

Control Number: 51192



Item Number: 10

Addendum StartPage: 0



Application for Sale, Transfer, or Merger of a Retail

Public Utility

Pursuant to Texas Water Code § 13.301 and 16 Texas Administrative Code § 24.239

Sale, Transfer, or Merger (STM) Application Instructions

- **COMPLETE**: In order for the Commission to find the application sufficient for filing, the Applicant should:
 - Provide an answer to every question and submit any required attachment applicable to the STM request (i.e., agreements or contracts).
 - Use attachments or additional pages to answer questions as necessary. If you use attachments or additional pages, reference their ii inclusion in the form
 - 111. Provide all mapping information as detailed in Part G: Mapping & Affidavits.
- II. FILE: Seven (7) copies of the completed application with numbered attachments. One copy should be filed with no permanent binding, staples, tabs, or separators; and 7 copies of the portable electronic storage medium containing the digital mapping data.
 - SEND TO: Public Utility Commission of Texas, Attention: Filing Clerk, 1701 N. Congress Avenue, P.O. Box 13326, Austin, Texas 78711-3326 (NOTE: Electronic documents may be sent in advance of the paper copy, however they will not be processed and added to the Commission's on-line Interchange until the paper copy is received and file-stamped in Central Records).
- III. The application will be assigned a docket number, and an administrative law judge (ALJ) will issue an order requiring Commission Staff to file a recommendation on whether the application is sufficient. The ALJ will issue an order after Staff's recommendation has
 - <u>DEFICIENT (Administratively Incomplete):</u> Applicants will be ordered to provide information to cure the deficiencies by a certain date, usually 30 days from ALJ's order. Application is not accepted for filing.
 - SUFFICIENT (Administratively Complete): Applicants will be ordered by the ALJ to give appropriate notice of the application using the notice prepared by Commission Staff Application is accepted for filing.
- IV. Once the Applicants issue notice, a copy of the actual notice sent and an affidavit attesting to notice should be filed in the docket assigned to the application. Recipients of notice may request a hearing on the merits.

HEARING ON THE MERITS: An affected party may request a hearing within 30 days of notice In this event, the application may be referred to the State Office of Administrative Hearings (SOAH) to complete this request.

- V. TRANSACTION TO PROCEED: at any time following the provision of notice, or prior to 120 days from the last date that proper notice was given, Commission Staff will file a recommendation for the transaction to proceed as proposed or recommend that the STM be referred to SOAH for further investigation. The Applicants will be required to file an update in the docket to the ALJ every 30 days following the approval of the transaction The transaction must be completed within six (6) months from the ALJ's order (Note: The Applicants may request an extension to the 6 month provision for good cause).
- VI. FILE: Seven (7) copies of completed transaction documents and documentation addressing the transfer or disposition of any outstanding deposits. After receiving all required documents from the Applicants, the application will be granted a procedural schedule for final processing. The Applicants are requested to consent in writing to the proposed maps and certificates, or tariff if applicable.
- VII. FINAL ORDER: The ALJ will issue a final order issuing or amending the applicable CCNs.

Who can use this form?

Any retail public utility that provides water or wastewater service in Texas.

Who is required to use this form?

A retail public utility that is an investor owned utility (IOU) or a water supply corporation (WSC) prior to any STM of a water or sewer system, or utility, or prior to the transfer of a portion of a certificated service area

Terms

Transferor: Seller Transferee: Purchaser

CCN: Certificate of Convenience and Necessity

STM: Sale, Transfer, or Merger IOU: Investor Owned Utility

| Application Summary | | | | | |
|-------------------------------|--|------------------|--------------------|----------------------------|---------------------|
| T | | | | | |
| (selling entity) | Luia Mae Heilig | ımann - vvnispei | ring Oaks Water Wo | orks | |
| CCN No.s: | 12446 | | | | |
| \bowtie | Sale | Transfer | Merger | Consolidation | Lease/Rental |
| Transferee: | MiBroMa 3 LLC | ; | | | |
| (acquiring entity) CCN No.s: | | | | | |
| | | | | | - |
| | Water | Sewer | All CCN | Portion CCN | Facilities transfer |
| County(ies): | Gillespie | | | | |
| | | | Table of C | Contonts | |
| Salo Transfor | or Margar (STA | A) Annlication | | | 1 |
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| Appendix B. FT | ojecteu imorni | auon | | | 10 |
| Please mark the ite | ms included in | this filing | | | |
| | se, Purchase, or Sa | le Agreement | Part A: 0 | Question 1 | |
| | g Rate Schedule | | | Question 4 | |
| Partnership A | ner Deposits | | | Question 5 Question 7 | |
| | orporation and By | -Laws (WSC) | | Question 7 | |
| Certificate of | Account Status | , , | Part C: 0 | Question 7 | |
| l : - | Financial Audit Part C: Question 10 | | | | |
| | Application Attachment A & B Part C: Question 10 Part C: Question 10 | | | | |
| | Disclosure of Affiliated Interests Part C: Question 10 Capital Improvement Plan Part C: Question 10 | | | | |
| | List of Assets to be Transferred Part D: 11.B | | | | |
| Developer Co | ntribution Contrac | - | Part D: | | |
| | Action Correspond | | | Question 18 (Part D: Q12) | |
| | iance Corresponde ering Approvals | ence | | Question 22 | |
| | ering Approvais ter Supply or Trea | itment Agreemen | | Question 24 Question 26 | |
| Detailed (large | | on / igicomen | | Question 29 | |
| General Locat | General Location (small scale) Map Part G: Question 29 | | | | |
| Digital Mappi | | | | Question 29 | |
| Signed & Notarized Oath Pa | | | Page 13 | -14 | |

