

Control Number: 50636



Item Number: 1

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B & D ENVIRONMENTAL, INC.

200 HARBOR CIRCLE GEORGETOWN, TEXAS 78633 PHONE NO: (512) 917-7541 FAX NO: (512) 692-1967

EMAIL: bretfenner@yahoo.com

750636

March 6, 2020

Public Utility Commission Central Records 1701 N. Congress, P.O. Box 13326 Austin, Texas 78711-3326

Re: Application of Nerro Supply Investors, LLC (Utility) For a Pass-Through Rate Change; Certificate of Convenience and Necessity (CCN) No. 10336

Enclosed please find the following notice to implement a water use fee clause in the utility's current tariff to pass through to the affect customers for an increase from North Harris County Regional Water Authority (NHCRWA) water use fee. The following items enclosed to support the noticed increase:

- 1. Notice of pass thru rate increase with all required information and calculation of the increases which was delivered to all affected customers.
- 2. Documentation showing gallons pumped and gallons consumed for a past 12 month's period.
- 3. A copy of the notice from the NHCRWA indicating the amount of the pass thru rate increase effective April 1, 2020.
- 4. Copies of the NHCRWA's Water Reporting and Billing Forms for a 12-month period showing the amount paid for that 12-month period.
- 5. A copy of the current water rate tariff pages for the utility which reflects the calculation of the pass through as per §24.25 of the PUC Rules.

Should you have any further questions concerning this pass thru request, please do not hesitate to contact us at (512) 917-7541.

Sincerely,

Bret W. Fenner, P.E.

B & D Environmental, Inc.

Enclosures

NOTICE OF PASS THROUGH RATE PROVISION INCREASE

Nerro Supply Investors, LLC

10336

Company Name

CCN Number

is increasing North Harris County Regional Water Authority (NHCRWA) pass thru water use fee gallonage charge by \$0.47 per 1000 gallons for your subdivision. This tariff change is being implemented in accordance with the utility's approved water use fee clause to recognize an increase in the NHCRW Authority water use fee for this subdivision. This tariff change is being implemented in accordance with the minor tariff change allowed by 16 Texas Administrative Code §24.25. The cost to you as a result of this change will not exceed the cost charged to your utility.

Spring Creek Valley Estates PWS# 1010213

Subdivisions /Systems Affected by Pass Through Provision				
P.O. Box 691008	Houston	TX	77269	281-355-1312
Company Address	City	State	Zip	Phone #
March 20, 2020		Ap	ril 1, 2020	
N. C. (N. 1.1	• • • • • • • • • • • • • • • • • • • •	Tr.CC	· D / (1.1 T

Date Customer Notice Mailed

Effective Date of the Increase

Current Tariff Approved NHCRWA water use fee: (Docket No. 49414) \$4.53 per 1,000 gallons of water usage

Revised NHCRWA water use fee (April 1, 2020): \$ 4.25 per 1000 gallons

System average line loss: (Gallons pumped - Gallons billed) / Gallons pumped

(19,273,000 - 9,631,000) / 19,504,565

9,642,000 / 19,273,000 = .500 or 50.0% > 15%

Calculation of Water Pass-Through Gallonage Charge After April 1, 2020:

Adjusted Gallonage Rate $(AG) = \{G / (1 - L)\}$, Where:

AG = adjusted gallonage charge, rounded to nearest one cent;

G = approved gallonage charge, per 1,000 gallons;

L = water or sewer line loss for preceding 12 months, not to exceed 0.15 (15%)

 $AG = \{\$ 4.25 / (1 - 0.15)\}$

 $AG = \{\$ 4.25 / 0.85\}$

AG = \$5.00

Pass Through Rate Provision For The Spring Creek Valley Estates System (PWS #1010213):

Effective April 1, 2020 your new pass through rate will be:

Spring Creek Valley - 2019

Month	<u>Pumped</u>	<u>Sold</u>
Jan-19	1,980,000	512,000
Feb-19	1,501,000	639,000
Mar-19	983,000	600,000
Apr-19	926,000	873,000
May-19	1,285,000	769,000
Jun-19	2,026,000	956,000
Jul-19	1,978,000	745,000
Aug-19	2,457,000	999,000
Sep-19	1,207,000	1,080,000
Oct-19	1,546,000	847,000
Nov-19	1,740,000	787,000
Dec-19	1,644,000	824,000
_	19,273,000	9,631,000





UPDATED PRICING POLICY OF THE NORTH HARRIS COUNTY REGIONAL WATER AUTHORITY (Effective April 1, 2020)

This Updated Pricing Policy of the North Harris County Regional Water Authority (this "Updated Pricing Policy") is intended to define the Cost of Water paid to the Authority for Water used within the Authority and is an integral part of the Authority's Rate Order (the "Rate Order"), adopted on October 5, 2009. Unless specifically defined otherwise, capitalized terms in this Updated Pricing Policy shall have the meanings defined in the Rate Order.

