



Control Number: 48342



Item Number: 24

Addendum StartPage: 0

P.U.C. DOCKET NO. 48342

RECEIVED

**RATEPAYER PROTEST**

2010 JUL 19 AM 9:27

If you wish to PROTEST the proposed rate change, you must submit this form and 10 copies to:

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

Unless protests are received from at least 10% of ratepayers or from any affected municipality, or the Commission Staff requests a hearing, no hearing will be held and the rates will be effective as proposed.

**CUSTOMER INFORMATION (to be completed by customers submitting protests)**

First Name: Daniel Last Name: Johnstonbaugh

Phone Number: 940-224-9447 Fax Number: \_\_\_\_\_

Address, City, State: 83 County Road 4867 Dayton, TX 77535

Location where service is received: \_\_\_\_\_

(if different from the mailing address)

Please fill out the following:

**I wish to PROTEST the following proposed rate action/s:**

- ☒ Water Rate Change ☐ Sewer Rate Change ☐ Both Water and Sewer Rate Change  
☐ Other (please specify below)

Signature of Protester:

Daniel Johnstonbaugh

Date: 6-27-10

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

Hearing- and speech-impaired individuals with text telephones may contact the PUC's Customer Assistance  
Hotline at  
**512-936-7136**

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P.U.C. DOCKET NO. 48342

**NOTICE OF PROPOSED RATE CHANGE  
PURSUANT TO TEX. WATER CODE § 13.1871**

Gum Island utility

12042

Company Name

CCN Number(s)

has filed a rate change application with the Public Utility Commission of Texas (Commission or PUC). The application may be reviewed online at [interchange.puc.texas.gov](http://interchange.puc.texas.gov). You may also inspect a copy of the rate change application at your utility's office at the address below or at the Commission's office (1701 N. Congress Ave, Austin, TX 78701). The proposed rates will apply to service received after the effective date provided below, unless modified or suspended by the Commission. If the Commission receives a sufficient number of protests, separately or in a combined protest letter, from at least \_\_\_\_\_ [number of] ratepayers (10 percent of the utility's customers over whose rates the Commission has original jurisdiction) or from any affected municipality before the 91st day after the proposed effective date, the matter will be set for hearing. See Protest Form on the next page for instructions on how to protest.

**EFFECTIVE DATE OF PROPOSED INCREASE:**

8/1/18

(must be at least 35 days after notice is provided to customers and 35 days after application is filed)

(Proposed rates requested by the utility are not final. The Commission may modify the rates and order a refund or credit against future bills all sums collected during the pendency of the rate proceeding in excess of the rate finally ordered plus interest.)

**Reason(s) for proposed Rate Change:**

Insufficient funds for operation and maintenance.

**BILLING COMPARISON**

**Water**

Existing	5,000 gallons:	\$ <u>23.<sup>00</sup></u> /mo	Proposed	5,000 gallons:	\$ <u>51.<sup>00</sup></u> /mo
Existing	10,000 gallons:	\$ <u>33.<sup>00</sup></u> /mo	Proposed	10,000 gallons:	\$ <u>101.<sup>00</sup></u> /mo
Existing	30,000 gallons:	\$ <u>13.<sup>00</sup></u> /mo	Proposed	30,000 gallons:	\$ <u>101.<sup>00</sup></u> /mo

**Sewer**

N/A

Existing	5,000 gallons:	\$ _____ /mo	Proposed	5,000 gallons:	\$ _____ /mo
Existing	10,000 gallons:	\$ _____ /mo	Proposed	10,000 gallons:	\$ _____ /mo

Gum Island utility

Subdivision(s) or System(s) Affected by Rate Change

11015 sheldon rd. Ste 102 Houston TX 77044

Company Address

City

State

Zip

281-456-0883

Company Phone Number

Annual Revenue Increase

6/1/18  
Date Notice Delivered

N/A

Date of Last Rate Change

20<sup>th</sup> of every month  
Date Meters Typically Read

\* Prior to providing notice, the utility shall file a request for the assignment of a docket number for the application.

**AFFIDAVIT**

STATE OF TEXAS

COUNTY OF Liberty

I, Hannah Krebs being duly sworn, file this **NOTICE OF**  
**PROPOSED RATE CHANGE** Records coordinator at East Houston  
as Utilities

(indicate relationship to Utility, that is, owner, member of partnership, title as officer of corporation, or other authorized representative of Utility); that, in such capacity, I am qualified and authorized to file and verify such NOTICE; and that all statements made and matters set forth herein are true and correct.

I further represent that a copy of the attached NOTICE was provided by mail

to each customer or other affected party on or about June 1<sup>st</sup>, 20 18 (method of delivery)

Hannah Krebs  
AFFIANT  
(Utility's Authorized Representative)

Gum Island Utility  
NAME OF UTILITY

If the Affiant to this form is any person other than the sole owner, partner, officer of the Utility, or its attorney, a properly verified Power of Attorney must be enclosed.

SUBSCRIBED AND SWORN TO BEFORE ME,  
this the one day of June, 20 18, to certify  
which witness my hand and seal of office.