| | Part A: General Information | | | |
|----|---|--|--|--|
| 1. | Describe the proposed transaction, including the effect on all CCNs involved, and provide details on the existing or expected land use in the area affected by the proposed transaction. Attach all supporting documentation, such as a contract, a lease, or proposed purchase agreements: | | | |
| | Lula Mae Heiligmann - Whispering Oaks Water Works (CCN# 12446) would like to sale Whispering Oaks Water Works to Mrs. Severina Arreola and Mr. Bonifacio Arreola of MiBroMa 3, LLC. | | | |
| 2. | The proposed transaction will require (check all applicable): | | | |
| | For Transferee (Purchaser) CCN: For Transferor (Seller) CCN: | | | |
| | Obtaining a NEW CCN for Purchaser Cancellation of Seller's CCN | | | |
| | Transfer all CCN into Purchaser's CCN (Merger) Transfer of a Portion of Seller's CCN to Purchaser | | | |
| | Transfer Portion of CCN into Purchaser's CCN Transfer all CCN to Purchaser and retain Seller CCN Only Transfer of Facilities, No CCN or Customers Only Transfer of Customers, No CCN or Facilities | | | |
| | Uncertificated area added to Purchaser's CCN Only Transfer CCN Area, No Customers or Facilities | | | |
| | Part B: Transferor Information | | | |
| | Questions 3 through 5 apply only to the transferor (current service provider or seller) | | | |
| 3. | A. Name: Lula Mae Heiligmann - Whispering Oaks Water Works | | | |
| υ. | (individual, corporation, or other legal entity) Individual Corporation WSC Other: | | | |
| | B. Mailing Address: PO Box 62 | | | |
| | Center Point, TX 78010 | | | |
| | Phone: 8306347237 Email: carrie@carrieschmerbeck.com | | | |
| | C. <u>Contact Person</u> . Please provide information about the person to be contacted regarding this application. Indicate if this person is the owner, operator, engineer, attorney, accountant, or other title. | | | |
| | Name: Carrie M Schmerbeck Title: Daughter | | | |
| | Mailing Address: 279 Heights Trl., Kerrville, TX 78028 | | | |
| | Phone: 8307393084 Email: carrie@carrieschmerbeck.com | | | |
| 4. | If the utility to be transferred is an Investor Owned Utility (IOU), for the most recent rate change, attach a copy of the current tariff and complete A through B: | | | |
| | A. Effective date for most recent rates: 07/01/2020 | | | |
| | B. Was notice of this increase provided to the Public Utility Commission of Texas (Commission) or a predecessor regulatory authority? | | | |
| | No Yes Application or Docket Number: | | | |
| | If the transferor is a Water Supply or Sewer Service Corporation, provide a copy of the current tariff. | | | |
| | | | | |

| 5. | For the customers that will be transferred following the approval of the proposed transaction, check all that apply: | |
|----|---|--|
| | There are <u>no</u> customers that will be transferred | |
| | # of customers without deposits held by the transferor 69 | |
| | # of customers with deposits held by the transferor* | |
| | *Attach a list of all customers affected by the proposed transaction that have deposits held, and include a customer indicator (name or account number), date of each deposit, amount of each deposit, and any unpaid interest on each deposit. | |
| | Part C: Transferee Information | |
| | Questions 6 through 10 apply only to the transferee (purchaser or proposed service provider) | |
| 6. | A. Name: MiBroMa 3 LLC | |
| | (individual, corporation, or other legal entity) Individual Corporation WSC Other: LLC | |
| | B. Mailing Address: 240 Stoney Hill, Center Point, TX 78010 | |
| | D. Walning Address. 240 Stolley Fills, Genter Folick, TA 700 TO | |
| | Phone: 8303773191 Email: bnapaint11@gmail.com | |
| | | |
| | C. <u>Contact Person</u> . Provide information about the person to be contacted regarding this application. Indicate if this person is the owner, operator, engineer, attorney, accountant, or other title. | |
| | Name: Bonifacio Arreola Jr Title: Manager | |
| | Address: 240 Stoney Hills, Center Point, TX 78010 | |
| | Phone: 8303773191 Email: bnapaint11@gmail.com | |
| | D. If the transferee is someone other than a municipality, is the transferee current on the Regulatory Assessment Fees (RAF) with the Texas Commission on Environmental Quality (TCEQ)? | |
| | ☐ No ☐ Yes ☐ N/A | |
| | E. If the transferee is an IOU, is the transferee current on the Annual Report filings with the Commission? | |
| | □ No ▼ Yes □ N/A | |
| 7. | The legal status of the transferee is: | |
| | Individual or sole proprietorship | |
| | Partnership or limited partnership (attach Partnership agreement) | |
| | Charter number (as recorded with the Toyes Secretary of State). DRA MIDDOMAS | |
| F | Charter number (as recorded with the Texas Secretary of State): DBA MIBROMA3 | |
| L | Non-profit, member-owned, member controlled Cooperative Corporation [Article 1434(a) Water Supply or Sewer Service Corporation, incorporated under TWC Chapter 67] Charter number (as recorded with the Texas Secretary of State): Articles of Incorporation and By-Laws established (attach) | |
| Г | Municipally-owned utility | |
| | District (MUD, SUD, WCID, FWSD, etc.) | |
| L | | |