Effective April 1, 2020, the following Cost of Water will apply to and be due by users of Water within the Authority:

Authority Water	\$4.70 per 1,000 gallons
Water pumped from a Non-Exempt Well	\$4.25 per 1,000 gallons
Imported Water	\$4.25 per 1,000 gallons

In addition to the above Fees, the Authority shall continue to provide a credit to each Converted Entity that constructed a Chloramine System prior to December 1, 2015 in accordance with the Authority's prior policy and procedures. Such credits shall be calculated as outlined below. Furthermore, any credits for capital contributions paid to the Authority by a Payor shall continue as provided in the applicable written agreement executed between the Payor and the Authority.

The Authority may revise the above Fees and modify, delete or add any credit(s), subject to the provisions of any applicable written agreements, if and when necessary. Payors will be notified of any such changes.

Chloramination Credits

The annual Chloramination Credit shall be calculated by amortizing the cost of the Chloramine System at 6% interest over a 30-year period, which shall begin the year the facilities are placed in service. The annual Chloramination Credit amount will be divided by 12 and the resultant amount will be credited monthly toward the fees payable to the Authority for the Water used by the Converted Entity.

New/Replacement Facilities

In order to help facilitate the effective implementation of the GRP, any Payor who anticipates the construction of new or replacement Water production, storage and/or treatment facilities and/or related appurtenances shall advise the Authority of those plans as early in the process as possible. The Authority will review such proposed improvements for conformity with the goals of the GRP and the possibility of the Authority being able to address those needs (i.e., by providing water in lieu of the Payor having to construct or replace facilities). Within the limits of its jurisdiction, the Authority will regulate construction of such facilities to accomplish the goals of the GRP.

Policy Implementation

The General Manager is authorized to take any actions on behalf of the Authority necessary and convenient to accomplish the purposes of this Updated Pricing Policy. The General Manager is also authorized to take actions necessary to comply with any special credit provisions provided under any agreements that may exist between a Payor and the Authority.

Groundwater and/or Surface Water Reporting and Billing Form - 2019 ***Report filed online*** http://oprs.nhcrwa.com

ORDER

PURCHASE

28516

Name of Well Owner or Recipient of Surface Water: NORTHWEST WATER SYSTEMS, INC.

Billing period for which the report is being filed

Billing Period	Rate per 1,000 gallons	Due Date
January 01-31, 2019	\$3.40 groundwater \$3.85 surface water	March 18, 2019

Gallons of Groundwater Pumped for Billing Period

Canonic or a contract of a con				
	Start Meter Reading	End Meter Reading	Total	
Well #2272	0	0	0	
Well #3554	25,282 x1000	26,312 x1000	1,030,000	
Well #4568	30,189 x1000	31,718 x1000	1,529,000	
Adjustment			0	

Water imported from outside NHCRWA

Imported water	Source:		
Meter reading:	×	x	0

Miscellaneous water (not billed)

Other entity	Water Type	Direction	Amount	
	Groundwater	Out		

1	Enter total gallons of groundwater pumped and/or imported	2,559,000
2	Divide by 1000	2,559
3	Total groundwater fee due (multiply line 2 x \$3.40)	\$8,700.60
4	Enter total gallons of surface water received	0
5	Divide by 1000	0
6	Total surface water fee due (multiply line 5 x \$3.85)	\$0.00
7_	Deduct 2003 Capital Contribution Credit amount, if applicable	(\$0.00)
8	Deduct 2005 Capital Contribution Credit amount, if applicable	(\$0.00)
9	Deduct 2008 Capital Contribution Credit amount, if applicable	(\$0.00)
10	Deduct Chloramination System Credit or other asset credit, if applicable	(\$0.00)
11	Other Credits:	(\$0.00)
12	Total due	\$8,700.60

If your payment is received late, the Authority will send you an invoice for the late fees set forth in the Rate Order.

I declare that the above information is true and correct to the best of phy knowledge and belief.

Date: February 01, 2019 Signed:

Name: Jamie Kindred

Title: Compliance Associate

Make check payable to:

North Harris County Regional Water Authority; Dept. 35, P.O. Box 4346 Houston, Texas 77210-4346

Please mail this form with the payment or fax to 281-440-4104, phone: 281-440-3924

Groundwater and/or Surface Water Reporting and Billing Form - 2019

Report filed online http://oprs.nhcrwa.com

Name of Well Owner or Recipient of Surface Water: NORTHWEST WATER SYSTEMS, INC.

