this application, and have complied with all the requirements contained in the application; and, that all such statements made and matters set forth therein with respect to applicant are true and correct. Statements about other parties are made on information and belief. I further state that the application is made in good faith and that this application does not duplicate any filing presently before the Commission.

I am also authorized and do agree to be bound by and comply with any outstanding orders of the Texas Commission on Environmental Quality, the Public Utility Commission of Texas or the Attorney General which have been issued to the system or facilities being acquired and recognize that I will be subject to administrative penalties or other enforcement actions if I do not comply.

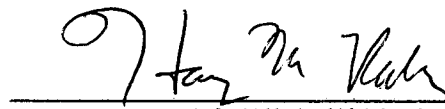
  
AFFIANT  
(Utility's Authorized Representative)

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.

Applicant represents that all other parties to this transaction have been furnished copies of this completed application.

SUBSCRIBED AND SWORN TO BEFORE ME, a Notary Public in and for the State of Texas, this day 11<sup>th</sup> of November 20 15.

SEAL

  
NOTARY PUBLIC IN AND FOR THE  
~~STATE OF TEXAS~~  
COMMONWEALTH OF PENNSYLVANIA  
PRINT OR TYPE NAME OF NOTARY

COMMONWEALTH OF PENNSYLVANIA  
Notarial Seal  
Harry M. Ruben, Notary Public  
Pine Twp., Allegheny County  
My Commission Expires July 13, 2016  
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

MY COMMISSION EXPIRES \_\_\_\_\_

One copy of this page must be submitted for each utility involved in this transaction.

Notice to Current Customers, Neighboring Systems and Cities

Ranch Utilities, L.P. 'S  
(Seller's or Transferor's Name)

NOTICE OF INTENT TO SELL FACILITIES AND TRANSFER CERTIFICATE OF CONVENIENCE AND  
NECESSITY (CCN) NO 21064 TO EMCAD Water and Wastewater, LLC  
(Purchaser's or Transferee's Name)

IN Parker COUNTY, TEXAS

To: \_\_\_\_\_ Date Notice Mailed \_\_\_\_\_, 20 \_\_\_\_  
(Name of Customer, Neighboring System or City)

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

City State Zip

Ranch Utilities, LP PO Box 409 Tomball, Texas 77377  
Sellers or Transferors' Name Address City/State/Zip Code

has submitted an application with the Public Utility Commission of Texas to sell facilities and transfer  
water or sewer (please select) CCN No. 21064 in Parker [County Name]

County to:

EMCAD Water and Wastewater, LLC 2492 Matterhorn Dr Wexford, PA 15090  
Purchasers or Transferee's Name Address City/State/Zip Code

The sale is scheduled to take place as approved by the Commission (V.T.C.A., Water Code §13.301). The transaction and the transfer of  
the CCN include the following subdivision(s):

Sugartree

The area subject to this transaction is located approximately 12 miles SW [direction] of  
downtown Weatherford, [City or Town] Texas, and is generally bounded on the north by  
Sugartree Dr; on the east by FM 1189  
;on the south by 2900' N of Cougar Rd; and on the west by Sugartree Cir

The total area being requested includes approximately \_\_\_\_\_ acres and serves \_\_\_\_\_ current customers.  
This transaction will have the following effect on the current customer's rates and services:  
None

Affected persons may file written protests and/or request a public hearing within 30 days of this notice.

To request a hearing, you must:

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

Only those persons who submit a written request to be notified of a hearing will receive notice if a hearing is scheduled. The Commission will issue the CCN requested in the referenced application unless a hearing is scheduled to consider the transaction. If no protests or requests for hearing are filed during the comment period, the Commission may issue the CCN 30 days after publication of this notice.

Persons who wish to protest or request a hearing on this application should write the:

Filing Clerk  
Public Utility Commission of Texas  
1701 North Congress Avenue  
P.O. Box 13326  
Austin, Texas 78711-3326

**Se desea informacion en Espanol, puede llamar al  
1-888-782-8477**

---

Utility Representative

---

Utility Name

Notice to Current Customers, Neighboring Systems, Landowner and Cities

\_\_\_\_\_'S NOTICE OF INTENT TO SELL FACILITIES TO

(Seller's or Transferor's Name)

AND FOR

(Purchaser's or Transferee's Name)

Purchaser's or Transferee's Name)

TO OBTAIN OR AMEND A CERTIFICATE OF CONVENIENCE AND NECESSITY (CCN) IN \_\_\_\_\_ COUNTY, TEXAS

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

(Address)

City State Zip

Sellers or Transferors' Name Address City/State/Zip Code

has submitted an application with the Public Utility Commission of Texas to sell water or sewer (please select) Facilities in \_\_\_\_\_ [County Name] County to:

Purchasers or Transferee's Name Address City/State/Zip Code

The transferee has also requested to obtain/amend a CCN in this application. The sale is scheduled to take place as approved by the Commission (Texas Water Code §13.301). The transaction and the proposed service area include the following subdivision(s):

The area subject to this transaction is located approximately \_\_\_\_\_ miles \_\_\_\_\_ [direction] of downtown \_\_\_\_\_, [City or Town] Texas, and is **generally** bounded on the north by \_\_\_\_\_; on the east by \_\_\_\_\_; on the south by \_\_\_\_\_; and on the west by \_\_\_\_\_

The total area being requested includes approximately \_\_\_\_\_ acres and serves \_\_\_\_\_ current customers. This transaction will have the following effect on the current customer's rates and services:

Affected persons may file written protests and/or request a public hearing within 30 days of this notice.