| County | County | | | | | |
|---------------|---|--|--|--|--|--|
| County | County | | | | | |
| Affecte | Affected County (a county to which Subchapter B, Chapter 232, Local Government Code, applies) | | | | | |
| Other (| please explain): | | | | | |
| | | | | | | |
| 8. If the tra | ansferee operates under any d/b/a, provide the | e name below: | | | | |
| | • | | | | | |
| Name: | MiBroMa 3 LLC | | | | | |
| | | an individual, provide the following information regarding the officers, | | | | |
| member | rs, or partners of the legal entity applying for | the transfer: | | | | |
| Name: | Severina Arreola | | | | | |
| | Managing Member | Ownership % (ıf applicable): | | | | |
| | 240 Stoney Hills, Center Point, TX 78010 | 1 (11) | | | | |
| | 8303773191 | Email: sarreola2018@gmail.com | | | | |
| Name: | Bonifacio Arreola Jr | | | | | |
| | Manager of Systems-Operations | Ownership % (ıf applicable): | | | | |
| | 240 Stoney Hills, Center Point, TX 78010 | | | | | |
| | 8303773191 | Email: bnapaint11@gmail.com | | | | |
| Name: | | | | | | |
| Position: | | Ownership % (1f applicable): | | | | |
| Address: | | | | | | |
| Phone: | | Email: | | | | |
| Name | | | | | | |
| Position: | | Ownership % (ıf applıcable): | | | | |
| Address: | | | | | | |
| | | Email: | | | | |
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10. Financial Information

The transferee Applicant must provide accounting information typically included within a balance sheet, income statement, and statement of cash flows. If the Applicant is an existing retail public utility, this must include historical financial information and projected financial information. However, projected financial information is only required if the Applicant proposes new service connections and new investment in plant, or if requested by Staff. If the Applicant is a new market entrant and does not have its own historical balance sheet, income statement, and statement of cash flows information, then the Applicant should establish a five-year projection taking the historical information of the transferor Applicant into consideration when establishing the projections.

Historical Financial Information may be shown by providing any combination of the following that includes necessary information found in a balance sheet, income statement, and statement of cash flows:

- 1. Completed Appendix A;
- 2. Documentation that includes all of the information required in Appendix A in a concise format; or
- 3. Audited financial statements issued within 18 months of the application filing date. This may be provided electronically by providing a uniform resource locator (URL) or a link to a website portal.

| | | 2. | Documentation that includes all of the information required in Appendix B in a concise format; |
|-----|-------|--------|---|
| | | 3. | A detailed budget or capital improvement plan, which indicates sources and uses of funds required, including |
| | | | improvements to the system being transferred; or |
| | | 4. | A recent budget and capital improvements plan that includes information needed for analysis of the operations |
| | | | test (16 Tex. Admin. Code § 24.11(e)(3)) for the system being transferred and any operations combined with the |
| | | | system. This may be provided electronically by providing a uniform resource locator (URL) or a link to a website |
| | | | portal. |
| | | | Part D: Proposed Transaction Details |
| 11. | Α. | | Proposed Purchase Price: \$ 50000 |
| | If th | ne tra | ansferee Applicant is an investor owned utility (IOU) provide answers to B through D. |
| | В. | Tr | ransferee has a copy of an inventory list of assets to be transferred (attach): |
| | | | □ No □ Yes ▼ N/A |
| | | | Total Original Cost of Plant in Service: \$ 95000 |
| | | | |
| | | | Accumulated Depreciation: \$ - 50000 |
| | | | Net Book Value: \$ 45000 |
| | C. | ap | ustomer contributions in aid of construction (CIAC): Have the customers been billed for any surcharges proved by the Commission or TCEQ to fund any assets currently used and useful in providing utility service? entify which assets were funded, or are being funded, by surcharges on the list of assets. |
| | | | No Yes |
| | | | Total Customer CIAC: \$ 0 Accumulated Amortization: \$ 0 |
| | | | Accumulated Amortization: \$ 0 |
| | D. | tra | eveloper CIAC: Did the transferor receive any developer contributions to pay for the assets proposed to be insferred in this application? If so, identify which assets were funded by developer contributions on the list of assets d provide any applicable developer agreements. |
| | | | No Yes |
| | | | Total developer CIAC: \$ 0 Accumulated Amortization: \$ 0 |
| | | | |
| 12. | A. | to e | e any improvements or construction required to meet the minimum requirements of the TCEQ or Commission and ensure continuous and adequate service to the requested area to be transferred plus any area currently certificated to transferree Applicant? Attach supporting documentation and any necessary TCEQ approvals, if applicable. |
| | | | No Yes |
| | | | |
| | | | |
| | | | |

Projected Financial Information may be shown by providing any of the following:

1. Completed Appendix B;

| | NA NA |
|----------|--|
| 13. | Provide any other information concerning the nature of the transaction you believe should be given consideration: None |
| 14. O | Complete the following proposed entries (listed below) as shown in the books of the Transferee (purchaser) after the acquisition. Debits (positive numbers) should equal credits (negative numbers) so that all line items added together equal zero. Additional entries may be made; the following are suggested only, and not intended to pose descriptive limitations: Utility Plant in Service: Suggested only, and not intended to pose descriptive limitations: Utility Plant in Service: Suggested only, and not intended to pose descriptive limitations: Other (Naccumulated Depreciation of Plant: Suggested only, and not intended to pose descriptive limitations: Suggested only, and not intended to pose descriptive limitations: Suggested only, and not intended to pose descriptive limitations: Other (Naccumulated Depreciation of Plant: Suggested only, and not intended to pose descriptive limitations: Suggested only, and not intended to pose descriptive limitations: Suggested only, and not intended to pose descriptive limitations: Other (Naccumulated Depreciation of Plant: Suggested only, and not intended to pose descriptive limitations: Suggested only, and not intended to pose descriptive limitations: Suggested only, and not intended to pose descriptive limitations: Other (Naccumulated Depreciation of Plant: Suggested only, and not intended to pose descriptive limitations: Other (Naccumulated Depreciation of Plant: Suggested only, and not intended to pose descriptive limitations: Other (Naccumulated Depreciation of Plant: Suggested only, and not intended to pose descriptive limitations: Other (Naccumulated Depreciation of Plant: Suggested only, and not intended to pose descriptive limitations: Other (Naccumulated Depreciation of Plant: Suggested only, and not intended to pose descriptive limitations: Other (Naccumulated Depreciation of Plant: Suggested only, and not intended to pose descriptive limitations: Other (Naccumulated Depreciation of Plant: Suggested only, and not intended to pose descripti |
| 15. | A. Explain any proposed billing change (NOTE: If the acquiring entity is an IOU, the IOU may not change the rates charged to the customers through this STM application. Rates can only be changed through the approval of a rate change application.) no change in rates B. If transferee is an IOU, state whether or not the transferee intends to file with the Commission, or an applicable municipal regulatory authority, an application to change rates for some or all of its customers as a result of the transaction within the next twelve months. If so, provide details below: Maintenance will be required, as system is older, to continue to provide potable water. Future updating of system including electronic meters. |

