

Control Number: 48342



Item Number: 27

Addendum StartPage: 0

I have provided the required 10 copies for order number 48342 per Andrew with the PUCs remest Fig. 1

~ 2018 JUL 26 PM 12: 25

and the country

Thank you,

Hannah Krebs

(409) 277-1087

PUBLIC UTILITY COMMISSION FILING CLERK

## **AFFIDAVIT**

STATE OF TEXAS	
COUNTY OF HAVYIS	<b>)</b>
other authorized representative o	being July sworn, file this NOTICE OF  RECORD COOVINATOR OF East HOUSTON hat is, owner, member of partnership, title as officer of corporation, or f Utility); that, in such capacity, I am qualified and authorized to file at all statements made and matters set forth herein are true and correct.
I further represent that a copy of by	f the attached NOTICE was provided  Mul
to each customer or other affect	ed party on or about TUILY TOTA, 20 18
	AFFIANT (Utility's Authorized Representative)
	GHAN-ISIAND HATILITY
If the Affiant to this form is any pattorney, a properly verified Pow	person other than the sole owner, partner, officer of the Utility, or its er of Attorney must be enclosed.
SUBSCRIBED AND SWORN To this the day which witness my hand and seal of the seal of	ay of $\frac{\int u/4}{\sqrt{20}}$ , 20 $\frac{18}{\sqrt{20}}$ , to certify
SEAL	NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS
BRITTANY MARIE LEMELLE My Notary ID # 130812325 Expires September 8, 2020	PRINT OR TYPE NAME OF NOTARY  MY COMMISSION EXPIRES 5-P B, ZUZU
-	<i>I</i> /

		UTILITY NAME: SCHEDULES - CI	White LASS B RATE/T REQUIREMEN	ARIFI CHÂN	um Isla	nd utility)
		PUC Docket No. 48342	Test Year End:		17	
Α	В	C	D	E	F=D+E	G
		,	Historical	K&M	Adjusted	
			Test Year	Changes	Test Year	
Line	Acct.	Account Name				Reference/
H .	No.	recount Name				Instructions
- 140.	110.	Volume related expenses:				Tist dottorio
ī	610	Purchased water	N/A			Schedule II-3
2	615	Power Expense-production only	720.00		720	Schedule II-4
3	618	Other volume related expenses	ว่าชั่ว	1	2787	Schedule II-5
4		Total volume related exp.	3502."		3502.	Add Lines 1-3
		Non-volume related expenses:				
5	601-1	Employee labor	<i>ब्र</i> ४००	<del> </del>	1	Schedule II-6, Line 1
6	620	Materials	192	<del> </del>	<b> </b>	Schedule II-7
7	631-636		192	<del>                                     </del>	<del> </del>	Schedule II-8
8	650	Transportation expenses	1530	ļ — — — — — — — — — — — — — — — — — — —		Schedule II-9
9	664	Other plant maintenance	3700	1		Schedule II-10
10		Total non-volume related exp.	8228		i	Add Lines 5-9
		Admin. & general expenses:	3 200			
11	601-2	Office salaries	1632	<u> </u>	<b></b>	Schedule II-6, line 2
12	601-3	Mgmt. salaries	1920			Schedule II-6, line 3
13	604	Employee pensions & benefits	0			Schedule II-11
14	615	Purchased power-Office only	435			Schedule II-4
15	670	Bad debt expense	0			Schedule II-12
16	676	Office services & rentals	576			Schedule II-13
17	677	Office supplies & expenses	288			Schedule II-14
18	678	Professional services	200			Schedule II-15
19	684	Insurance	U			Schedule II-16
20	666	Regulatory (rate case) expense	0			Schedule II-17
21	667	Regulatory expense (other)	0			Schedule II-18
22	675	Miscellaneous expenses	0			Schedule II-19
23		Total admin. & general expense	5051			Add Lines 11-22
24		Total operating Expenses	16,78			Lines 4 + 10 + 23
25	403	Depreciation	1243			Sch III-3, Col E, Line 50
26	408	Taxes Other than Income	200			Sch IV(b), Line 8
27	409/10	Income Tax Expense	3456.1			Schedule V, Line 7
28		TOTAL EXPENSES	21.1080			
29		TOTAL HISTORIC REVENUE	8357			Sch I-2, Line 6
30		HISTORICAL TEST YEAR RETURN	8387			Line 30 less Line 29
31		REQUESTED RETURN	0-20		D	Schedule III-1, Line 3
<del> </del>	<b></b>					<del> </del>
32	<b>——</b>	TOTAL REVENUE REQUIREMENT			21680	Line 30 plus Line 34
33		REQUESTED ANNUAL REVENUE INCREASE		(to notice)	13,293	Line 32 less Line 29
7,1		HVCALAGE		(to nonce)	1	Line 26 divided by Line
34		PERCENTAGE INCREASE			128.21	33
25		ree. OTHER REVENUES			325.00	Sch. II-3(b), Col. D, Line 8
35 36	<del> </del>	LESS: OTHER REVENUES Revenue for Rate Design		(to VI, line 1)		Line 33 minus Line 35
20		revenue for reace Design		((v v 1, 11116 1)	121,355	True 33 minus Pine 33