To request a hearing, you must:

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

Only those persons who submit a written request to be notified of a hearing will receive notice if a hearing is scheduled. The Commission will issue the CCN requested in the referenced application unless a hearing is scheduled to consider the transaction. If no

protests or requests for hearing are filed during the comment period, the Commission may issue the CCN 30 days after publication of this notice.

Persons who wish to protest or request a hearing on this application should write the:

Filing Clerk  
Public Utility Commission of Texas  
1701 North Congress Avenue  
P.O. Box 13326  
Austin, Texas 78711-3326

**Se desea informacion en Espanol, puede llamar al  
1-888-782-8477**

---

Utility Representative

---

Utility Name



# **Attachment 'A'**

**SEWER UTILITY TARIFF  
FOR**

Ranch Utilities, Inc.  
(Utility Name)

P.O. Box 409  
(Business Address)

Tomball, Texas 77377  
(City, State, Zip Code)

281/351-4380  
(Area Code/Telephone)

This tariff is effective for utility operations under the following Certificate of Convenience and Necessity:

20627

This tariff is effective in the following county:

Parker

This tariff is effective in the following cities or unincorporated towns (if any):

None

This tariff is effective in the following subdivisions and water quality permit numbers:

Sugar Tree WQ0014163-001 (TX0122271)

**TABLE OF CONTENTS**

The above utility lists the following sections of its tariff (if additional pages are needed for a section, all pages should be numbered consecutively):

SECTION 1.0 -- RATE SCHEDULE .....	2
SECTION 2.0 -- SERVICE RULES AND POLICIES .....	4
SECTION 3.0 -- EXTENSION POLICY .....	13
APPENDIX A -- SAMPLE SERVICE AGREEMENT	

SECTION 1.0 - RATE SCHEDULE

Section 1.01--Rates

**Phase I (Effective March 5, 2013)**

<u>Meter Size</u>	<u>Monthly Minimum Charge</u>	<u>Gallonage Charge</u>
Residential (Flat Rate)	<u>\$70.00</u>	Including all gallons for all meters
Commercial (based upon water meter size):		
5/8" x 3/4"	<u>\$29.00</u> (Including -o- Gallons)	<u>\$2.33</u> per 1000 gallons same for all meter sizes
3/4"	<u>\$44.00</u>	
1"	<u>\$73.00</u>	
1 1/2"	<u>\$146.00</u>	
2"	<u>\$233.00</u>	
3"	<u>\$438.00</u>	
4"	<u>\$875.00</u>	
6"	<u>\$1,823.00</u>	
8"	<u>\$5,600.00</u>	
10"	<u>\$8,050.00</u>	

**Phase II (Effective September 5, 2013)**

<u>Meter Size</u>	<u>Monthly Minimum Charge</u>	<u>Gallonage Charge</u>
Residential (Flat Rate)	<u>\$85.00</u>	Including all gallons for all meters
Commercial (based upon water meter size):		
5/8" x 3/4"	<u>\$35.00</u> (Including -o- Gallons)	<u>\$2.83</u> per 1000 gallons same for all meter sizes
3/4"	<u>\$53.00</u>	
1"	<u>\$89.00</u>	
1 1/2"	<u>\$177.00</u>	
2"	<u>\$283.00</u>	
3"	<u>\$531.00</u>	
4"	<u>\$1,063.00</u>	
6"	<u>\$2,214.00</u>	
8"	<u>\$6,800.00</u>	
10"	<u>\$9,775.00</u>	

FORM OF PAYMENT: The utility will accept the following forms of payment:

Cash X, Check X, Money Order X, Credit Card X, Other \_\_\_\_\_

THE UTILITY MAY REQUIRE EXACT CHANGE FOR PAYMENTS AND MAY REFUSE TO ACCEPT PAYMENTS MADE USING MORE THAN \$1.00 IN SMALL COINS. A WRITTEN RECEIPT WILL BE GIVEN FOR CASH PAYMENTS.

REGULATORY ASSESSMENT FEE ..... 1%  
A REGULATORY ASSESSMENT, EQUAL TO ONE PERCENT OF THE CHARGE FOR RETAIL SEWER SERVICE ONLY, SHALL BE COLLECTED FROM EACH RETAIL CUSTOMER.

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

SECTION 1.0--RATE SCHEDULE (Continued)

Section 1.02--Miscellaneous Fees

RESIDENTIAL TAP FEE (Sugar Tree) .....\$1,300.00
THE TAP FEE IS BASED ON THE AVERAGE OF THE UTILITY'S ACTUAL COST FOR MATERIALS AND LABOR FOR STANDARD RESIDENTIAL CONNECTION PLUS ROAD BORES AND OTHER EXTRAORDINARY COST PERMITTED BY 30 TAC291.86(a)(1)(A)-(C).

RESIDENTIAL TAP FEE (Caddo Village).....\$790.00
THE TAP FEE IS BASED ON THE AVERAGE OF THE UTILITY'S ACTUAL COST FOR MATERIALS AND LABOR FOR STANDARD RESIDENTIAL CONNECTION PLUS ROAD BORES AND OTHER EXTRAORDINARY COST PERMITTED BY 30 TAC291.86(a)(1)(A)-(C).