Billing period for which the report is being filed

Billing Period	Rate per 1,000 gallons	Due Date
February 01-28, 2019	\$3.40 groundwater \$3.85 surface water	April 18, 2019

Gallons of Groundwater Pumped for Billing Period

dulione of directional and a state of the st				
	Start Meter Reading	End Meter Reading	Total	
Well #2272	0 x1000	0 x1000	0	
Well #3554	26,312 x1000	26,748 x1000	436,000	
Well #4568	31,718 x1000	32,094 x1000	376,000	
Adjustment			0	

Water imported from outside NHCRWA

Imported water	Source:		
Meter reading:	х	x	0

Miscellaneous water (not billed)

	Other entity Water Type Direction		Direction	Amount
ſ		Groundwater	Out	

1	Enter total gallons of groundwater pumped and/or imported	812,000
2	Divide by 1000	812
3	Total groundwater fee due (multiply line 2 x \$3.40)	\$2,760.80
4	Enter total gallons of surface water received	0
5	Divide by 1000	0
6	Total surface water fee due (multiply line 5 x \$3 85)	\$0.00
7	Deduct 2003 Capital Contribution Credit amount, if applicable	(\$0.00)
8	Deduct 2005 Capital Contribution Credit amount, if applicable	(\$0.00)
9	Deduct 2008 Capital Contribution Credit amount, ıf applicable	(\$0.00)
10	Deduct Chloramination System Credit or other asset credit, if applicable	(\$0.00)
11	Other Credits:	(\$0.00)
12	Total due	\$2,760.80

If your payment is received late, the Authority will send you an invoice for the late fees set forth in the Rate Order.

I declare that the above information is true and correct to the best of my knowledge and belief.

Date: March 07, 2019 Signed:		

Name: Jamie Kindred

Title: Compliance Associate

Make check payable to:

North Harris County Regional Water Authority; Dept. 35, P.O. Box 4346 Houston, Texas 77210-4346

Please mail this form with the payment or fax to 281-440-4104, phone: 281-440-3924

Groundwater and/or Surface Water Reporting and Billing Form - 2019

Report filed online http://oprs.nhcrwa.com

Name of Well Owner or Recipient of Surface Water: NORTHWEST WATER SYSTEMS, INC.

Billing period for which the report is being filed

Billing Period	Rate per 1,000 gallons	Due Date
March 01-31, 2019	\$3.40 groundwater \$3.85 surface water	May 18, 2019

Gallons of Groundwater Pumped for Billing Period

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1	Start Meter Reading	End Meter Reading	Total	
Well #2272	0 x1000	0 x1000	0	
Well #3554	26,748 x1000	27,237 x1000	489,000	
Well #4568	32,094 x1000	32,512 x1000	418,000	
Adjustment			0	

Water imported from outside NHCRWA

Imported water	Source:			
Meter reading:	0 x 1	0 x 1	0	

Miscellaneous water (not billed)

Other entity	Water Type	Direction	Amount
	Groundwater	Out	0

1	Enter total gallons of groundwater pumped and/or imported	907,000
2	Divide by 1000	907
3	Total groundwater fee due (multiply line 2 x \$3.40)	\$3,083.80
4	Enter total gallons of surface water received	0
5	Divide by 1000	0
6	Total surface water fee due (multiply line 5 x \$3.85)	\$0.00
7	Deduct 2003 Capital Contribution Credit amount, if applicable	(\$0.00)
8	Deduct 2005 Capital Contribution Credit amount, if applicable	(\$0.00)
9	Deduct 2008 Capital Contribution Credit amount, if applicable	(\$0.00)
10	Deduct Chloramination System Credit or other asset credit, if applicable	(\$0.00)
11	Other Credits:	(\$0.00)
12	Total due	\$3,083.80

If your payment is received late, the Authority will send you an invoice for the late fees set forth in the Rate Order.

I declare that the above information is true and correct to the best of my knowledge and belief.

Date: April 08, 2019 Signed: Jamie Kindred

Name: Jamie Kindred

Title: Regulatory Compliance Manager

Make check payable to:

North Harris County Regional Water Authority; Dept. 35, P.O. Box 4346 Houston, Texas 77210-4346

Please mail this form with the payment or fax to 281-440-4104, phone: 281-440-3924

NORTH HARRIS COUNTY REGIONAL WATER AUTHORITY Groundwater and/or Surface Water Reporting and Billing Form - 2019 ***Report filed online*** http://oprs.nhcrwa.com

Name of Well Owner or Recipient of Surface Water: NORTHWEST WATER SYSTEMS, INC.

Billing period for which the report is being filed

Billing Period	Due Date	
April 01-30, 2019	\$3.85 groundwater \$4.30 surface water	June 18, 2019

Gallons of Groundwater Pumped for Billing Period

	J	1 , 3	
	Start Meter Reading	End Meter Reading	Total
Well #2272	0	0	0
Well #3554	27,237 x1000	27,876 x1000	639,000
Well #4568	32,512 x1000	33,053 x1000	541,000
Adjustment			0

Water imported from outside NHCRWA

Imported water	Source:		
Meter reading:	х	х	0

Miscellaneous water (not billed)

Other entity	Water Type	Direction	Amount
	Groundwater	Out	

1	Enter total gallons of groundwater pumped and/or imported	1,180,000
2	Divide by 1000	1,180
3	Total groundwater fee due (multiply line 2 x \$3.85)	\$4,543.00
4	Enter total gallons of surface water received	0
5	Divide by 1000	0
6	Total surface water fee due (multiply line 5 x \$4.30)	\$0.00
7	Deduct 2003 Capital Contribution Credit amount, if applicable	(\$0.00)
8	Deduct 2005 Capital Contribution Credit amount, if applicable	(\$0.00)
9	Deduct 2008 Capital Contribution Credit amount, if applicable	(\$0.00)
10	Deduct Chloramination System Credit or other asset credit, if applicable	(\$0.00)
11	Other Credits:	(\$0.00)
12	Total due	\$4,543.00

If your payment is received late, the Authority will send you an invoice for the late fees set forth in the Rate Order.

