



Control Number: 45522



Item Number: 2010

Addendum StartPage: 0



Texas Commission on Environmental Quality

Registration of Submetered
or Allocated Utility Service

45522

Registration No. S

Date:

By:

This Box for TCEQ Use Only

CUSTOMER REFERENCE NUMBER

REGULATED ENTITY REFERENCE NUMBER

CN(9 digits)

RN(9 digits)

Send a completed Core Data Form (TCEQB10400) with this registration.

PROPERTY OWNER (A Customer on TCEQ-10400)

Name

Do not enter the name of the owner's contract manager, management company, or billing company.

NAME AND TYPE OF PROPERTY WHERE UTILITY SERVICE IS PROVIDED

(A Regulated Entity on TCEQ-10400)

Name

☒ 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

☒ Water

☒ Wastewater

Both these bills are

☐ Submetered

☒ Allocated

Name of utility providing water/wastewater

Date submetered or allocated billing begins (or began)

☐ Required

METHOD USED TO OFFSET CHARGES FOR COMMON AREAS

Check one line only.

☐ Not applicable, because

☐ Bills are based on the tenant's actual submetered consumption

☐ There are neither common areas nor an installed irrigation 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 not separately metered or submetered.

We deduct percent (which is equal to or greater than 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 is/are 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, then allocate the remaining charges among our tenants.

★★IF UTILITY SERVICES ARE ALLOCATED,

YOU MUST ALSO COMPLETE PAGE TWO OF THIS FORM

Send BOTH this form and the TCEQ Core Data Form by fax to: 512/239B6972 OR by mail to: TCEQ, Utilities & Districts Section, MCB153 PO Box 13087 Austin, TX 78711B3087

If you need help completing this form, call TCEQ's Utilities & Districts Section at 512/239B4691. Additional information about submetered and allocated billing is available at the following site:

http://www.tceq.state.tx.us/permitting/water_supply/ud/submeter.html

If you need help completing the TCEQ's Core Data Form, call our Central Registry Program at 512/239B5175. You also find instructions for completing this form at the following site:

2010

METHOD USED TO ALLOCATE UTILITY CHARGES

Check the box or boxes that describe the allocation method used to bill tenants.

☐ **Occupancy method:** The number of occupants in the tenant's dwelling unit is divided by the total number of occupants in all dwelling units at the beginning of the month for which bills are being rendered.

<input type="checkbox"/> Ratio occupancy method:	Number of Occupants	Number of Occupants for Billing Purposes
The number of occupants in the tenant's dwelling unit is adjusted as shown in the table to the right. This adjusted value is divided by the total of these values for all dwelling units occupied at the beginning of the retail public utility's billing period.	1	1.0
	2	1.6
	3	2.2
	>3	2.2 + 0.4 for each additional occupant

<input checked="" type="checkbox"/> Estimated occupancy method:	Number of Bedrooms	Number of Occupants for Billing Purposes
The estimated occupancy for each unit is based on the number of bedrooms as shown in the table to the right. The estimated occupancy in the tenant's dwelling unit is divided by the total estimated occupancy in all dwelling units regardless of the actual number of occupants or occupied units.	0 (Efficiency)	1
	1	1.6
	2	2.8
	3	4.0
	>3	4.0 + 1.2 for each additional bedroom

☒ **Occupancy and size of rental unit** ☐ percent (which is equal to or greater than 50%) of the utility bill for water/wastewater consumption is allocated using the occupancy method checked above. The remainder is allocated according to either:
 \$the size of the tenant's dwelling unit divided by the total size of all dwelling units, OR
 \$the size of the space rented by the tenant of a manufactured home divided by the size of all rental spaces.

☐ **Submetered hot water:** The individually submetered hot water used in the tenant's dwelling unit is divided by all submetered hot water used in all dwelling units.

☐ **Submetered cold water is used to allocate charges for hot water provided through a central system:**
 The individually submetered cold water used in the tenant's dwelling unit is divided by all submetered cold water used in all dwelling units.

☐ **As outlined in the condominium contract.** | Describe

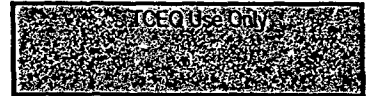
☐ **Size of manufactured home rental space:** The size of the area rented by the tenant divided by the total area of all rental spaces.