TAP FEE (Large meter) ..... Actual Cost
TAP FEE IS THE UTILITY'S ACTUAL COST FOR MATERIALS AND LABOR FOR TAP SIZE INSTALLED.

TAP FEE (Pressure Sewer) any water meter size..... Actual Cost
TAP FEE IS THE UTILITY'S ACTUAL COST FOR MATERIALS AND LABOR FOR TAP SIZE INSTALLED. CUSTOMER SHALL OWN AND MAINTIAN ALL REQUIRED GRINDER PUMPS AND APPURTENANCES.

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

- a) Non payment of bill (Maximum \$25.00).....\$25.00
b) Customer's request .....\$50.00
OR OTHER REASONS LISTED UNDER SECTION 2.0 OF THIS TARIFF

TRANSFER FEE.....\$45.00
THE TRANSFER FEE WILL BE CHARGED FOR CHANGING AN ACCOUNT NAME AT THE SAME SERVICE LOCATION WHERE THE SERVICE IS NOT DISCONNECTED.

LATE CHARGE .....10% of the bill
A ONE TIME PENALTY MAY BE 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 .....\$25.00
RETURNED CHECK CHARGES MUST BE BASED ON THE UTILITY'S DOCUMENTABLE COST.

CUSTOMER DEPOSIT (Maximum \$50).....\$50.00

NON-RESIDENTIAL DEPOSIT.....1/6TH ESTIMATED ANNUAL BILL

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

SECTION 1.0--RATE SCHEDULE (Continued)

SEASONAL RECONNECTION FEE:

BASE RATE FOR METER SIZE TIMES NUMBER OF MONTHS OFF THE SYSTEM NOT TO EXCEED SIX MONTHS WHEN LEAVE AND RETURN WITHIN A TWELVE MONTH PERIOD.

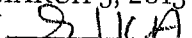
GOVERNMENTAL TESTING, INSPECTION AND COSTS SURCHARGE:

WHEN AUTHORIZED IN WRITING BY TCEQ AND AFTER NOTICE TO CUSTOMERS, THE UTILITY MAY INCREASE RATES TO RECOVER INCREASED COSTS FOR INSPECTION FEES AND WATER TESTING.  
[30 TAC 291.21(K)(2)]

LINE EXTENSION AND CONSTRUCTION CHARGES:

REFER TO SECTION 3.0--EXTENSION POLICY FOR TERMS, CONDITIONS, AND CHARGES WHEN NEW CONSTRUCTION IS NECESSARY TO PROVIDE SERVICE.

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

TEXAS COMM. ON ENVIRONMENTL QUALITY  
37508-R, CCN 20627, MARCH 5, 2013  
APPROVED TARIFF BY 

# **Attachment 'B'**

Account #	Customer Name	Billing Cycle	Status	Primary Phone	Service Location	Parcel Number	deposit applied	deposit	interest	deposit + int
00000323	Thomas Waitrp	SugarTree	A	8174219167	348 Sugartree Circle	343038				
00000360	Danna Anderson	SugarTree	A	8178517043	230 Sugartree Circle	343024	Ranch Water Deposit	\$50.00	\$0.16	\$50.16
00000755	Dan Feely	SugarTree	A	8179966780	116 Oak Bend	343050				
00001023	Marge Harper	SugarTree	A	8175946141	357 Sugartree Circle	343037				
00001417	Melissa Burden	SugarTree	A	8175942859	312 Sugartree Circle	343044				
00001431	Lot & Edwards Hardison	SugarTree	A	8174568237	311 Sugartree Circle	343043				
00001880	Crescenta Wusterhausen	SugarTree	A	8175948099	747 S. Sugartree Drive	343054				
00001882	Jim Clemens	SugarTree	A	8175980917	764 S. Sugartree Drive	343053				
00002394	Larry & Nora Long	SugarTree	A	8175940105	767 S. Sugartree Drive	343056				
00002792	Richard Hillegas	SugarTree	A	8173205108	356 Sugartree Circle	343057				
00002926	Milton Marburger	SugarTree	A	8173723342	712 S. Sugartree Drive	343058				
00002968	Steven Chapman	SugarTree	A	8177972321	143 Creek Meadow Ct	343059				
00003058	Robert Griffin	SugarTree	A	8175655334	374 Sugartree Circle	343060				
00003107	Alan Wagner	SugarTree	A	3252456201	107 Deer Trail	343042				
00003619	Jody Moore	SugarTree	A	8176022914	594 Sugartree Drive	343062				
00003717	Blake Hombeck	SugarTree	A	2545924407	760 S. Sugartree Drive	343026				
00004528	Melanie Chitwood	SugarTree	A	8179466347	101 Deer Trail	343063				
00004885	Kimberly & Brian Bengte	SugarTree	A	9406592630	243 Sugartree Circle	343061				
00004934	Casey Dankers	SugarTree	A	9406540103	279 Sugartree Circle	343064				
00005416	Jesus Hernandez	SugarTree	A	8177984007	128 Oak Bend	343066				
00006697	Chris McNeff	SugarTree	A	8172641255	736 S. Sugartree Drive	343039				
00005786	Rick & Kathy Howell	SugarTree	A	4322090728	235 Sugartree Circle	343067				
00006247	Glenda Shepler	SugarTree	A	8175656854	101 Rocky Run	343069				
00006773	Andrea Hogan	SugarTree	A	8179655949	109 Fairway View Court	343070				
00006862	Jane Welborn	SugarTree	A	8174589230	589 Sugartree Drive	343023				
00007090	Brooks Ferguson	SugarTree	A	8177577415	360 Sugartree Circle	343068				
00007105	Chuck Blanton	SugarTree	A	8172296919	100 Sugartree Circle	343020				
00007128	John Zeigler	SugarTree	A	8175654434	304 Sugartree Circle	343072	Ranch Sewer Deposit	\$50.00	\$0.09	\$50.09
00007386	Amanda Ward	SugarTree	A	9408678695	578 S. Sugartree Drive	343071	Ranch Sewer Deposit	\$50.00	\$0.09	\$50.09
00007393	Kevin & Debby Sebastian	SugarTree	A	8172962319	270 Sugartree Circle	343073				
00007453	Jeff Langen	SugarTree	A	2066818750	136 Burtle Dr	343013				
00007500	Brandon & Terica Nicewonger	SugarTree	A	8174120551	134 Oak Bend	343074	Ranch Sewer Deposit	\$50.00	\$0.09	\$50.09
00007637	Dan Lindsey Betsill	SugarTree	A	8178457954	623 S. Sugartree Drive	343075				
00007972	Amie Nelson	SugarTree	A	8173015938	570 S. Sugartree Drive	343076	Ranch Sewer Deposit	\$50.00	\$0.08	\$50.08