## P.U.C. DOCKET NO. 48342

## NOTICE OF PROPOSED RATE CHANGE \_\_ PURSUANT TO TEX. WATER CODE § 13.1871

East H	ouston	uni	140		120	42		
•			•		•	`		-
			CCN Ni	ımber(s)				
application may application at you TX 78701). The por suspended by combined protest rates the Commis	be reviewed or ur utility's offic proposed rates the Commission t letter, from at sion has origina	nline at inte ee at the add will apply to on. If the least	erchange.puc.t dress below or o service recei Commission 1 [number of] 1 on) or from any	exas.gov. at the Com ved after the eccives a seatepayers ( affected n	You may also amission's office effective date sufficient numb (10 percent of the nunicipality before the sufficient of the nunicipality before manufacture and the sufficient of the nunicipality before the sufficient of the suffi	as (Commission or Pinspect a copy of the received (1701 N. Congress As provided below, unlesser of protests, separate utility's customers for the 91st day after the page for instructions	rate change Ave, Austin, ss modified tely or in a over whose he proposed	,
	5 days after not quested by the uti	tice is provid	ded to custome final. The Com	r <mark>s and 35 da</mark> mission may	modify the rate	tion is filed) s and order a refund or ce finally ordered plus inte		
Reason(s) for p	proposed Rat	e Change	•					
Insuff	icient	fund	13 for	opera	tion a	nd maint	enance	2
BILLING COI Water	MPARISON							
Existing	5,000 ga	ıllons:	\$ 23 1	/mo	Proposed	5,000 gallons:	\$ 51.	/mo
Existing		•	\$ 753.0	/mo	Proposed	10,000 gallons:	\$ 121.	/mo
Existing	; 30,000 g	;allons:	\$ 13.	/mo	Proposed	30,000 gallons:	\$ 101.00	/mo
Sewer N/A Existing	5,000 ga	llone:	\$	/mo	Proposed	5,000 gallons:		/mo
Existing	_		\$	/mo	Proposed	10,000 gallons:	\$	/mo
whiteu	oing (qu	-	and Ut	— ility)	-		,	
	S	Subdivision	(s) or System(	s) Affected	by Rate Chang	ge	management of the state of the	
	Meldon any Address	rd.	HOUSTOL		T State Zi	7044		
281-40	56-0887							
Compan	y Phone Numb	er			C			
4/5/4	45.			7-	10-18			
	Revenue Incre	ase	^	Date × th	Notice Deliver	cu		
NA	-4674 D :-	- Cl		0,,,0		mointh	<del></del>	
D	ate of Last Rate	e Change	Da	ite Meters	Typically Read	•		

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

## NOTICE OF PROPOSED RATE CHANGE -WATER PROPOSED RATES **CURRENT RATES** 5,000 gallons Monthly base rate including gallons Monthly base rate including Meter Size: Meter Size: RESIDENTIAL RESIDENTIAL 5/8" or 3/4" 5/8" or 3/4" \$ \$ 1 1/2" \$ 1 1/2" \$ \$ \$ 3" 3" \$ \$ \$ Other: \$ Other: **GALLONAGE CHARGE: GALLONAGE CHARGE: VOLUME** CHARGE per 1000 TIER **VOLUME** CHARGE per 1000 TIER to 5,001 gals. \$ /1000 gals. to 5,001 gals. /1000 gals. Tier 1 Tier 1 /1000 gals. Tier 2 \$ /1000 gals. Tier 2 \$ to gals. to gals. /1000 gals. Tier 3 \$ /1000 gals. Tier 3 gals. \$ gals. to to Tier 4 /1000 gals. Tier 4 /1000 gals. gals. | \$ to gals. to /1000 gals. Tier 5 gals. 1 \$ /1000 gals. Tier 5 gals. to to **MISCELLANEOUS FEES MISCELLANEOUS FEES** \$ 200.0 250. Tap Fee Tap Fee Reconnect fee: Reconnect fee: Non-payment Non-payment \$ 25-3 (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 \$ 50.00 (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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