I declare that the above information is true and correct to the best of my knowledge and belief.

Date: May 06, 2019

igned:

Name: Jamie Kindred

Title: Compliance Associate

Make check payable to:

North Harris County Regional Water Authority; Dept. 35, P.O. Box 4346 Houston, Texas 77210-4346

Please mail this form with the payment or fax to 281-440-4104, phone: 281-440-3924

Groundwater and/or Surface Water Reporting and Billing Form - 2019
Report filed online http://oprs.nhcrwa.com

Name of Well Owner or Recipient of Surface Water: NORTHWEST WATER SYSTEMS, INC.

Billing period for which the report is being filed

Billing Period	Rate per 1,000 gallons	Due Date
May 01-31, 2019	\$3.85 groundwater \$4.30 surface water	July 18, 2019

Gallons of Groundwater Pumped for Billing Period

	Start Meter Reading	End Meter Reading	Total
Well #2272	0 x1000	0 x1000	C
Well #3554	27,876 x1000	28,668 x1000	792,000
Well #4568	33,053 x1000	33,736 x1000	683,000
Adjustment			0

Water imported from outside NHCRWA

Imported water	Source:		
Meter reading:	X	Х	0

Miscellaneous water (not billed)

Other entity Water Type Direction		Amount	
	Groundwater	Out	***

1	Enter total gallons of groundwater pumped and/or imported	1,475,000
2	Divide by 1000	1,475
3	Total groundwater fee due (multiply line 2 x \$3.85)	\$5,678.75
4	Enter total gallons of surface water received	0
5	Divide by 1000	()
6	Total surface water fee due (multiply line 5 x \$4.30)	\$0.00
7	Deduct 2003 Capital Contribution Credit amount, if applicable	(\$0.00)
8	Deduct 2005 Capital Contribution Credit amount, if applicable	(\$0.00)
9	Deduct 2008 Capital Contribution Credit amount, if applicable	(\$0.00)
10	Deduct Chloramination System Credit or other asset credit, if applicable	(\$0.00)
11	Other Credits:	(\$0.00)
12	Total due	\$5,678.75

If your payment is received late, the Authority will send you an invoice for the late fees set forth in the Rate Order.

I declare that the above information is true and correct to the best of my knowledge and belief.

Date: June 05, 2019

Signed:

Name: Jamie Kindred

Title: Compliance Associate

Make check payable to:

North Harris County Regional Water Authority; Dept. 35, P.O. Box 4346 Houston, Texas 77210-4346

Please mail this form with the payment or fax to 281-440-4104, phone: 281-440-3924

Groundwater and/or Surface Water Reporting and Billing Form - 2019 ***Report filed online*** http://oprs.nhcrwa.com

Billing period for which the report is being filed

Name of Well Owner or Recipient of Surface Water: NORTHWEST WATER SYSTEMS, INC.

Billing Period	Due Date	
June 01-30, 2019	\$3.85 groundwater \$4.30 surface water	August 18, 2019

Gallons of Groundwater Pumped for Billing Period

	Start Meter Reading	End Meter Reading	Total
Well #2272	0 x1000	0 x1000	(
Well #3554	28,668 x1000	29,650 x1000	982,000
Well #4568	33,736 x1000	34,578 x1000	842,000
Adjustment			C

Water imported from outside NHCRWA

Imported water	Source:		
Meter reading:	X	X	0

Miscellaneous water (not billed)

Other entity	Water Type	Direction	Amount
	Groundwater	Out	

1	Enter total gallons of groundwater pumped and/or imported	1,824,000
2	Divide by 1000	1,824
3	Total groundwater fee due (multiply line 2 x \$3.85)	\$7,022.40
4	Enter total gallons of surface water received	0
5	Divide by 1000	0
6	Total surface water fee due (multiply line 5 x \$4.30)	\$0.00
7	Deduct 2003 Capital Contribution Credit amount, if applicable	(\$0.00)
8	Deduct 2005 Capital Contribution Credit amount, if applicable	(\$0.00)
9	Deduct 2008 Capital Contribution Credit amount, if applicable	(\$0.00)
10	Deduct Chloramination System Credit or other asset credit, if applicable	(\$0.00)
11	Other Credits:	(\$0.00)
12	Total due	\$7,022.40

If your payment is received late, the Authority will send you an invoice for the late fees set forth in the Rate Order.

I declare that the above information is true and correct to the best of my knowledge and belief.