00007981	William & Terry Wood	SugarTree	A	7193716261	118 Tree Line Court	343077							
00008057	Michael Beaver	SugarTree	A	8177983555	329 Sugartree Circle	343080	Ranch Sewer Deposit	\$50.00	\$0.08	\$50.08			
00008266	David & Juanita Nelson	SugarTree	A	8176907352	136 Tree Line Court	343081							
00008272	Stephen & Paula Beth Higgins	SugarTree	A	4796376526	345 Sugartree Circle	343032	SugarTree Deposit	\$50.00	\$0.07	\$50.07			
00008278	James Vangilder	SugarTree	A	5735799909	353 Sugartree Circle	343035							
00008279	George Mittendorf	SugarTree	A	8179014671	744 S Sugartree Drive	343087							
00008292	Paul & Brenda McGietes	SugarTree	A	9404522162	136 Eagle Drive	343016							
00008338	William & Dani Paine	SugarTree	A	8179651819	379 Sugartree Circle	343078							
00008376	James Wynaugh	SugarTree	A	2672655584	143 Oak Bend	343049	SugarTree Deposit	\$50.00	\$0.07	\$50.07			
00008690	Shannon & Kevin Cray	SugarTree	A	8173743642	120 Birdie Dr	343084	SugarTree Deposit	\$50.00	\$0.06	\$50.06			
00008695	Zach Moore	SugarTree	A	8175979138	100 Tree Line Court	343089	SugarTree Deposit	\$50.00	\$0.06	\$50.06			
00008978	Cole & Kati Smith	SugarTree	A	9407821252	391 Sugartree Circle	343090	SugarTree Deposit	\$50.00	\$0.06	\$50.06			
00008902	Cody & Angie McCroly	SugarTree	A	8173047425	124 Tree Line Court	343095	SugarTree Deposit	\$50.00	\$0.05	\$50.05			
00009373	Christine Lewis	SugarTree	A	6823239569	109 Birdie Dr	343085	Ranch Sewer Deposit	\$50.00	\$0.05	\$50.05			
00009444	Rick & Mansol Bryson	SugarTree	A	8179392873	117 Birdie Dr	343091	SugarTree Deposit	\$50.00	\$0.05	\$50.05			
00009530	Billy Don & Carol Atkinson	SugarTree	A	3253384180	364 Sugartree Circle	343093	SugarTree Deposit	\$50.00	\$0.05	\$50.05			
00009632	Casey Doran	SugarTree	A	4328946827	141 Birdie Dr	343014	SugarTree Deposit	\$50.00	\$0.05	\$50.05			
00009680	James & Jayme Carter	SugarTree	A	9404522086	128 Birdie Dr	343094	SugarTree Deposit	\$50.00	\$0.05	\$50.05			
00009720	Garrett Flowers	SugarTree	A	8067877697	137 Eagle Drive	343065	SugarTree Deposit	\$50.00	\$0.05	\$50.05			
00009766	Michael & Kristen Fagley	SugarTree	A	2149123097	147 Oak Bend	343086	SugarTree Deposit	\$50.00	\$0.05	\$50.05			
00010239	Kyle & Halsey Clark	SugarTree	A	8175650439	154 Tree Line Court	343096	SugarTree Deposit	\$50.00	\$0.05	\$50.05			
00010334	Scot & Stephanie McClure	SugarTree	A	9404650386	109 Deer Trail	343097							
00010401	Cameron & Ashley Cullum	SugarTree	A	8172357639	147 Tree Line Court	343098	SugarTree Deposit	\$50.00					
00010977	Brian & Kristen Ducat	SugarTree	A	8175653351	300 Sugartree Circle	343031	SugarTree Deposit	\$50.00					
00010993	Ronald & Janis Laughlin	SugarTree	A	5126696224	574 S Sugartree Drive	343092	Ranch Sewer Deposit	\$50.00					
00011225	Scott Wood	SugarTree	A	9403728199	110 Oak Bend	343051	SugarTree Deposit	\$50.00					
00011383	Steven Zillgen	SugarTree	A	8179485780	125 Creek Meadow Ct	343102	SugarTree Deposit	\$50.00					
00011388	Ed Holt	SugarTree	A	6018707711	318 Sugartree Circle	343055	SugarTree Deposit	\$50.00					
00011401	Kevin Bollin	SugarTree	A	2143785009	109 Oak Bend	343040	SugarTree Deposit	\$50.00					
00011456	Mattie Neal	SugarTree	A	9403882269	727 S Sugartree Drive	343052	SugarTree Deposit	\$50.00					
00011601	Dustin & Sheena Smith	SugarTree	A	8177762069	100 Rocky Run	343103	SugarTree Deposit	\$50.00					
00011626	Diane Kinzer	SugarTree	A	9724671000	340 Sugartree Circle	343028	SugarTree Deposit	\$50.00					
00011643	Noel Hernandez	SugarTree	A	8173749103	585 Sugartree Drive	343021	SugarTree Deposit	\$50.00					
00011732	Jimmy Tutler	SugarTree	A	9365241843	308 Sugartree Circle	343030	SugarTree Deposit	\$50.00					
00011770	Tim & Elizabeth Crawley	SugarTree	A	3017677882	114 Oak Bend	343100	SugarTree Deposit	\$50.00					