| | Part E: CCN Obtain or Amend Criteria Considerations |
|-----|---|
| 16. | Describe, in detail, the anticipated impact or changes in the quality of retail public utility service in the requested area as a result of the proposed transaction: |
| | None anticipated. |
| 17. | Describe the transferee's experience and qualifications in providing continuous and adequate service. This should include, but is not limited to: other CCN numbers, water and wastewater systems details, and any corresponding compliance history for all operations. |
| | MiBroMa 3 intends to hire Benjamin Rhys Eicholz (WG0015237), to test/operate system. Bonifacio Arreola Jr has a Painting Company and a Real Estate Company as well. Ive Manged up to 20 employees. I have contacts for any/all trades in construction including Plumber/Well Repair. I have been in Business for 15years. I have owned over 20 properties. I at one point Owned and Operated a Bar. |
| 18. | Has the transferee been under an enforcement action by the Commission, TCEQ, Texas Department of Health (TDH), the Office of the Attorney General (OAG), or the Environmental Protection Agency (EPA) in the past five (5) years for non-compliance with rules, orders, or state statutes? Attach copies of any correspondence with the applicable regulatory agency(ies) No Yes |
| 19. | Explain how the environmental integrity or the land will be impacted or disrupted as a result of the proposed transaction: |
| | None anticipated. |
| 20. | How will the proposed transaction serve the public interest? |
| | Improved water quality & service by updating systems in near future. |
| 21. | List all neighboring water or sewer utilities, cities, districts (including ground water conservation districts), counties, or other political subdivisions (including river authorities) providing the same service within two (2) miles from the outer boundary of the requested area affected by the proposed transaction: |
| | Fredericksburg Water District Kendall County Water District City of Kerrville Utility Dept |

| | | Part F: TC | EQ Public Water System or Sewo | er (' | Wastewater) Information | |
|-----|-----------|---------------------------------|--|-----------|--|--------------------------|
| (| - | | ublic Water or Sewer system to be a this information if you need mon | | | _ |
| 22. | A. | For Public Water Syst | tem (PWS): | | | |
| | | | TCEQ PWS Identification Numb | er: | 0880006 | (7 digit ID) |
| | | | Name of PW | S: | Whispering Oaks Water Works | |
| | | Date | of last TCEQ compliance inspection | on: | June 2019 | (attach TCEQ letter) |
| | | | Subdivisions serve | ed: | Whispering Oaks | |
| | В. | For Sewer service: | | | | |
| | | TCEQ Water Qua | ality (WQ) Discharge Permit Numb | er: | WQ | (8 digit ID) |
| | | | Name of Wastewater Facili | ty: | na | |
| | | | Name of Permit | | | |
| | | Date | of last TCEQ compliance inspection | on: | ** *** *** *** *** *** *** *** *** *** | (attach TCEQ letter) |
| | | | Subdivisions serve | ed: | na | |
| | | Date of application | to transfer permit <u>submitted</u> to TCE | Q: | | |
| 23. | List | the number of <i>existing</i> c | onnections, by meter/connection ty | ne. 1 | to be affected by the propose | d transaction: |
| | Wat | | | Sewer | | |
| | | Non-metered | 0 2" | | Residential | |
| | 69 | 5/8" or 3/4" | 0 3" | | 0 Commercial | |
| | A Karaman | 1" | 0 4" | | 0 Industrial | |
| | (|) 1 ½" | 0 Other | 58° 1.41, | 0 Other | |
| | | Total Water C | onnections: | 69 | Total Sewer Connection | ons: 0 |
| 24. | А.В. | No Yes Provide details on each | s required to meet TCEQ or Comm th required major capital improvements (attach any engineering reports or | ent 1 | necessary to correct deficience | cies to meet the TCEQ or |
| | W- 3 - W | Description of the | Capital Improvement: | Est | timated Completion Date: | Estimated Cost: |
| | none | | 18 M. W. W. Waller and A. Waller and M. W. | | The state of the s | |
| | 427424 | | | | | |
| | A Spirit | C I 1 | | 7.7 | | |
| | | C. Is there a mora | torium on new connections? | | | |
| | | X No □ | Yes: | | | |
| 25. | Does | the system being transfe | erred operate within the corporate b | oun | daries of a municipality? | |
| | | ▼ No | Yes: | | | (name of municipality) |
| | | المحادث | | her | of customers within the mun | |
| | | | Water: | | | cipal boundary. |