Date: July 05, 2019

Name: Jamie Kindred

Title: Compliance Associate

Make check payable to:

North Harris County Regional Water Authority; Dept. 35, P.O. Box 4346 Houston, Texas 77210-4346

Please mail this form with the payment or fax to 281-440-4104, phone: 281-440-3924

NORTH HARRIS COUNTY REGIONAL WATER AUTHORITY Groundwater and/or Surface Water Reporting and Billing Form - 2019 ***Report filed online*** http://oprs.nhcrwa.com

Name of Well Owner or Recipient of Surface Water: NORTHWEST WATER SYSTEMS, INC.

Billing period for which the report is being filed

Billing Period	Rate per 1,000 gallons	Due Date
July 01-31, 2019	\$3.85 groundwater \$4.30 surface water	September 18, 2019

Gallons of Groundwater Pumped for Billing Period

	Start Meter Reading	End Meter Reading	Total
Well #2272	0	0	0
Well #3554	29,650 x1000	30,764 x1000	1,114,000
Well #4568	34,578 x1000	35,534 x1000	956,000
Adjustment			0

Water imported from outside NHCRWA

 Imported water	So	urce:		
Meter reading:		X	x	0

Miscellaneous water (not billed)

Other entity	Water Type	Direction	Amount
	Groundwater	Out	

1	Enter total gallons of groundwater pumped and/or imported	2,070,000
2	Divide by 1000	2,070
3	Total groundwater fee due (multiply line 2 x \$3.85)	\$7,969.50
4	Enter total gallons of surface water received	0
5	Divide by 1000	0
6	Total surface water fee due (multiply line 5 x \$4.30)	\$0.00
7	Deduct 2003 Capital Contribution Credit amount, if applicable	(\$0.00)
8	Deduct 2005 Capital Contribution Credit amount, if applicable	(\$0.00)
9	Deduct 2008 Capital Contribution Credit amount, if applicable	(\$0.00)
10	Deduct Chloramination System Credit or other asset credit, if applicable	(\$0.00)
11	Other Credits:	(\$0.00)
12	Total due	\$7,969.50

If your payment is received late, the Authority will send you an invoice for the late fees set forth in the Rate Order.

I declare that the above information is true and correct to the best of my knowledge and belief.

Date: August 06, 2019 Signed:

Name: Jamie King ed

Title: Compliance Associate

Make check payable to:

North Harris County Regional Water Authority; Dept. 35, P.O. Box 4346 Houston, Texas 77210-4346

Please mail this form with the payment or fax to 281-440-4104, phone: 281-440-3924

Groundwater and/or Surface Water Reporting and Billing Form - 2019 ***Report filed online*** http://oprs.nhcrwa.com

Name of Well Owner or Recipient of Surface Water: NORTHWEST WATER SYSTEMS, INC.

Billing period for which the report is being filed

Bitling Period	Rate per 1,000 gallons	Due Date
August 01-31, 2019	\$3.85 groundwater \$4.30 surface water	October 18, 2019

Gallons of Groundwater Pumped for Billing Period

	Start Meter Reading	End Meter Reading	Total
Well #2272	0	0	C
Well #3554	30,764 x1000	31,549 x1000	785,000
Weil #4568	35,534 x1000	36,189 x1000	655,000
Adjustment			0

Water imported from outside NHCRWA

 Imported water	Source:		
Meter reading:	×	х	0

Miscellaneous water (not billed)

Other entity	Water Type	Direction	Amount
	Groundwater	Out	

Enter total gallons of groundwater pumped and/or imported	1,440,000
Divide by 1000	1,440
Total groundwater fee due (multiply line 2 x \$3.85)	\$5,544.00
Enter total gallons of surface water received	0
Divide by 1000	0
Total surface water fee due (multiply line 5 x \$4.30)	\$0.00
Deduct 2003 Capital Contribution Credit amount, if applicable	(\$0.00)
Deduct 2005 Capital Contribution Credit amount, if applicable	(\$0.00)
Deduct 2008 Capital Contribution Credit amount, if applicable	(\$0.00)
Deduct Chloramination System Credit or other asset credit, if applicable	(\$0.00)
Other Credits:	(\$0.00)
Total due	\$5,544.00
	Divide by 1000 Total groundwater fee due (multiply line 2 x \$3.85) Enter total galions of surface water received Divide by 1000 Total surface water fee due (multiply line 5 x \$4.30) Deduct 2003 Capital Contribution Credit amount, if applicable Deduct 2005 Capital Contribution Credit amount, if applicable Deduct 2008 Capital Contribution Credit amount, if applicable Deduct Chloramination System Credit or other asset credit, if applicable Other Credits:

If your payment is received late, the Authority will send you an invoice for the late fees set forth in the Rate Order.

I declare that the above information is true and correct to the jest of my/finowledge and belief.

Date: September 04, 2019 Signed

Name: Jamie Kindred

Title: Compliance Associate

Make check payable to:

North Harris County Regional Water Authority; Dept. 35, P.O. Box 4346 Houston, Texas 77210-4346

Please mail this form with the payment or fax to 281-440-4104, phone: 281-440-3924

NORTH HARRIS COUNTY REGIONAL WATER AUTHORITY Groundwater and/or Surface Water Reporting and Billing Form - 2019

Report filed online http://oprs.nhcrwa.com

Name of Well Owner or Recipient of Surface Water: NORTHWEST WATER SYSTEMS, INC.

