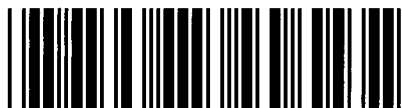




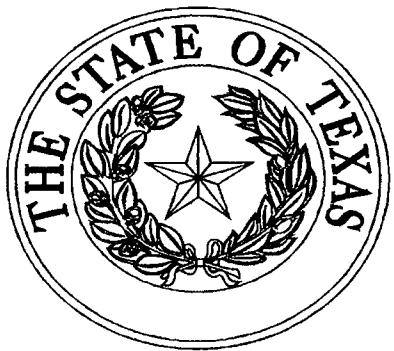
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**CLASS "C" WATER COMPANY
PUC ANNUAL REPORT
OF**

CCN Number
12309

Official Company Name:

FORT DAVIS ESTATES, INC.

D/B/A Name(s)

**TO THE
PUBLIC UTILITY COMMISSION
OF TEXAS**

For the Year Ended 7 *2018*

4

41822

— 5 —

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: FORT DAVIS ESTATES, INC.
List all assumed name(s) or d/b/a names: _____
2 Certificate of Convenience and Necessity No. 1220015 Calendar Year Ending 2018
3 Street Address: 201 S Mosley Lane
4 City or Town: Alpine CCN No.: 12309
5 Email Address: _____
6 County: Jeff Davis Zip Code: 79830
7 TCEQ PWS Number(s) 1220015
8 Water Quality Discharge Permit Number(s) _____

II. TYPE OF ORGANIZATION AND PRINCIPAL OFFICERS

9 Type of Ownership:
Corporation: _____ Partnership: _____ Individual: _____ Other: x
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 partnerships, please provide the percentage of ownership for each partner.
Curtis Evans President
Jean Anne Evans Fort VP & Secretary
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 Date the utility was formed or incorporated: 16-Jun-86
13 Is the utility under common ownership or control by another corporation? No 16-Jun-86 If yes, by whom? _____

III. PERSON TO CONTACT REGARDING THE INFORMATION SUPPLIED ON THESE FORMS

14 Name and Title: Jean Anne Fort
15 Address: 201 S Mosley Lane
16 City: Alpine, TX 79830
17 Telephone Number with Area Code: 432-837-5583
18 Cell Phone Number with Area Code: 432-294-0530
19 Fax Number with Area Code: NA
20 e-mail address: jeananne@fortdavis.com
21 If not an officer, owner or employee, give name of firm employed by: _____

1. Balance Sheet

Name of Utility: N/A

Line #	ASSETS	End of Year mm/dd/yyyy	End of Prior Year mm/dd/yyyy
	<u>UTILITY PLANT</u>		
1	101 Utility Plant in Service		
2	TOTAL UTILITY PLANT		
3	108 Less: Accumulated Amortization		
4	110 Less: Accumulated Depreciation		
5	NET UTILITY PLANT		
6	<u>CURRENT ASSETS</u>	XXXX	XXXX
7	131-135 Cash		
8	141-143 Accounts Receivable		
9	151 Plant Materials and Supplies (not previously expensed)		
10	171-174 Other Current Assets		
11	TOTAL CURRENT ASSETS		
12	<u>TOTAL ASSETS*</u>		
	<u>LIABILITIES & EQUITY</u>		
	<u>EQUITY</u>		
13	201 Common Stock		
14	211 Other paid in capital		
15	215 Retained Earnings		
16	218 Proprietary Capital		
17	TOTAL STOCKHOLDERS' EQUITY		
	<u>LONG-TERM DEBT</u>	XXXX	XXXX
18	224 Long-term debt (more than 1 year)		
	<u>CURRENT LIABILITIES (less than 1 year)</u>	XXXX	XXXX
19	231 Accounts Payable		
20	232 Notes Payable		
21	241.0 Other Current Liabilities		
	TOTAL CURRENT LIABILITIES		
	<u>OTHER LIABILITIES and DEFERRED CREDITS</u>	XXXX	XXXX
22	253 Other Deferred Credits		
23	271-272 Net Contributions in Aid of Construction		
24	TOTAL OTHER LIABILITIES and DEFERRED CREDITS		
25	<u>TOTAL LIABILITIES & EQUITY*</u>		

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

2. Statements of Income

Name of Utility: FORT DAVIS ESTATES, INC.

Line #	Report Calendar Year	2018	Water	Sewer	Total
			Report Year	Report Year	Report Year
			2018	N/A	2018
			A	B	C=A+B
1	Total Revenue:		\$ (849)		\$ (849)
	Operating Expenses:				
2	601 O & M Salaried Labor		\$ -		\$ -
3	604 Employee Benefits		\$ -		\$ -
4	631, 635, 636 O & M Contract labor		\$ 8,400		\$ 8,400
5	620 Operating/Maint Supplies		\$ 3,250		\$ 3,250
6	610 Purchased Water		\$ -		\$ -
7	615 Purchased Power		\$ 1,665		\$ 1,665
8	635 Testing Expense		\$ 64		\$ 64
9	618 Chemicals		\$ 212		\$ 212
10	656-659 Insurance				
11	601 General Office Salaries				
12	675 General Office Expenses		\$ 600		\$ 600
13	632 Contract Accounting		\$ 540		\$ 540
14	633 Legal				
15	634 Management				
16	666 Amortization- Rate Case Expense				
17	403 Depreciation Expense				
18	667-675 Other Misc. Expenses Dues		\$ 400		\$ 400
	Taxes:		xxxx	xxxx	xxxx
19	409 Federal Income Taxes				
20	409.0 State Franchise Taxes/Reg Assess.		\$ 414		\$ 414
21	408 All Other Taxes		\$ 400		\$ 400
22	Total Expenses		\$ 15,945	\$ -	\$ 15,945
23	Net Operating Income		\$ 15,096	\$ -	\$ 15,096
24	421, 433 Non-Operating Income				
	Non-Operating Deductions:				
25	426 Other				
26	427 Interest				
27	Net Income		\$ 15,096	\$ -	\$ 15,096