| | | - | | | | | |
|-----|----------------|--|-------------|---------------------------------------|-----------------------|---------------------------------------|---------|
| 26. | A. | Does the system being tra | nsferred p | urchase water or | sewer treatment cap | pacity from another source? | |
| | | No Yes: | If yes, att | ach a copy of pu | rchase agreement or | contract. | |
| | Capaci | ty is purchased from: | | | | | |
| | | | Water: | | | | |
| | | S | Sewer: | | | | |
| | В. | Is the PWS required to pu | | ter to meet canad | eity requirements or | drinking water standards? | |
| | р. | No Yes | renase wa | ici to meet capac | ory requirements or | difficulty water standards: | |
| | C. | What is the amount of wa | | | | ne agreement or contract? Wh | at is |
| | 0 | the percent of overall dem | nand suppl | ied by purchased | l water or sewer trea | tment (if any)? | |
| | | Water: | Amoun | t in Gallons | Percent of | demand | |
| | | Sewer: | | 0 | 0 | | |
| | D. | Will the purchase agreeme | ent or con | tract be transferr | ed to the Transferee | ? | |
| | | No Yes: | | | | | |
| 27. | Does the area? | PWS or sewer treatment plant No Yes: | have adeq | uate capacity to | meet the current and | projected demands in the rec | Juested |
| 28. | | name, class, and TCEQ license | number of | f the operator tha | t will be responsible | for the operations of the water | er or |
| | | ility service: | | | | | |
| | N: | ame (as it appears on license) | Class | License No. | | Water or Sewer | |
| | Ben Eiholz | | С | | WG 0015237 | water | |
| | | | | | | | |
| | | | | | | | |
| | | | Part G: I | Mapping & Affi | davits | | |
| | AL | L applications require mapping Read question 29 A and B t | | | | | |
| 29. | | or applications requesting to tranapping information with each o | | | | adjustment, provide the follo | wing |
| | | A general location (boundary, city, or to | | , | | a in reference to the nearest cod to: | ounty |
| | | | | requests to transfest be provided for | | ce areas for both water and so | ewer, |
| | | | | ap, graphic, or ag document. | diagram of the rec | uested area is not considere | d an |
| | | | | | | | |

- iii. To maintain the integrity of the scale and quality of the map, copies must be exact duplicates of the original map. Therefore, copies of maps cannot be reduced or enlarged from the original map, or in black and white if the original map is in color.
- 2. A detailed (large scale) map identifying the requested area in reference to verifiable man-made and natural landmarks such as roads, rivers, and railroads. The Applicant should adhere to the following guidance:
 - i. The map must be clearly labeled and the outer boundary of the requested area should be marked in reference to the verifiable man-made or natural landmarks. These verifiable man-made or natural landmarks must be labeled and marked on the map as well.
 - ii. If the application requests an amendment for both water and sewer certificated service area, separate maps need to be provided for each.
 - iii. To maintain the integrity of the scale and quality of the map, copies must be exact duplicates of the original map. Therefore, copies of maps cannot be reduced or enlarged from the original map, or in black and white if the original map is in color.
 - iv. The outer boundary of the requested area should not be covered by any labels, roads, city limits or extraterritorial jurisdiction (ETJ) boundaries.
- **B.** For applications that are requesting to include area not currently within a CCN, or for applications that require a CCN amendment (any change in a CCN boundary), such as the transfer of only a portion of a certificated service area, provide the following mapping information with each of the seven (7) copies of the application:
 - 1. A general location (small scale) map identifying the requested area with enough detail to locate the requested area in reference to the nearest county boundary, city, or town. Please refer to the mapping guidance in part A 1 (above).
 - 2. A detailed (large scale) map identifying the requested area with enough detail to accurately locate the requested area in reference to verifiable man-made or natural landmarks such as roads, rivers, or railroads. Please refer to the mapping guidance in part A 2 (above).
 - 3. One of the following identifying the requested area:
 - i. A metes and bounds survey sealed or embossed by either a licensed state land surveyor or a registered professional land surveyor. Please refer to the mapping guidance in part A 2 (above);
 - ii. A recorded plat. If the plat does not provide sufficient detail, Staff may request additional mapping information. Please refer to the mapping guidance in part A 2 (above); or
 - iii. Digital mapping data in a shapefile (SHP) format georeferenced in either NAD 83 Texas State Plane Coordinate System (US Feet) or in NAD 83 Texas Statewide Mapping System (Meters). The digital mapping data shall include a single, continuous polygon record. The following guidance should be adhered to:
 - **a.** The digital mapping data must correspond to the same requested area as shown on the general location and detailed maps. The requested area must be clearly labeled as either the water or sewer requested area.
 - **b.** A shapefile should include six files (.dbf, .shp, .shx, .sbx, .sbn, and the projection (.prj) file).
 - **c.** The digital mapping data shall be filed on a data disk (CD or USB drive), clearly labeled, and filed with Central Records. Seven (7) copies of the digital mapping data is also required.

| | Part H: Notice Information |
|-----|---|
| | The following information will be used to generate the proposed notice for the application. DO NOT provide notice of the application until it is found sufficient and the Applicants are ordered to provide notice. |
| 30. | Complete the following using verifiable man-made or natural landmarks such as roads, rivers, or railroads to describe the requested area (to be stated in the notice documents). Measurements should be approximated from the outermost boundary of the requested area: |
| | The total acreage of the requested area is approximately: 10 |
| | Number of customer connections in the requested area: 69 |
| | Affected subdivision: whispering oaks |
| | The closest city or town: fredericksburg |
| | Approximate mileage to closest city or town center: 7 |
| | Direction to closest city or town: north |
| | The requested area is generally bounded on the North by: fredericksburg |
| | on the East by: Cain city rd |
| | on the South by: comfort |
| | on the West by: morris ranch rd |
| 31. | A copy of the proposed map will be available at: courthouse |
| 32. | What effect will the proposed transaction have on an average bill to be charged to the affected customers? Take into consideration the average consumption of the requested area, as well as any other factors that would increase or decrease a customer's monthly bill. |
| | All of the customers will be charged the same rates they were charged before the transaction. |
| | All of the customers will be charged different rates than they were charged before the transaction. |
| | higher monthly bill lower monthly bill |
| | Some customers will be charged different rates than they were charged before |
| | (i.e. inside city limit customers) higher monthly bill lower monthly bill |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