SEAL



Brittany Lemelle  
NOTARY PUBLIC IN AND FOR THE  
STATE OF TEXAS  
Brittany Lemelle  
PRINT OR TYPE NAME OF NOTARY

MY COMMISSION EXPIRES Sep 8 2020

## NOTICE OF PROPOSED RATE CHANGE – WATER

CURRENT RATES			PROPOSED RATES		
Monthly base rate including <u>5,000</u> gallons			Monthly base rate including <u>5,000</u> gallons		
Meter Size:			Meter Size:		
<b>RESIDENTIAL</b>			<b>RESIDENTIAL</b>		
5/8" or 3/4"	\$	<u>23.<sup>00</sup></u>	5/8" or 3/4"	\$	<u>51.<sup>00</sup></u>
1"	\$		1"	\$	
1 1/2"	\$		1 1/2"	\$	
2"	\$		2"	\$	
3"	\$		3"	\$	
Other:		\$	Other:		\$
<b>GALLONAGE CHARGE:</b>			<b>GALLONAGE CHARGE:</b>		
TIER	VOLUME	CHARGE per 1000 gals.	TIER	VOLUME	CHARGE per 1000 gals.
Tier 1	1 to <u>5,000</u> gals.	\$ <u>2.<sup>00</sup></u> /1000 gals.	Tier 1	1 to <u>5,000</u> gals.	\$ <u>2.<sup>00</sup></u> /1000 gals.
Tier 2	to gals.	\$ /1000 gals.	Tier 2	to gals.	\$ /1000 gals.
Tier 3	to gals.	\$ /1000 gals.	Tier 3	to gals.	\$ /1000 gals.
Tier 4	to gals.	\$ /1000 gals.	Tier 4	to gals.	\$ /1000 gals.
Tier 5	to gals.	\$ /1000 gals.	Tier 5	to gals.	\$ /1000 gals.
<b>MISCELLANEOUS FEES</b>			<b>MISCELLANEOUS FEES</b>		
Tap Fee		\$ <u>250.<sup>00</sup></u>	Tap Fee		\$ <u>250.<sup>00</sup></u>
Reconnect fee: Non-payment		\$ <u>25.<sup>00</sup></u>	Reconnect fee: Non-payment (Maximum - \$25.00)		\$ <u>25.<sup>00</sup></u>
Customer's Request		\$	Customer's Request		\$
Transfer Fee		\$	Transfer Fee		\$
Late Charge		\$ <u>5.<sup>00</sup></u>	Late charge: (Indicate either \$5.00 or 10%)		\$ <u>5.<sup>00</sup></u>
Returned Check Charge		\$	Returned Check Charge		\$
Deposit		\$ <u>50.<sup>00</sup></u>	Deposit (Maximum \$50.00)		\$ <u>50.<sup>00</sup></u>
Meter test fee		\$	Meter test fee (Maximum - \$25.00)		\$

Regulatory Assessment of 1% is added to base rate and gallonage charges. Additional fees and meter sizes may be shown on a separate page.

If applicable, list any bill payment assistance programs to low income Ratepayers.

N/A

# NOTICE OF PROPOSED RATE CHANGE -SEWER

N/A

CURRENT RATES		PROPOSED RATES	
Monthly base rate including _____ gallons		Monthly base rate including _____ gallons	
Meter Size:		Meter Size:	
<b>RESIDENTIAL</b>		<b>RESIDENTIAL</b>	
5/8" or 3/4" \$		5/8" or 3/4" \$	
1" \$		1" \$	
1 1/2" \$		1 1/2" \$	
2" \$		2" \$	
3" \$		3" \$	
Other: \$		Other: \$	
<b>GALLONAGE OR FIXED CHARGE:</b>		<b>GALLONAGE OR FIXED CHARGE:</b>	
\$ _____		\$ _____	
<input type="checkbox"/> per month; OR		<input type="checkbox"/> per month; OR	
<input type="checkbox"/> for each additional 1,000 gallons over the minimum.		<input type="checkbox"/> for each additional 1,000 gallons over the minimum.	
Gallorage charges are determined based on average consumption for winter period which includes the following months:		Gallorage charges are determined based on average consumption for winter period which includes the following months:	
<b>MISCELLANEOUS FEES</b>		<b>MISCELLANEOUS FEES</b>	
Tap Fee \$		Tap Fee \$	
Reconnect fee:		Reconnect fee:	
Non-payment \$		Non-payment \$	
		(Maximum - \$25.00)	
Customer's Request \$		Customer's Request \$	
Transfer Fee \$		Transfer Fee \$	
Late Charge \$		Late charge: (Indicate	
		either \$5.00 or 10%) \$	
Returned Check Charge \$		Returned Check Charge \$	
Deposit \$		Deposit \$	
		(Maximum \$50.00)	
Meter test fee \$		Meter test fee \$	
		(Maximum - \$25.00)	

Regulatory Assessment of 1% is added to base rate and gallonage charges. Additional fees and meter sizes may be shown on a separate page.

If applicable, list any bill payment assistance programs to low income Ratepayers.

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