

Control Number: 48918



Item Number: 247

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ASS "C" WATER COMPANY PUC ANNUAL REPORT OF

48918 CCN Number

Official Company Name:

siesta Estates Utilities

D/B/A Name(s)

TO THE
PUBLIC UTILITY COMMISSION
OF TEXAS

For the Year Ended ________

Annual Report for Class C Water and/or Sewer Utilities

PUBLIC UTILITY COMMISSION OF TEXAS 1701 N. CONGRESS AVE., PO BOX 13326, AUSTIN, TX 78711-3326 pursuant to TWC § 13.136

I. NAME OF UTILITY, OFFICE MAILING ADDRESS AND AREA SERVED

1	Utility Name: Siesta Estates Water Utility
	List all assumed name(s) or d/b/a names:
2	Certificate of Convenience and Necessity No. 12680 Calendar Year Ending 2018
3	Street Address: / 3105ta Lane
F	City or Town: Amarillo, TX 79/18 CCN No.:
5	Email Address
6	County: Randa// Zip Code 79/18
7	TCEQ PWS Number(s)
8	Water Quality Dicharge Permit Number(s) 191003
	II. TYPE OF ORGANIZATION AND PRINCIPAL OFFICERS
9	Type of Ownership: Corporation: Partnership: Individual: Other:
10	If a corporation, list names and titles of the officers. If an individual or partnership, list the name of the individual or each partner and provide the title for each. For parterships, please provide the percentage of ownership for each partner. Sruce B. Frank Fresident
11	If the controlling ownership of this utility changed during the last twelve (12) months, state the date of ownership change and the name and address of the prior owner.
12 13	Date the utility was formed or incorporated: Is the utility under common ownership or control by another corporation? Y N If yes, by
	III. PERSON TO CONTACT REGARDING THE INFORMATION SUPPLIED ON THESE FORMS
1-1	Name and Title: Amy Chrisman
15	Address: 316 Mid Valley Center #132
16	City: (armel, CA 93923
17	Name and Title: Amy Chrisman Address: 316 Mid Valley Center #132 City: Carmel, CA 93923 Telephone Number with Area Code: 831 - 620 - 1100
18	Cell Phone Number with Area Code:
19	Fax Number with Area Code:
20	e-mail address:
21	If not an officer, owner or employee, give name of firm employed by:

1. Balance Sheet

Name of Utility: 1185 ta Estat	tes Water	Utility	
Lin	End of Year	End of Prior Year	
e #	mm/dd/yyyy	mm/dd/yyyy	
<u>UTILITY PLANT</u>	7777		
1 101 Utility Plant in Service		•	
2 TOTAL UTILITY PLANT	= *	f -	
3 108 Less: Accumulated Amortization			
4 110 Less: Accumulated Depreciation	13908	5762	
5 NET UTILITY PLANT	10/0	+ - 0 / 0 0	
6 <u>CURRENT ASSETS</u>	XXXX	XXXX	
7 131-135 Cash	11677	_	
8 141-143 Accounts Receivable	11011	- 1 1004 - 1	
9 151 Plant Materials and Supplies (not previously	expensed)	•	
10 171-174 Other Current Assets		63196	
11 TOTAL CURRENT ASSETS	U J I I L	. 65770	
12 TOTAL ASSETS*	part of the reservoir of the second of the s	L	ine 5 plt
LIABILITIES & EQUITY EQUITY 13 201 Common Stock			
14 211 Other paid in capital	4	(104705)	
15 215 Retained Earnings	(32347	(104705)	
16 218 Proprietary Capital			
17 TOTAL STOCKHOLDERS' EQUITY			
LONG-TERM DEBT	XXXX	XXXX	
18 224 Long-term debt (more than 1 year)		,	
CUDDENT LIADU ITIES (loss than 1 moon)	XXXX	XXXX	
CURRENT LIABILITIES (less than 1 year) 19 231 Accounts Payable	XXXX	XXXX	
20 232 Notes Payable	•		
21 241.0 Other Current Liabilities	i		
TOTAL CURRENT LIABILITIES		<u>;</u>	
TOTAL CONNENT MADILITIES	XXXX	. XXXX	
OTHER LIABILITIES and DEFERRED CREDIT	<u> </u>		
22 253 Other Deferred Credits	•		
23 271-272 Net Contributions in Aid of Const			
24)TAL OTHER LIABILITIES and DEFERRED CREDITS		The state of the s	
25 TOTAL LIABILITIES & EQUITY*			

Add NARUC accounts as needed, and if not shown above.