Billing period for which the report is being filed

Billing Period	Rate per 1,000 gallons	Due Date
September 01-30, 2019	\$3.85 groundwater \$4.30 surface water	November 18, 2019

Gallons of Groundwater Pumped for Billing Period

_	Start Meter Reading	End Meter Reading	Total
Well #2272	0	0	C
Well #3554	31,549 x1000	32,760 x1000	1,211,000
Well #4568	36,189 x1000	37,210 x1000	1,021,000
Adjustment			0

Water imported from outside NHCRWA

Imported water	Source:		
Meter reading:	х	х	0

Miscellaneous water (not billed)

Other entity	Water Type	Direction	Amount
	Groundwater	Out	

1	Enter total gallons of groundwater pumped and/or imported	2,232,000
2	Divide by 1000	2,232
3	Total groundwater fee due (multiply line 2 x \$3.85)	\$8,593.20
4	Enter total gallons of surface water received	0
5	Divide by 1000	0
6	Total surface water fee due (multiply line 5 x \$4.30)	\$0.00
7	Deduct 2003 Capital Contribution Credit amount, if applicable	(\$0.00)
8	Deduct 2005 Capital Contribution Credit amount, if applicable	(\$0.00)
9	Deduct 2008 Capital Contribution Credit amount, if applicable	(\$0.00)
10	Deduct Chloramination System Credit or other asset credit, if applicable	(\$0.00)
11	Other Credits:	(\$0.00)
12	Total due	\$8,593.20

If your payment is received late, the Authority will send you an invoice for the late fees set forth in the Rate Order.

I declare that the above information is true, and correct to the best of my knowledge and belief.

Date: October 03, 2019

Signed: __

Name: Lizet Ocampo

Title:

Make check payable to:

North Harris County Regional Water Authority; Dept. 35, P.O. Box 4346 Houston, Texas 77210-4346

Please mail this form with the payment or fax to 281-440-4104, phone: 281-440-3924

NORTH HARRIS COUNTY REGIONAL WATER AUTHORITY Groundwater and/or Surface Water Reporting and Billing Form - 2019

Report filed online http://oprs.nhcrwa.com

Name of Well Owner or Recipient of Surface Water: NORTHWEST WATER SYSTEMS, INC.

Billing period for which the report is being filed

Billing Period	Rate per 1,000 gallons	Due Date
October 01-31, 2019	\$3.85 groundwater \$4.30 surface water	December 18, 2019

Gallons of Groundwater Pumped for Billing Period

	Start Meter Reading	End Meter Reading	Total
Well #2272	0	0	0
Well #3554	32,760 x1000	33,593 x1000	833,000
Well #4568	37,210 x1000	38,049 x1000	839,000
Adjustment	-		0

Water imported from outside NHCRWA

Imported water	Source:		
Meter reading:	x	х	0

Miscellaneous water (not billed)

Other entity	Water Type	Direction	Amount
	Groundwater	Out	

1	Enter total gallons of groundwater pumped and/or imported	1,672,000
2	Divide by 1000	1,672
3	Total groundwater fee due (multiply line 2 x \$3.85)	\$6,437.20
4	Enter total gallons of surface water received	0
5	Divide by 1000	0
6	Total surface water fee due (multiply line 5 x \$4.30)	\$0.00
7	Deduct 2003 Capital Contribution Credit amount, if applicable	(\$0.00)
8	Deduct 2005 Capital Contribution Credit amount, if applicable	(\$0.00)
9	Deduct 2008 Capital Contribution Credit amount, if applicable	(\$0.00)
10	Deduct Chloramination System Credit or other asset credit, if applicable	(\$0.00)
11	Other Credits:	(\$0.00)
12	Total due	\$6,437.20

If your payment is received late, the Authority will send you an invoice for the late fees set forth in the Rate Order. I declare that the above information is true and correct to the best of my knowledge and belief.

Date: November 05, 2019

Signed: Name: Lizet Qoampo

Title:

Make check payable to:

North Harris County Regional Water Authority; Dept. 35, P.O. Box 4346 Houston, Texas 77210-4346 Please mail this form with the payment or fax to 281-440-4104, phone: 281-440-3924

Groundwater and/or Surface Water Reporting and Billing Form - 2019
Report filed online http://oprs.nhcrwa.com

Name of Well Owner or Recipient of Surface Water: NORTHWEST WATER SYSTEMS, INC.