00012855	Mark & Ana Reimer	SugarTree	A	6828045020	106 Oak Bend	343099	SugarTree Deposit	\$50.00		
00012806	Ricky L. & Cynthia R. Jeanes	SugarTree	A	9727427447	101 Creek Meadow Ct	343105	SugarTree Deposit	\$50.00		
00012843	Lesley & Tyler McCeller	SugarTree	A	8175977847	236 Sugartree Circle	343088	SugarTree Deposit	\$50.00		
00012938	Landa Pustejovsky	SugarTree	A	3253402040	112 Eagle Drive	343104	SugarTree Deposit	\$50.00		
34301001	Robert Ouisenberry	SugarTree	A	8173419018	116 Birdie Dr	343010				
34301101	Steve Gasner	SugarTree	A	8175999786	124 Birdie Dr	343011				
34301201	John McCarthy	SugarTree	A	8175944345	132 Birdie Dr	343012				
34301501	Ammar (Mark) Nijem	SugarTree	A	8173125002	113 Eagle Drive	343015				
34301701	Randy & Christl White	SugarTree	A	8175941443	150 Lakeside Drive	343017				
34301801	Gary & Norma Green	SugarTree	A	4328313052	154 Lakeside Drive	343018				
34301902	Larry Holloway	SugarTree	A	8176130092	113 Oak Bend	343019				
34302201	Jon Williams	SugarTree	A	8175949000	586 Sugartree Drive	343022				
34303601	Bryan Craig	SugarTree	A	8176130415	756 S. Sugartree Drive	343036				

# **Attachment 'C'**



Glenn Hegar Texas Comptroller of Public Accounts

Taxable Entity Search ResultsTaxable Entity Search

## Officers and Directors

EMCAD WATER AND WASTEWATER, LLC

Report Year: 2015

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[Return to: Taxable Entity Search Results](#)

Officer and director information on this site is obtained from the most recent Public Information Report (PIR) processed by the Secretary of State (SOS). PIRs filed with annual franchise tax reports are forwarded to the SOS. After processing, the SOS sends the Comptroller an electronic copy of the information, which is displayed on this web site. The information will be updated as changes are received from the SOS.

You may order a copy of a Public Information Report from [open.records@cpa.state.tx.us](mailto:open.records@cpa.state.tx.us) or Comptroller of Public Accounts, Open Government Division, PO Box 13528, Austin, Texas 78711.

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Title	Name and Address
<i>MEMBER</i>	<b>DONALD J CLAYTON</b> 2492 MATTERHORN DR WEXFORD , PA 15090
<i>MEMBER</i>	<b>JOHN EBERT</b> 220 VALLEY ST NW ABINGDON , VA 24210

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[Privacy and Security Policy](#) | [Accessibility Policy](#) | [Link Policy](#) | [Public Information Act](#) | [Compact with Texans](#)

# **Attachment 'D'**

# Franchise Tax Account Status

As of: 11/05/2015 01:39:06 PM

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

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## EMCAD WATER AND WASTEWATER, LLC

Texas Taxpayer Number 32050717274

Mailing Address ~~777 MAIN ST STE 1800~~ 2492 Matherhorn Dr.  
~~FORT WORTH, TX 76102-5322~~ Wexford, PA 15090

Right to Transact ACTIVE  
Business in Texas

State of Formation TX

Effective SOS 04/15/2013  
Registration Date

Texas SOS File Number 0801768069

Registered Agent Name BILL F. BOGLE

Registered Office Street 777 MAIN ST., STE. 1800  
Address FORT WORTH, TX 76102

# **Attachment 'E'**



Quadvest, L.P.  
26926 FM 2978  
Magnolia, TX 77354

Main: 281-356-5347  
Fax: 281-356-5382  
Quadvest.com

November 18, 2015

Executive Director  
Texas Commission on Environmental Quality  
Attn: Water Quality Division  
Wastewater Permits Section/Application Team (MC 148)  
P.O. Box 13087  
Austin, Texas 78711-3087

To Whom It May Concern:

Please find enclosed one original application and three copies for a Domestic Wastewater Discharge Permit Transfer application according to the following:

Type of Application: **Domestic Wastewater Discharge Permit Transfer**

Applicant: **Quadvest L.P.**

Permit Number: **WQ00 14163-001**

Name of the Facility: **Sugartree Wastewater Treatment Facility**

An application fee of \$100.00 has been sent under separate cover to the revenue section as required.