Name of Utility: 5/25/0 LS	ements of In	come Later (11	
	Water	Sewer	Total
Line #	Report Year	Report Year	Report Year
Report Calendar Year <u>20/8</u>		1	
	12054	В	C=A+B
1 Total Revenue:	12054	: 	-
Operating Expenses:			
2 601 O & M Salaried Labor	23050		
3 604 Employee Benefits			
4 631, 635, 636 O & M Contract labor	1		3.5
5 620 Operating/Maint Supplies	1244		
6 610 Purchased Water	+ / - C	11	! !
7 615 Purchased Power	34	() '	- }
8 635 Testing Expense			
9 618 Chemicals	-		- 1
10 656-659 Insurance			•
11 601 General Office Salaries	,		
12 675 General Office Expenses	93		
13 632 Contract Accounting	, //		
14 633 Legal	ţ		:
15 634 Management	743	,	
16 666 Amortization- Rate Case Expense	100	/ .	
17 403 Depreciation Expense	8147		
18 667-675 Other Misc. Expenses			
Taxes:	XXXX	XXXX	XXXX
19 409 Federal Income Taxes			
20 409.0 State Franchise Taxes/Reg Asses		\ .	
21 408 All Other Taxes - / 150 146	564	\	
21 408 All Other Taxes - Licenses 22 Total Expenses	2.2 804 \$-	\$-	Ş-
	10007/		·
23 Net Operating Income	\$	\$.\$-
20 Tree of ormer of viscosity	-		Τ !
24 421, 433 Non-Operating Income	1		•
Non-Operating Deductions:	<u>.</u>		•
25 426 Other	ŧ,	(
26. 427 Interest		` \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ı
27 Net Income	1184/1	/ <u>\$-</u> .	\$-;
—· ,•· •- ····· · · · · · · · · · · · · · ·	(0)		

3. Water Plant-in-Service - changes since the last Annual Report

Name of Utility: Siesta Estates Water Utility

Date Plant Instal led/Retired mm/yyyy	Plant Addition List Major Items by	s Amounts	Plant Retireme List Major Items by	nts Amounts	Plant Adjust ments	Total Change the Last Annual Repo
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		\$:				. 90,
•	TOTALS	\$0	•	\$0	\$0	\$0

3-S. Sewer Plant-in-Service - Changes since the last Annual Report

	Name of Utility:	Siesta Estai	tes Water	- Uti	lity	
	Date Plant Instal led/Retired mm/yyyy	Plant Additions List Major Items by Amounts	Plant Retirem List Major Items by	ents Amounts	Plant Adjust ments	Changes Since the Last Annual Repo
'.VATER				; • ,	1 -	\$0
	*		5	<u>!</u>		\$0
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		TOTALS \$0		\$0	\$0,	\$0

