

Control Number: 45522



Item Number: 1675

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## Registration of Submetered OR Allocated **Utility Service** S7503

**NOTE:** Please **<u>DO NOT</u>** include any person or protected information on this form (ex: tax identification #'s, social security #'s, etc.)

Date: 10/06/2016 By: Peter Lee

Docket No. 45522

(this number to be assigned by the PUC after your form is filed)

|  |                              | POC ante          | er your form i      | is mea)     |
|--|------------------------------|-------------------|---------------------|-------------|
| PROPERTY OWNER: Do <u>not</u> enter the name of the owner's contract manager, management company, or billing company.          |                              |                   |                     |             |
| Name HOUSING AUTHORITY OF CITY OF BEAUMONT   |                              |                   |                     |             |
| Mailing Address: 6355 Chinn Ln   | City Beaumont                | State 7           | X. Zip              | 77708       |
| Telephone# (AC) (409) 892-8000   | Fax # (if applicable)        |                   | ,                   |             |
| E-mail toates@nrpgroup.com   |                              |                   |                     |             |
| NAME, ADDRESS, AND TYPE OF PROPERTY WHERE UTILITY SERVICE IS PROVIDED  |                              |                   |                     |             |
| Name Azure Pointe  |                              | . alim i n. • se. | 14 1 40             | , pt.       |
| Mailing Address: 6355 Chinn Ln   | City Beaumont                | State T           | X Zip               | 7,7708      |
| Telephone# (AC) (409) 892-8000   | Fax # (if applicable)        |                   |                     |             |
| E-mail c/o peterlee@conservice.com   |                              |                   |                     | T (N 37)    |
| X Apartment Complex . Condominium . Manufactured Home Rental Community . Multiple-Use Facility                                 |                              |                   |                     |             |
| If applicable, describe the "multiple-use facility" here:  |                              |                   |                     |             |
| INFORMATION ON UTILITY SERVICE   |                              |                   |                     |             |
| Tenants are billed for X Water X Wastewater  | r )                          | X Submetered (    | OR Al               | located *** |
| Name of utility providing water/wastewater  City of  | f Beaumont                   | 3                 |                     | - 3         |
| Date submetered or allocated billing begins (or began) 06/01/2015 Required   |                              |                   |                     |             |
| METHOD USED TO OFFSET CHARGES FOR COMMON AREAS Check one line only.  |                              |                   |                     |             |
| X Not applicable, because X Bills are based on th  | e tenant's actual subm       | etered consump    | tion                |             |
|  | ommon areas <b>nor</b> an in |                   | system              |             |
| All common areas and the irrigation system(s) are metered or submetered:   |                              |                   |                     |             |
| We deduct the actual utility charges for water and wastewater to these areas then allocate the remaining charges among         |                              |                   |                     |             |
| our tenants.   |                              |                   |                     |             |
| This property has an installed irrigation system that is <u>not</u> separately metered or submetered:                          |                              |                   |                     |             |
| We deduct percent (we deduct at least 25 percent) of the utility's total charges for water and wastewater                      |                              |                   |                     |             |
| consumption, then allocate the remaining charges among our tenants.  |                              |                   |                     |             |
| This property has an installed irrigation system(s) that <u>is/are</u> separately metered or submetered:                       |                              |                   |                     |             |
| We deduct the actual utility charges associated with the irrigation system(s), then deduct at least 5 percent of the utility's |                              |                   |                     |             |
| total charges for water and wastewater consumption, then allocate the remaining charges among our tenants.                     |                              |                   |                     |             |
| This property does not have an installed irrigation system:  |                              |                   |                     |             |
| We deduct at least 5 percent of the retail public utility's total charges for water and wastewater consumption, and then       |                              |                   |                     |             |
| allocate the remaining charges among our tenants.  |                              |                   |                     |             |
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| *** IF UTILITY SERVICES ARE ALLOCATED, YO  | OU MUST ALSO CON             | APLETE PAGE T     | WO OF THI           | S FORM ★★★  |
| Send this form by mail with a total of (3) copies to:<br>Filing Clerk, Public Utility Commission of Texas                      |                              |                   | ~ ~                 | 3           |
| 1701 North Congress Avenue   |                              |                   |                     | REI         |
| P.O. Box 13326   |                              |                   |                     | 3 20        |
| Austin, Texàs 78711-3326   |                              |                   |                     | 4 E         |
|  |                              |                   | PUBLIC UTILITY COMM | RECEIVED    |
|  |                              |                   | CLE<br>Y C          | R F         |
|  |                              |                   | 콧물                  | ; E         |
| F  |                              |                   | <u></u> 1           |             |