Size of the rented space in a multiBuse facility: The square footage of the space rented by the tenant divided by the total square footage of all rental spaces.



TCEQ Core Data Form



For detailed instructions regarding completion of this form, please read the Core Data Form Instructions or call 512-239-5175.

SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided.)		
<input checked="" type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
<input type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)	<input type="checkbox"/> Other	
2. Customer Reference Number (if issued)	Follow this link to search for CN or RN numbers in Central Registry**	3. Regulated Entity Reference Number (if issued)
CN		RN

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)	
<input checked="" type="checkbox"/> New Customer		<input type="checkbox"/> Update to Customer Information	
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)		<input type="checkbox"/> Change in Regulated Entity Ownership	
The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).			
6. Customer Legal Name (If an individual, print last name first: e.g.: Doe, John)		If new Customer, enter previous Customer below:	
P/E Village by the Bay, LLC d/b/a VISTA Pointe Apts			
7. TX SOS/CPA Filing Number	8. TX State Tax ID (11 digits)	9. Federal Tax ID (9 digits)	10. DUNS Number (if applicable)
802215945		611759440	
11. Type of Customer:		Partnership: <input type="checkbox"/> General <input checked="" type="checkbox"/> Limited	
<input checked="" type="checkbox"/> Corporation		<input type="checkbox"/> Individual	
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship	
12. Number of Employees		13. Independently Owned and Operated?	
<input checked="" type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>not independently-owned third party-managed</i>	
14. Customer Role (Proposed or Actual) - as it relates to the Regulated Entity listed on this form. Please check one of the following:			
<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Owner & Operator			
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> Voluntary Cleanup Applicant <input type="checkbox"/> Other:			
15. Mailing Address:			
1006 S. 6th Street			
City: LA Porte State: TX ZIP: 77571 ZIP + 4:			
16. Country Mailing Information (if outside USA)		17. E-Mail Address (if applicable)	
		vistapointeapts@att.net:com	
18. Telephone Number		19. Extension or Code	
(281) 471-7722			
		20. Fax Number (if applicable)	
		() -	

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If 'New Regulated Entity' is selected below this form should be accompanied by a permit application)		
<input checked="" type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input type="checkbox"/> Update to Regulated Entity Information		
The Regulated Entity Name submitted may be updated in order to meet TCEQ Agency Data Standards (removal of organizational endings such as Inc, LP, or LLC).		
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)		

23. Street Address of the Regulated Entity: (No PO Boxes)							
	City		State		ZIP		ZIP + 4
24. County							

Enter Physical Location Description if no street address is provided.

25. Description to Physical Location:							
26. Nearest City	Scabrook, TX				State	Nearest ZIP Code	
27. Latitude (N) In Decimal:		28. Longitude (W) In Decimal:					
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds		
29. Primary SIC Code (4 digits)		30. Secondary SIC Code (4 digits)		31. Primary NAICS Code (5 or 6 digits)		32. Secondary NAICS Code (5 or 6 digits)	
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)							
Multifamily							
34. Mailing Address:							
	City		State		ZIP		ZIP + 4
35. E-Mail Address:							
36. Telephone Number			37. Extension or Code		38. Fax Number (if applicable)		
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39. TCEQ Programs and ID Numbers Check all Programs and write in the permits/registration numbers that will be affected by the updates submitted on this form. See the Core Data Form instructions for additional guidance.

<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Emissions Inventory Air	<input type="checkbox"/> Industrial Hazardous Waste
<input type="checkbox"/> Municipal Solid Waste	<input type="checkbox"/> New Source Review Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS
<input type="checkbox"/> Sludge	<input type="checkbox"/> Storm Water	<input type="checkbox"/> Title V Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil
<input type="checkbox"/> Voluntary Cleanup	<input type="checkbox"/> Waste Water	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:

SECTION IV: Preparer Information

40. Name:	Michelle Farmer As Agent for Owner		41. Title:	Sr. District Supervisor
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address	
(281) 367-5002		(281) 367-1711	mfarmer@edinsg.com	

SECTION V: Authorized Signature

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 6 and/or as required for the updates to the ID numbers identified in field 39.

Company:	Farmer As Agent for Owner	Job Title:	Sr. District Supervisor
Name (In Print):	Michelle Farmer	Phone:	(281) 367-5002
Signature:	M. Farmer	Date:	12/14/16