Thank you,

A handwritten signature in black ink, appearing to read 'Jeff Goebel', is written over the typed name. The signature is fluid and cursive, extending to the right across the page.

Jeff Goebel





Quadvest, L.P.  
26926 FM 2978  
Magnolia, TX 77354

Main: 281-356-5347  
Fax: 281-356-5382  
Quadvest.com

November 18, 2015

Texas Commission on Environmental Quality  
Attn: Revenues Section (MC 214)  
P.O. Box 13088  
Austin, Texas 78711-3088

To Whom It May Concern:

Please find enclosed a check for \$100.00 for the processing of an application according to the following.

Type of Application: **Domestic Wastewater Discharge Permit Transfer**

Applicant: **Quadvest L.P.**

Permit Number: **WQ00 14163-001**

Name of the Facility: **Sugartree Wastewater Treatment Facility**

Thank you,

A handwritten signature in black ink, appearing to read 'Jeff Goebel', is written over the printed name.

Jeff Goebel







# Application and Instructions to Transfer a Wastewater Permit or CAFO Permit

## Submission Checklist - Submit This with the Application

Indicate If The Following Are Included In The Application. Additional Blank Spaces Provided for Referencing Applicant's Attachments to the application.

Attachments	Y	N
Required Signature Pages	✓	
Copy Of The Check or Payment Voucher Submitted For Transfer Application Processing Fee	✓	
Core Data Form - Required To Complete Transfer Application	✓	
Lease Agreements – if applicable		✓
Proof of Ownership – Required for CAFO Permits		✓

### For Commission Use Only

Permit Number WQ00 \_\_\_\_\_ EPA I.D. No. \_\_\_\_\_

Expiration Date \_\_\_\_\_ County \_\_\_\_\_ Region \_\_\_\_\_

**1. Applicant General Information**

What is the Legal Name of the entity (applicant) applying for this permit? (*The legal name must be spelled exactly as filed with the Texas Secretary of State, County, or in the legal document forming the entity.*)

a. **Facility Owner:** EMCAD Water and Wastewater, LLC

What is the applicant's mailing address (for use on the permit and permit correspondence) as recognized by the US Postal Service? You may verify the address at:

<http://zip4.usps.com/zip4/welcome.jsp>

Street Number/Name 2492 Matterhorn Dr Street type \_\_\_\_\_ **OR**

P.O. Box \_\_\_\_\_ City Wexford State PA Zip code 15090

Telephone number 724-934-1936 Fax number 724-934-1956

Email address: Donald.Clayton@Tangibl.com

Tax Identification Number issued by the State Comptroller 32050717274

Charter Number issued by the Texas Secretary of State 0801768069

If the applicant is currently a customer with TCEQ, what is the Customer Number (CN)? Search for your CN at:

<http://www12.tceq.texas.gov/crpub/index.cfm?fuseaction=cust.CustSearch>

CN 604519330

If the owner has not yet received a Customer Reference Number a complete Core Data Form(TCEQ-10400) listing the owner as the customer and this facility as the regulated entity must be attached to this application.

b. **Co-Permittee Information** - (Complete only if the operator is required to apply as a co-permittee)

**Co-Permittee Name:** NA

What is the mailing address (for use on the permit and permit correspondence) as recognized by the US Postal Service? You may verify the address at:

<http://zip4.usps.com/zip4/welcome.jsp> Mailing

Street Number/Name \_\_\_\_\_ Street type \_\_\_\_\_ **OR**

P.O. Box \_\_\_\_\_ City \_\_\_\_\_ State TX Zip code \_\_\_\_\_

Telephone number \_\_\_\_\_ Fax number \_\_\_\_\_

Email address: \_\_\_\_\_

Tax Identification Number issued by the State Comptroller \_\_\_\_\_

Charter Number issued by the Texas Secretary of State \_\_\_\_\_

If the applicant is currently a customer with TCEQ, what is the Customer Number (CN)? Search for your CN at:

<http://www12.tceq.texas.gov/crpub/index.cfm?fuseaction=cust.CustSearch>

CN \_\_\_\_\_

If the owner has not yet received a Customer Reference Number a complete Core Data Form (TCEQ-10400) listing the owner as the customer and this facility as the regulated entity must be attached to this application.

- c. **Individual information** - Pursuant to the Texas Water Code 26.027(b), supply the following information when the applicant is an individual.