Siesta Estates Water Utility

4. Other Operating Information

Connection information	End of Year mm/dd/vvv	End of Prior Year	Connection information	End of Year	End of Prior Year
WATER:	Y Y	mm/dd/vyvy	SEWER:		
1 Number of active water connect	ions $\sqrt{89}$	189	Number of active sewer connecti	ions	
5/8" or 3/4"		, , ,	Residential	-	•
3/4"		-	Non-residential		-
1"		ĺ			•
1 1/2"	\$		\ ;		
2"			\ ;		
List all additional meter sizes	• }	†	List all additional meter sizes	150	-
Unmetered water connection			Unmetered water connections	1	
VICE 1	i	<u>:</u>	Tours I	ίX	-
2 Number of inactive water conne	` `	1	Number of inactive water conne		
5/8" or 3/4"		-	manuser of indente water Conne	1	•
3/4"	i	‡	1 .	J	-
1"		<u>‡</u>		-	-
1 1/2"	į.				
2"	ř.		\ \		
List all additional meter sizes	- ;	•	List all additional meter sizes;		
List an admitorial meter sizes	• [1	List an additional meter sizes		;
Unmetered, inactive connecti	one	1	Unmetered, inactive connection	272.0	
Offinetered, mactive confrecti	, O112		! Hactive confiection	3115	1
3 Number of active sewer connect	iona II	`	Number of active serves consects	000	
4 Number of active sewer connective sewer sewer connective sewer connective sewer connective sewer sewer connective sewer sewe		1 /+	Number of active sewer connecta Number of inactive sewer connecta		•
4 Millimer of mactive sewer count	, cuons	t	Number of mactive sewer connec	CHURS	•
5 Total gallons purchased		•	İ		
6 Total gallons pumped	L -		i		
Total Water Produced	·	-	I 1		ŧ
7 Total gallons sold	,				1
8 Gallons unaccounted for	F	-1	Ì		÷
o danono anaccomica ior	•	i	Total amount of sewer treated (ga	allons)	•
Management and Operations			Yes or No	,	
1. Do you have an Application form o		cess for new	~ ^		
2. Do you have a copy of your approv					
drought contingency plan for custo			; yc 3		
3. Do you have written operating pro			tions? $\sqrt{\rho}$.		
4. Do you have a written emergency			Y04		
5. Do you have written personnel pol			Y03		
6. Do you have risk management and	safety proce	dures?	yes		
7. Do you have customer service policy			collection)? المراح		
8. Do you prepare an annual written	budget for fir	nancial plann	ing purposes? Ve 5		
9. Provide a list of all affiliates and er	itities under (Common Con	trol (if any). No		
10. If you purchase wholesale water			ist the name(s) of the wholesaler		
and describe the service(s) purchased from each. $\mathcal{N}_{\mathscr{Q}}$					
11. If you have a current capital imp	rovement/re	placement pl	an, please attach a copy. $\mathcal{N}_{\mathcal{O}}$		

5. Affiliated Transactions

Charges by an Affiliate to the Reporting Utility

Name of Affiliated company:	
x /-	

NARUO	C Account and/or type of service	Total Affilia ted Compan y		Total for report ing entity
Account #	Account name or type of service	(Dollars transacted)	(Dollars transacted)	(Dollars transa cted)
		A		
•				!
				1

Charges by an Reporting Utility to Affiliates

Name of Affiliated company:

NARU	C Account and/or type of service	Total Affilia ted Compan y	1	Total for report ing entity
Account #	Account name or type of service	(Dollars transacted)	(Dollars transacted)	(Dollars transa cted)
		A		

SIESTA ESTATES Water (1/1/1/4 For the Year Ended 20/8

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VER	171°	-H	.11	ωN

OATH
(To be made by the officer having control of the accounting of the respondent)
State of State of
County of Monterey as:
May (Norman) makes oath and says that he/she is bookkeeper (Official tiple of affiant)
OF SIESTA ESTATES Water 471/11 (Exact legal title or name of the respondent)
The signed officer has reviewed the report.
Based on the officer's knowledge, the report does not contain any untrue statements of a material fact or omit to state a material fact necessary in order to make the statements made, in light of the circumstances under which such statements were made, not misleading.
Based on such officer's knowledge, the financial statements, and other financial information included in the report, fairly present in all material respects the financial condition and results of operations of the issuer as of, and for, the periods presented in the report.
He/she swears that all other statements contained in the said report are true, and that the said report is a correct and complete statement above-named respondent during the period of time from and including ////////////////////////////////////
Subscribed and sworn to and before me, a VINITY D. COMEN NOTARY VINIC
My commission expires Murch 10, 2022 (Signature of officer authorized to administer oaths) VANITY O CORREA NOTICE CHIFTONIA
SUPPLEMENTAL OATH (By the president or other chief officer of the respondent) (By the president or other chief officer of the respondent)
State ofas:
County of
make:
(Name of affiant) (Official title of affiant)
(Exact legal title or name of the respondent) that he/she has carefully examined the foregoing report; that he/she swears that all statements of fact contained in the said report are trustatement of the business and affairs of the above named respondent during the period of time from and including to and including
Subscribed and sworn to before me, a
in and for the State and County above-named, thisday of
(Signature of affiant)

(Signature of officer authorized to administer oaths)

My commission expires_