Billing period for which the report is being filed

Billing Period	Rate per 1,000 gallons	Due Date
November 01-30, 2019	\$3.85 groundwater \$4.30 surface water	January 18, 2020

Gallons of Groundwater Pumped for Billing Period

	Start Meter Reading	End Meter Reading	Total
Well #2272	0	0	(
Well #3554	33,593 x1000	34,478 x1000	885,000
Well #4568	38,049 x1000	38,812 x1000	763,000
Adjustment			(

Water imported from outside NHCRWA

Imported water	Source:		
Meter reading:	х	х	0

Miscellaneous water (not billed)

Other entity	Water Type	Direction	Amount
	Groundwater	Out	

1	Enter total gallons of groundwater pumped and/or imported	1,648,000
2	Divide by 1000	1,648
3	Total groundwater fee due (multiply line 2 x \$3.85)	\$6,344.80
4	Enter total gallons of surface water received	0
5	Divide by 1000	0
6	Total surface water fee due (multiply line 5 x \$4.30)	\$0.00
7	Deduct 2003 Capital Contribution Credit amount, if applicable	(\$0.00)
8	Deduct 2005 Capital Contribution Credit amount, if applicable	(\$0.00)
9	Deduct 2008 Capital Contribution Credit amount, if applicable	(\$0.00)
10	Deduct Chloramination System Credit or other asset credit, if applicable	(\$0.00)
11	Other Credits:	(\$0.00)
12	Total due	\$6,344.80

If your payment is received late, the Authority will send you an invoice for the late fees set forth in the Rate Order.

I declare that the above information is true and correct to the best of my knowledge and belief.

Date: December 05, 2019

Signed: ____

Name: Lizet Ocampo

Title:

Make check payable to:

North Harris County Regional Water Authority; Dept. 35, P.O. Box 4346 Houston, Texas 77210-4346

Please mail this form with the payment or fax to 281-440-4104, phone: 281-440-3924

NORTH HARRIS COUNTY REGIONAL WATER AUTHORITY Groundwater and/or Surface Water Reporting and Billing Form - 2019

Report filed online http://oprs.nhcrwa.com

Name of Well Owner or Recipient of Surface Water: NORTHWEST WATER SYSTEMS, INC.

Billing period for which the report is being filed

Billing Period	Rate per 1,000 gallons	Due Date
December 01-31, 2019	\$3.85 groundwater \$4.30 surface water	February 18, 2020

Gallons of Groundwater Pumped for Billing Period

	Cunons of Crommunator I	F	
	Start Meter Reading	End Meter Reading	Total
Well #2272	0	0	0
Well #3554	34,478 x1000	35,156 x1000	678,000
Well #4568	38,812 x1000	39,388 x1000	576,000
Adjustment			0

Water imported from outside NHCRWA

Imported water	Source:		
Meter reading:	х	x	Ō

Miscellaneous water (not billed)

Other entity	Water Type	Direction	Amount
	Groundwater	Out	

1	Enter total gallons of groundwater pumped and/or imported	1,254,000
2	Divide by 1000	1,254
3	Total groundwater fee due (multiply line 2 x \$3.85)	\$4,827.90
4	Enter total gallons of surface water received	0
5	Divide by 1000	0
6	Total surface water fee due (multiply line 5 x \$4.30)	\$0.00
7	Deduct 2003 Capital Contribution Credit amount, if applicable	(\$0.00)
8	Deduct 2005 Capital Contribution Credit amount, if applicable	(\$0.00)
9	Deduct 2008 Capital Contribution Credit amount, if applicable	(\$0.00)
10	Deduct Chloramination System Credit or other asset credit, if applicable	(\$0.00)
11	Other Credits:	(\$0.00)
12	Total due	\$4,827.90

If your payment is received late, the Authority will send you an invoice for the late fees set forth in the Rate Order.

I declare that the above information is true and correct to the best of my knowledge and belief.

Date: January 03, 2020

Signed:

Name: Lizet Ocampo

Title:

Make check payable to:

North Harris County Regional Water Authority; Dept. 35, P.O. Box 4346 Houston, Texas 77210-4346

Please mail this form with the payment or fax to 281-440-4104, phone: 281-440-3924



Nerro Supply Investors, LLC (Utility Name)

P.O. Box 691008
(Business Address)

Houston, Texas 77269 (City, State, Zip Code)

(281) 355-1312 (Area Code/Telephone)

This tariff is effective for utility operations under the following Certificate of Convenience and Necessity:

10336

This tariff is effective in the following counties:

Harris and Montgomery

This tariff is effective in the following cities or unincorporated towns (if any):

None

This tariff is effective in the following subdivisions and public water systems:

See attached list.