Male  Female

Full Legal Name:

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

State ID Number: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Street Number/Name \_\_\_\_\_ Street type \_\_\_\_\_

Telephone number \_\_\_\_\_ Fax number \_\_\_\_\_

Email address: \_\_\_\_\_

If the applicant is currently a customer with TCEQ, what is the Customer Number (CN)? Search for your CN at:

<http://www12.tceq.texas.gov/crpub/index.cfm?fuseaction=cust.CustSearch>

CN \_\_\_\_\_

If the owner has not yet received a Customer Reference Number a complete Core Data Form (TCEQ-10400) listing the owner as the customer and this facility as the regulated entity must be attached to this application.

## 2. Contact Information

### a. Application Contact

Identify the person, including a complete mailing address, telephone number, and fax number, authorized to act for the applicant during the processing of the transfer application. The person identified will be contacted if additional information is needed during the transfer process.

First/Last Name: Yvette Castro

Street Number/Name \_\_\_\_\_ Street type \_\_\_\_\_ OR

P.O. Box 409 City Tomball State TX Zip code 77377

Telephone number (281) 356-5347 Fax number (281) 356-5382

Email address: yvettec@quadvest.com

### b. Permit Contact:

Identify the person, including a complete mailing address, telephone number, and fax number, that can be contacted by the agency as needed throughout the term of the permit/registration.

First/Last Name: Donald J Clayton  
Street Number/Name 2492 Matterhorn Dr Street type \_\_\_\_\_ OR  
P.O. Box \_\_\_\_\_ City Wexford State PA Zip code 15090  
Telephone number 724-934-1936 Fax number 724-934-1956  
Email address: Donald.Clayton@Tangibl.com

### 3. Permit/Registration Information

- a. What is the TCEQ Water Quality Permit No.? WQ0014163-001
- b. What is the EPA ID No.?: TX 0122271
- c. What is the permit expiration date?: 5/1/19
- d. Check if applicable (for POTWs only)
- The permit to be transferred requires implementation of an approved pretreatment program by a POTW. (Note: The transferee must contact the Stormwater and Pretreatment Team staff before this application may be processed.)
- e. Check if applicable (for domestic reclaimed water authorizations)
- There is a domestic reclaimed water authorization associated with this permit. (Note: The domestic reclaimed water authorization associated with this permit will be transferred. If you do not want the domestic reclaimed water authorization transferred, please state this and the authorization will be cancelled on the same date the transfer took place.)

### 4. Site Information

- a. TCEQ issued RE Reference Number (RN): Search TCEQ's Central Registry to see if the larger site may already be registered as a regulated site at:  
<http://www12.tceq.texas.gov/crpub/index.cfm?fuseaction=regent.RNSearch>  
RN 101522464
- b. Site Name: Sugartree Wastewater Treatment Facility
- c. County in which the facility is located Parker
- d. Owner of the land where the facility is/will be: (if not the same as the facility owner, please see instructions) EMCAD  
Street Number: 2492 Street Name: 2492 Matterhorn Dr  
City: Wexford State: PA ZIP Code: 15090
- e. Owner of the effluent disposal site (if not the same as the facility owner, please see instructions) NA  
Street Number: \_\_\_\_\_ Street Name: \_\_\_\_\_  
City: \_\_\_\_\_ State: TX ZIP Code: \_\_\_\_\_

f. For CAFOs – please provide one of the following:

Warranty Deed

Property Tax Records

Lease – includes authorization to use the land for the duration of the permit. The owner of the land must be the co-permittee

\_\_\_ Facility Size - indicated in proof of ownership: \_\_\_\_\_ acres ( should be the same as what is authorized in the current permit)

## 5. The Date Transfer of Ownership/Operator Will Occur

Date: 04/01/2016

Please note that the transfer will be processed once the change in ownership occurs. If the anticipated date of transfer of ownership changes, the transferee or the transferor must notify the Applications Review and Processing Team in writing, prior to the above given date. The transferee assumes complete responsibility of the permit/registration once the permit/registration transfer is issued, unless an executed agreement by the transferor and transferee is provided with the transfer application including payment of any outstanding annual fees.

## 6. Reporting and Billing Information

a. Please provide the mailing address for receiving self-reporting/DMR Forms.

Prefix (Mr. Ms, Miss): Mr

First/Last Name: Donald J Clayton Suffix: \_\_\_\_\_

Title: Member Credential: \_\_\_\_\_

Organization Name: EMCAD Water and Wastewater, LLC

Billing Mailing Address: 2492 Matterhorn Dr.

Internal Routing (Mail Code, Etc.): \_\_\_\_\_

City: Wexford State: PA ZIP Code: 15090

Mailing Information if outside USA:

Territory: \_\_\_\_\_ Country Code: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone No.: 724-934-1936 Extension: 724-934-1956

Fax No.: \_\_\_\_\_ E-mail Address: Donald.Clayton@Tangibl.com



Did you know you can submit DMR data on line? Go to Sign up now at: <https://www6.tceq.texas.gov/steers/>

- b. The permittee is responsible for paying the annual fee. The annual fee will be assessed to permits active on September 1 of each year. TCEQ will send a bill to the address provided in this section. The permittee is responsible for terminating the permit when it is no longer needed.

Is the billing address the same as the permittee or co-permittee?

Permittee     Co-permittee     No, fill out this section

Prefix (Mr. Ms, Miss): \_\_\_\_\_

First/Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_

Title: \_\_\_\_\_ Credential: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Billing Mailing Address: \_\_\_\_\_

Internal Routing (Mail Code, Etc.): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Mailing Information if outside USA.