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

Name of Utility: FORT DAVIS ESTATES, INC

N/A

Date Plant Installed/Retired mm/yyyy	Plant Additions		Plant Retirements		Plant Adjustments	Total Change the Last Annual Report
	List Major Items by Class	Amounts	List Major Items by Class	Amounts		
Oct-18	Turbine Meter	\$ 1,231				\$1,231
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
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						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
	TOTALS	\$1,231		\$0	\$0	\$1,231

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

Name of Utility: N/A

	Date Plant Installed/Retired mm/yyyy	Plant Additions		Plant Retirements		Plant Adjustments	Changes Since the Last Annual Report
		List Major Items by Class	Amounts	List Major Items by Class	Amounts		
WATER							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
SEWER							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
TOTALS			\$0		\$0	\$0	\$0

4. Other Operating Information

<u>Connection information</u>		End of Year 12/31/2018	End of Prior Year 12/31/2017	<u>Connection information</u>	End of Year mm/dd/yyyy	End of Prior Year
<u>WATER:</u>				<u>SEWER: N/A</u>		
1	Number of active water connections	45	41	Number of active sewer connections		
	5/8" or 3/4"	44	40	Residential		
	3/4"			Non-residential		
	1"					
	1 1/2"					
	2"	1	1			
	List all additional meter sizes:			List all additional meter sizes:		
	Unmetered water connections	11	11	Unmetered water connections		
2	Number of inactive water connections	41	45	Number of inactive water connections		
	5/8" or 3/4"	41	45			
	3/4"					
	1"					
	1 1/2"					
	2"					
	List all additional meter sizes:			List all additional meter sizes:		
	Unmetered, inactive connections			Unmetered, inactive connections		
3	Number of active sewer connections	0		Number of active sewer connections		
4	Number of inactive sewer connections	0		Number of inactive sewer connections		
5	Total gallons purchased	0				
6	Total gallons pumped					
	Total Water Produced					
7	Total gallons sold	2,650,460				
8	Gallons unaccounted for	19,878				
				Total amount of sewer treated (gallons)		
<u>Management and Operations</u>				Yes or No		
1.	Do you have an Application form or formal process for new customers?			Yes		
2.	Do you have a copy of your approved tariff and TCEQ approved drought contingency plan for customer review?			Yes		
3.	Do you have written operating procedures for routine operations?			Yes		
4.	Do you have a written emergency action plans?			Yes		
5.	Do you have written personnel policies and procedures?			Yes		
6.	Do you have risk management and safety procedures?			Yes		
7.	Do you have customer service policies (including billing and collection)?			Yes		
8.	Do you prepare an annual written budget for financial planning purposes?			Yes		
9.	Provide a list of all affiliates and entities under Common Control (if any).					
10.	If you purchase wholesale water or sewer services, please list the name(s) of the wholesaler and describe the service(s) purchased from each.					
11.	If you have a current capital improvement/replacement plan, please attach a copy.					

Name of Utility: FORT DAVIS ESTATES, INC.

5. Affiliated Transactions

Charges by an Affiliate to the Reporting Utility

Name of Affiliated company: _____ N/A

NARUC Account and/or type of service		Total Affiliated Company	Total Texas	Total for reporting entity
Account #	Account name or type of service	(Dollars transacted)	(Dollars transacted)	(Dollars transacted)

Charges by an Reporting Utility to Affiliates

Name of Affiliated company: _____ N/A

NARUC Account and/or type of service		Total Affiliated Company	Total Texas	Total for reporting entity
Account #	Account name or type of service	(Dollars transacted)	(Dollars transacted)	(Dollars transacted)

VERIFICATION

OATH

(To be made by the officer having control of the accounting of the respondent)

State of TexasCounty of Brewster

as:

(Name of affiant)

(Official title of affiant)

of _____

(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 of the business and affairs of the above-named respondent during the period of time from and including _____ to _____

Subscribed and sworn to and before me, a _____

in and for the State and County above-named, this _____ day of _____

(Signature of affiant)

My commission expires _____

(Signature of officer authorized to administer oaths)

SUPPLEMENTAL OATH

(By the president or other chief officer of the respondent)

State of TEXAS

as:

County of BREWSTERJEAN ANNE FORT Vice President & Secretary

(Name of affiant)

(Official title of affiant)

of FORT DAVIS ESTATES, INC.

(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 true, and that the said report is a correct statement of the business and affairs of the above named respondent during the period of time from and including 1-Jan-18 to and including 12/31/2018

Subscribed and sworn to before me, a Jean Anne Fortin and for the State and County above-named, this 31 day of January, 2019Jean Anne Fort

(Signature of affiant)

My commission expires 02/27/2021

(Signature of officer authorized to administer oaths)