TABLE OF CONTENTS

The above utility lists the following sections of its tariff (if additional pages are needed for a section, all pages should be numbered consecutively):

SECTION 1.0 RATE SCHEDULE	2
SECTION 2.0 SERVICE RULES AND POLICIES	
SECTION 3.0 EXTENSION POLICY	10

APPENDIX A -- DROUGHT CONTINGENCY PLAN

APPENDIX B -- SAMPLE SERVICE AGREEMENT

APPENDIX C -- APPLICATION FOR SERVICE

LIST OF SUBDIVISIONS

Hazy Hollow East Estates High Meadows Industrial Park	1700013	Montgomery
Shady Brook Acres	1700031	Montgomery
Spring Creek Valley Estates	1010213	Harris
White Oak Valley Estates	1700036	Montgomery

SECTION 1.0 -- RATE SCHEDULE

Section 1.01 - Rates

Spring Creek Valley Meter Size 5/8" or 3/4"	Estates (Harris County) Monthly Minimum Charge \$37.16 (includes 1000 gallons)	\$3.56 per 1,000 gallons over the minimum *Plus NHCRWA Fee for ALL gallons used.
*North Harris County \$4.53 per 1,000 gallons of Tariff Control No. 494	_	Use Fee:
Hazy Hollow East E Valley Estates (Mon	• •	Park, Shady Brook Acres, White Oak
<u>Meter Size</u> 5/8" or 3/4"	Monthly Minimum Charge \$36.71 (includes 1000 gallons)	S3.55 per 1,000 gallons over the minimum *Plus LSGCD & SJRA fees for ALL gallons used.
*Lone Star Groundwa Tariff Control No. 480	ater Conservation District Water U	se Fee: \$0.12 per 1,000 gallons of water usage.
*San Jacinto River A Tariff Control No. 475	•	Estates and White Oak Valley Estates only: \$\frac{\$3.11}{2}\$ per 1,000 gallons of water usage
Cash X, Check X, THE UTILITY MAY F		
	E THE UTILITY TO COLLECT A FEE OF	ONE PERCENT OF THE RETAIL MONTHLY BILL
Section 1.02 - Miscel	llaneous Fees	
TAP FEE COVERS	THE UTILITY'S COSTS FOR MATERIA	N/A ALS AND LABOR TO INSTALL A STANDARD COVER UNIQUE COSTS IS PERMITTED IF LISTED
TAP FEE (Unique co	OSTS) OAD BORE FOR CUSTOMERS OUTSIDE C	DF SUBDIVISIONS OR RESIDENTIAL AREAS.
TAP FEE (Large me	ter)LITY'S ACTUAL COST FOR MATERIALS	AND LABOR FOR METER SIZE INSTALLED.

SECTION 1.0 – RATE SCHEDULE (Continued)

METER RELOCATION FEE
METER TEST FEE\$25.00 THIS FEE WHICH SHOULD REFLECT THE UTILITY'S COST MAY BE CHARGED IF A CUSTOMER REQUESTS A SECOND METER TEST WITHIN A TWO-YEAR PERIOD AND THE TEST INDICATES THAT THE METER IS RECORDING ACCURATELY. THE FEE MAY NOT EXCEED \$25.
RECONNECTION FEE THE RECONNECT FEE MUST BE PAID BEFORE SERVICE CAN BE RESTORED TO A CUSTOMER WHO HAS BEEN DISCONNECTED FOR THE FOLLOWING REASONS (OR OTHER REASONS LISTED UNDER SECTION 2.0 OF THIS TARIFF):
a) Nonpayment of bill (Maximum \$25.00)\$25.00
a) Nonpayment of bill (Maximum \$25.00)
TRANSFER FEE
LATE CHARGE (EITHER \$5.00 OR 10% OF THE BILL)
RETURNED CHECK CHARGE\$25.00
RETURNED CHECK CHARGES MUST BE BASED ON THE UTILITY'S DOCUMENTABLE COST.
CUSTOMER DEPOSIT RESIDENTIAL (Maximum \$50)
COMMERCIAL & NON-RESIDENTIAL DEPOSIT1/6TH OF ESTIMATED ANNUAL BILL
GOVERNMENTAL TESTING, INSPECTION AND COSTS SURCHARGE: WHEN AUTHORIZED IN WRITING BY TCEQ AND AFTER NOTICE TO CUSTOMERS, THE UTILITY MAY INCREASE RATES TO RECOVER INCREASED COSTS FOR INSPECTION FEES AND WATER TESTING. [16 TAC § 24.25(b)(2)(F)]
LINE EXTENSION AND CONSTRUCTION CHARGES: REFER TO SECTION 3.0EXTENSION POLICY FOR TERMS, CONDITIONS, AND CHARGES WHEN NEW CONSTRUCTION IS NECESSARY TO PROVIDE SERVICE.

SECTION 1.0 – RATE SCHEDULE (Continued)

Pass Through Provision:

For Utilities subject to changes in costs imposed by any non-affiliated provider of purchased water or sewer or a groundwater conservation district having jurisdiction over the Utility, these increases (decreases) shall be passed through as an adjustment to the gallonage charge according to the formula:

$$R = G/(1-L)$$

Where:

R =the proposed pass-through rate;

G = the new gallonage charge (per 1,000 gallons) by source supplier;

L = the actual line loss for the preceding 12 months, not to exceed 0.15

ABR = BR + (BxN)/(1-L), Where:

ABR = adjusted base rate, rounded to nearest one cent;

B = approved gallonage charge, per 1,000 gallons;

N = no. of 1,000 gallons included in base rate (do not use zero);

L = water or sewer line loss for preceding 12 months, not to exceed 0.15 (15%)