Territory: \_\_\_\_\_ Country Code: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Extension: \_\_\_\_\_

Fax No.: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

- c. Delinquent fees owed.

Do you owe fees to the TCEQ?     Yes     No

If yes, please provide the amount past due, the type of fee, and an identifying number.

\_\_\_\_\_

- d. Delinquent penalties owed.

Do you owe penalties to the TCEQ?     Yes     No

If yes, please provide the amount past due, the type of penalty, and an identifying number.

\_\_\_\_\_

**7. Transferor (Current Permittee)**

Owner of Permitted Facility

I, Simon Sequeira Title President  
(Executive Principal Officer / Ranking Elected Official)

consent to the transfer of the permit and I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. I further certify that I am authorized under 30 Texas Administrative Code '305.44 to sign this document and can provide documentation in proof of such authorization upon request.

Signature: [Handwritten Signature] Date: 11-16-15

**NOTE: ALL APPLICATIONS MUST BEAR THE SIGNATURE AND SEAL OF NOTARY PUBLIC.**

SUBSCRIBED AND SWORN to before me by the said Simon Sequeira  
on this 16th day of Nov., 2015.

My commission expires on the 1st day of Nov 2017.



Mary Helen Voelkel  
Notary Public  
Montgomery, Tx  
County, Texas

## 8. Transferor (Operator of Permitted Facility)

(Operator's signature is required only if the operator is co-permittee on the current permit).

I, \_\_\_\_\_ Title: \_\_\_\_\_  
(Executive / Principal Officer / Ranking Elected Official)

consent to the transfer of the permit and I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. I further certify that I am authorized under 30 Texas Administrative Code '305.44 to sign this document and can provide documentation in proof of such authorization upon request.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE: ALL APPLICATIONS MUST BEAR THE SIGNATURE AND SEAL OF NOTARY PUBLIC.**

SUBSCRIBED AND SWORN to before me by the said \_\_\_\_\_

on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My commission expires on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

(Seal)

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
County, Texas



**9. Transferee (New Site Owner and/or Operator)**

Please refer to page 3 of this application for signature requirements

I, Donald J Clayton Title Member  
(Printed name and title of executive officer of at least the level of V.P. or equivalent)

Name of company: EMCAD Water and Wastewater, LLC

being duly sworn, depose and say: that a change of ownership of the facility for the subject permit has been issued will occur as indicated in the application. As a condition of the transfer, I do hereby declare that:

The transferee will be the owner of the existing treatment facility from which wastewater is discharged, deposited or disposed or the facilities required to comply with the permit will be constructed as described in the application considered by the TCEQ prior to the issuance of the permit.

The transferee possesses a copy of the permit, understands the terms and conditions therein, and does accept and assume all obligations of the permit.

The transferee assumes financial responsibility for the proper maintenance and operation of all waste treatment and disposal facilities required by the permit or which may be required to comply with the permit terms and conditions. The transferee certifies that the transfer is not made for the purpose of avoiding liability for improper actions carried out prior to the date of transfer. Neither is the transfer made for the purpose of transferring responsibility for improper operations to an insolvent entity.

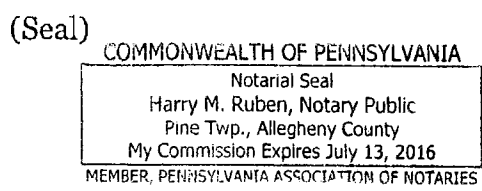
The transferee certifies under penalty of law that this document is, to the best of my knowledge and belief, true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations and revocation of this permit.

Signature: [Handwritten Signature] Date: 11-11-15

SUBSCRIBED AND SWORN to before me by the said Donald J. Clayton on this 11<sup>th</sup> day of November, 2015

My commission expires on the 13<sup>th</sup> day of July, 2016.

[Handwritten Signature]  
Notary Public



COMMONWEALTH OF PENNSYLVANIA  
COUNTY OF ALLEGHENY  
Texas Pennsylvania

\*\* Operator is required to sign only if operator is required to be a co-permittee.

10. **THIS PAGE IS APPLICABLE TO PERMITS THAT INCLUDE COMPOSTING FACILITIES, LAND APPLICATION AND/OR DISPOSAL OF SEWAGE SLUDGE AND THE TRANSFEREE DOES NOT OWN THE LAND WHERE THE DISPOSAL ACTIVITY IS CONDUCTED.**

**Site Operator**

I, \_\_\_\_\_ Title \_\_\_\_\_  
(Type or Printed Name)

understand that I am responsible for operating the site described in the legal description in accordance with the Texas Commission on Environmental Quality requirements in 30 TAC, Chapter 332 and/or 312, the conditions set forth in the permit, and any additional conditions as required by the Texas Commission on Environmental Quality. I also certify under penalty of law that all information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine, imprisonment for violations, and revocation of this permit.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE: ALL APPLICATIONS MUST BEAR THE SIGNATURE AND SEAL OF NOTARY PUBLIC.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

SUBSCRIBED AND SWORN to before me by the said \_\_\_\_\_ on

this \_\_\_\_\_ day of \_\_\_\_\_

My commission expires on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

(Seal)

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
County, Texas