| Oath for Transf | feror (Transferring Entity) |
|--|--|
| STATE OF | |
| COUNTY OF | |
| Ι, | being duly sworn, file this application for sale, transfer, |
| nerger, consolidation, acquisition, lease, or rental, as | |
| (owner, member of parting attest that, in such capacity, I am qualified and authorized familiar with the documents filed with this application, contained in the application; and, that all such statements to Applicant are true and correct. Statements about othe further state that the application is made in good faith and presently before the Commission. | , and have complied with all the requirements made and matters set forth therein with respect or parties are made on information and belief. I |
| further state that I have been provided with a copy of the authorized to agree and do agree to be bound by and comble Texas Commission on Environmental Quality, the Attorney General which have been issued to the system will be subject to administrative penalties or other enforcements. | ply with any outstanding enforcement orders of Public Utility Commission of Texas or the or facilities being acquired and recognize that I |
| (Ut | AFFIANT fility's Authorized Representative) |
| If the Affiant to this form is any person other than the solutionney, a properly verified Power of Attorney must be en | |
| SUBSCRIBED AND SWORN BEFORE ME, a Notary this day t | Public in and for the State of Texas he of |
| SEAL | |
| | |
| | |
| | |
| | NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS |
| • | |

PRINT OR TYPE NAME OF NOTARY

PUCT Sale, Transfer, Merger Page **13** of **20** (September 2019)

My commission expires:

| Oath for Transferee (| Acquiring Entity) |
|--|--|
| STATE OF | |
| COUNTY OF | |
| I, | being duly sworn, file this application for sale, transfer, |
| (owner, m) I attest that, in such capacity, I am qualified and authorized to fit the documents filed with this application, and have complied with that all such statements made and matters set forth therein with sother parties are made on information and belief. I further state application does not duplicate any filing presently before the Country I further state that I have been provided with a copy of the 1 to agree and do agree to be bound by and comply with any content in Environmental Quality, the Public Utility Commission of the system or facilities being acquired and recognize that enforcement actions if I do not comply. | with all the requirements contained in the application; and, respect to Applicant are true and correct. Statements about the that the application is made in good faith and that this emmission. 6 TAC § 24.239 Commission rules. I am also authorized outstanding enforcement orders of the Texas Commission Texas or the Attorney General which have been issued to |
| | |
| | AFFIANT (Utility's Authorized Representative) |
| If the Affiant to this form is any person other than the sole owner verified Power of Attorney must be enclosed. | r, partner, officer of the Applicant, or its attorney, a properly |
| SUBSCRIBED AND SWORN BEFORE ME, a Notary Publi this day the | c in and for the State of Texas of, 20 |
| SEAL | |
| | |
| | |
| | |
| | NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS |
| | PRINT OR TYPE NAME OF NOTARY |
| My commission expires: | |

Appendix A: Historical Financial Information (Balance Sheet and Income Schedule)

(Audited financial statements may be substituted for this schedule – see Item 17 of the instructions)

| HISTORICAL BALANCE SHEETS (ENTER DATE OF YEAR END) | CURRENT(A) (0120- 063020 | A-1 YEAR | A-2 YEAR (2018 | A-3 YEAR () | A-4 YEAR () | A-5 YEAR () |
|--|-----------------------------|-----------|--------------------|--------------------------|----------------|------------------|
| CURRENT ASSETS | | | | | | |
| Cash | 10650 | 20700 | 19200 | | | |
| Accounts Receivable | 0 | 0 | 0 | | | |
| Inventories | . 0 | 0 | 0 | | | |
| Other | 0 | 0 | 0 | | | |
| A. Total Current Assets | 10650 | 20700 | 19200 | | | |
| FIXED ASSETS | | | | | | |
| Land | 126870 | 128000 | | | | |
| Collection/Distribution System | 0 | C | | | | |
| Buildings | 20000 | 21000 | | | | |
| Equipment | 50000 | 55000 | | | | |
| Other | 0 | (| | | | |
| Less: Accum. Depreciation or Reserves | 0 | C | | | | |
| B. Total Fixed Assets | 178870 | 204000 | | | | |
| C. TOTAL Assets (A + B) | 181906.55 | 230782.04 | | | | 11.00 |
| CURRENT LIABILITIES | | | OF THE STATE OF | | | |
| Accounts Payable | 0 | 0 | | | | |
| Notes Payable, Current | 0 | 0 | | | | |
| Accrued Expenses | 0 | 0 | | | | |
| Other | 0 | 0 | | | | |
| D. Total Current Liabilities | 0 | 0 | | The second second second | | La dimension |
| LONG TERM LIABILITIES | RIVE HEREIN | | | | | |
| Notes Payable, Long-term | 0 | 0 | | | | |
| Other | 0 | 0 | | | | |
| E. Total Long Term Liabilities | 0 | 0 | | | 4 4 4 | |
| F. TOTAL LIABILITIES (D + E) | 0 | 0 | | | | and the state of |
| OWNER'S EQUITY | TO CHARLES | | | | | |
| Paid in Capital | 0 | 0 | | | | |
| Retained Equity | 0 | 0 | | | | |
| Other | 0 | 0 | | | | |
| Current Period Profit or Loss | 0 | 0 | | | | |
| G. TOTAL OWNER'S EQUITY | 0 | | | | | |
| TOTAL LIABILITIES+EQUITY (F + G) = C | 0 | 0 | | | | |
| WORKING CAPITAL (A – D) | 0 | 0 | | | | |
| CURRENT RATIO (A / D) | 0 | 0 | | | | |
| DEBT TO EQUITY RATIO (E / G) | 0 | 0 | | | | |

DO NOT INCLUDE ATTACHMENTS A OR B IN FILED APPLICATION IF LEFT BLANK

| HIST | HISTORICAL NET INCOME INFORMATION | | | | | | | | | | |
|--|-----------------------------------|------------------------|--------------------------|----------|----------|----------|--|--|--|--|--|
| (ENTER DATE OF YEAR END) | CURRENT(A) (06 30)20 | A-1 YEAR (12-31-19) | A-2 YEAR (12- 31 2018 | A-3 YEAR | A-4 YEAR | A-5 YEAR | | | | | |
| METER NUMBER | (00 00)20 | (12-57-19 | (12-37-2910 | | | | | | | | |
| Existing Number of Taps | 69 | 64 | 64 | 64 | 64 | 64 | | | | | |
| New Taps Per Year | 3 | 3 | 0 | 0 | 0 | 0 | | | | | |
| Total Meters at Year End | 71 | 69 | 64 | 69 | 69 | 69 | | | | | |
| METER REVENUE | | | | | | | | | | | |
| Revenue per Meter (use for projections) | 300 | 300 | 300 | 300 | 300 | 300 | | | | | |
| Expense per Meter (use for projections) | 100 | 100 | 100 | 75 | 75 | 60 | | | | | |
| Operating Revenue Per Meter | 200 | 200 | 200 | 225 | 225 | 240 | | | | | |
| GROSS WATER REVENUE | | | | | | | | | | | |
| Revenues- Base Rate & Gallonage Fees | 300 | 300 | 300 | 225 | 225 | 240 | | | | | |
| Other (Tap, reconnect, transfer fees, etc) | 30 | 30 | 0 | 0 | 0 | 0 | | | | | |
| Gross Income | 330 | 330 | 300 | 225 | 225 | 240 | | | | | |
| EXPENSES | | | | | | | | | | | |
| General & Administrative (see schedule) | 15000 | 14500 | 11730 | 11730 | 11730 | 10023 | | | | | |
| Operating (see schedule) | 3000 | 2650 | 3317 | 3317 | 3317 | 3014 | | | | | |
| Interest | 0 | 0 | | 0 | 0 | | | | | | |
| Other (list) | 0 | 0 | | 0 | 0 | | | | | | |
| NET INCOME | 18030 | 17180 | 15047 | 15047 | 15047 | 7009 | | | | | |

| HISTORICAL EXPENSE INFORMATION (ENTER DATE OF YEAR END) | CURRENT(A) (2020 | A-1 YEAR (- 20 <u>1</u>)9 | A-2 YEAR (20)18 | A-3 YEAR () | A-4 YEAR () | A-5 YEAR () |
|--|---------------------|--------------------------------|--|---|----------------|----------------|
| GENERAL/ADMINISTRATIVE EXPENSES | | | | | | |
| Salaries & Benefits-Office/Management | 15000 | 14500 | 11730 | | | |
| Office | | | | | | |
| (services, rentals, supplies, electricity) | 0000 | 2050 | 2047 | | _ | - |
| Contract Labor | 3000 | | | | - | |
| Transportation | 600 | 600 | 600 | | - | |
| Insurance | 0 | 0 | 0 | | - | |
| Telephone | 700 | 643 | 615 | | _ | |
| Utilities | 3319 | | 4755.00 | | _ | |
| Property Taxes | 1896.83 | | 1755.23 | | + | |
| Professional Services/Fees (recurring) | 500 | 500 | 500 | | - | |
| Regulatory- other | 0 | 0 | 0 | | _ | |
| Other (describe) | 0 | 0 | 0 | | | |
| Interest | 0 | 0 | 0 | | - | |
| Other | 0 | 0 | 0 | | | |
| Other | 0 | | CORT STATE AND ADDRESS OF THE STATE OF THE S | | | |
| Total General Admin. Expenses (G&A) | 25015.83 | 20694.29 | 18517.23 | | | |
| % Increase Per Year | 20 | 12 | 0 | | | |
| OPERATIONS & MAINTENANCE EXPENSES | | | | | | |
| Salaries & Benefits (Employee, Management) | 0 | 0 | 0 | | | |
| Materials & Supplies | 0 | 0 | 0 | | | |
| Utilities Expense-office | 0 | 0 | 0 | | | |
| Contract Labor | 0 | 0 | 0 | | | |
| Transportation Expense | 0 | 0 | 0 | | | |
| Depreciation Expense | 0 | 0 | 0 | | | |
| Other(describe) | 0 | 0 | 0 | | | |
| Total Operational Expenses (O&M) | 0 | 0 | 0 | | | |
| Total Expense (Total G&A + O&M) | 0 | 0 | 0 | 7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. | | |
| Historical % Increase Per Year | 0 | 0 | 0 | | | |
| | MANAGEMENT | TATE OF THE STREET | THE WALL | WINNESS TO | | |
| ASSUMPTIONS | | 0 | 0 | | | |
| | 0 | | | | | |
| ASSUMPTIONS Interest Rate/Terms Depreciation Schedule (attach) | 0 | | 0 | | | |

| Appendix B: Projected Information | | | | | | | | |
|--|---------------------|----------------|------------------|---------------------|------------|----------------|--|--|
| HISTORICAL BALANCE SHEETS (ENTER DATE OF YEAR END) | CURRENT(A) | A-1 YEAR | A-2 YEAR | A-3 YEAR | A-4 YEAR | A-5 YEAR | | |
| CURRENT ASSETS | | | | | | | | |
| Cash | | | | | | | | |
| Accounts Receivable | | | | | | | | |
| Inventories | | | | | | | | |
| Income Tax Receivable | | | | | | | | |
| Other | | | | | | | | |
| A. Total Current Assets | | | | | | | | |
| FIXED ASSETS | | | | | | | | |
| Land | | | | | | | | |
| Collection/Distribution System | | | | | | | | |
| Buildings | | | | | | | | |
| Equipment | | | | | | | | |
| Other | | | | | | | | |
| Less: Accum. Depreciation or Reserves | | | | | | | | |
| B. Total Fixed Assets | | | | and Arthurs | | | | |
| C. TOTAL Assets (A + B) | | | 10-10-1-19 | | | | | |
| CURRENT LIABILITIES | | | | | | | | |
| Accounts Payable | | | | | | | | |
| Notes Payable, Current | | | | | | | | |
| Accrued Expenses | | | | | | | | |
| Other | | | | | | | | |
| D. Total Current Liabilities | | history of the | A to remember to | A Same of the State | a Karamana | and the second | | |
| LONG TERM LIABILITIES | | | | | | | | |
| Notes Payable, Long-term | | | | | | | | |
| Other | | | | | | | | |
| E. Total Long Term Liabilities | | | | | | | | |
| F. TOTAL LIABILITIES (D + E) | | ni t | | | | | | |
| OWNER'S EQUITY | | | | | | | | |
| Paid in Capital | | | | | | | | |
| Retained Equity | | | | | | | | |
| Other | | | | | | | | |
| Current Period Profit or Loss | | | | | | | | |
| G. TOTAL OWNER'S EQUITY | A DESERTED TO SERVE | | The section | | | | | |
| TOTAL LIABILITIES+EQUITY (F + G) = C | | | | | | | | |
| WORKING CAPITAL (A – D) | | | | | | | | |
| CURRENT RATIO (A / D) | | | | | | | | |
| DEBT TO EQUITY RATIO (F / G) | | | | | | | | |

| PROJECTED NET INCOME INFORMATION | | | | | | | | | |
|--|-------------------|----------|----------|----------|----------|----------|--|--|--|
| | CURRENT(A) | A-1 YEAR | A-2 YEAR | A-3 YEAR | A-4 YEAR | A-5 YEAR | | | |
| (ENTER DATE OF YEAR END) | () | () | () | () | () | () | | | |
| METER NUMBER | | | | | | | | | |
| Existing Number of Taps | 71 | | | | | | | | |
| New Taps Per Year | 0 | | | | | | | | |
| Total Meters at Year End | 71 | | | | | | | | |
| METER REVENUE | ONE STATE | | | | | | | | |
| Revenue per Meter (use for projections) | 300 | | | | | | | | |
| Expense per Meter (use for projections) | 100 | | | | | | | | |
| Operating Revenue Per Meter | 200 | 0 | | | | | | | |
| GROSS WATER REVENUE | | | | | | | | | |
| Revenues- Base Rate & Gallonage Fees | 300 | | | | | | | | |
| Other (Tap, reconnect, transfer fees, etc) | 0 | | | | | | | | |
| Gross Income | 300 | | | | | | | | |
| EXPENSES | Mark the state of | | | | | | | | |
| General & Administrative (see schedule) | 15000 | | | | | | | | |
| Operating (see schedule) | 3000 | | | | | | | | |
| Interest | 0 | | | | | | | | |
| Other (list) | 0 | | | | | | | | |
| NET INCOME | 3300 | | | | | | | | |

| PROJECTED EXPENSE DETAIL | YEAR 1 | YEAR 2 | YEAR 3 | YEAR 4 | YEAR 5 | TOTALS |
|---------------------------------|--------|--------------------|--------|--------|--------|------------|
| GENERAL/ADMINISTRATIVE EXPENSES | | THE REAL PROPERTY. | | | | THE STREET |
| Salaries | 36000 | | | | | |
| Office | 1000 | | | | | |
| Computer | 350 | | | | | |
| Auto | 600 | | | | | |
| Insurance | 1130 | | | | | |
| Telephone | 750 | | | | | |
| Utilities | 4500 | | | | | |
| Depreciation | 0 | | | | | |
| Property Taxes | 2500 | | | | | |
| Professional Fees | 2500 | | | | | |
| Interest | 0 | 0 | 0 | 0 | 0 | C |
| Other | | | | | | |
| Total | 49330 | | | | | |
| % Increase Per projected Year | | | | | | |
| OPERATIONAL EXPENSES | | | | | | |
| Salaries | 36000 | | | | | |
| Auto | 600 | | | | | |
| Utilities | 4500 | | | | | |
| Depreciation | | | | | | |
| Repair & Maintenance | 5000 | | | | | |
| Supplies | 1000 | | | | | |
| Interest | | | | | | |
| Other | | | | | | |
| Total | 47100 | | | | | |

| PROJECTED SOURCES AND USES OF | YEAR 1 | YEAR 2 | YEAR 3 | YEAR 4 | YEAR 5 | TOTALS |
|--|--------|--------|--------|--------|--------|--------|
| CASH STATEMENTS | | | | | | |
| SOURCES OF CASH | | | | | | BRANC |
| Net Income | | | | | | |
| Depreciation (If funded by revenues of system) | | | | | | |
| Loan Proceeds | | | | | | |
| Other | | | | | | |
| Total Sources | | | | | | |
| USES OF CASH | | | | | | |
| Net Loss | | | | | | |
| Principle Portion of Pmts. | | | | | | |
| Fixed Asset Purchase | | | | | | |
| Reserve | | | | | | |
| Other | | | | | | |
| Total Uses | | | | | | |
| NET CASH FLOW | | | | | - | |
| DEBT SERVICE COVERAGE | | | | | | |
| Cash Available for Debt Service (CADS) | | | | | | |
| A: Net Income (Loss) | | | | | | |
| B: Depreciation, or Reserve Interest | | | | | | |
| C: Total CADS $(A + B = C)$ | | | | | | |
| D: DEBT SERVICE (DS) | | | | | | |
| Principle Plus Interest | | | | | | |
| E: DEBT SERVICE COVERAGE RATIO | | | | | NO. | |
| CADS Divided by DS $(E = C / D)$ | | | | | | |