



Control Number: 51721



Item Number: 1476

Addendum StartPage: 0



REGISTRATION OF SUBMETERED OR ALLOCATED UTILITY SERVICE

Texas Commission on Environmental Quality

This box for TCEQ Use Only

Registration No. S 444

Date: 1/7/03 By: [signature]

Customer Reference Number - If Issued*	Regulated Entity Reference Number - If Issued*
CN (9 digits)	RN (9 digits)

* If the owner does not have this number, complete a Core Data Form (TCEQ-10400) and submit it with this registration.

* If you do not have this number for the property, complete a Core Data Form (TCEQ-10400) and submit it with this registration.

Owner (When completing the Core Data Form, enter the owner's information under "Customer.")**NAME AND TYPE OF PROPERTY WHERE UTILITY SERVICE IS PROVIDED** (On the Core Data Form, this is the "Regulated Entity")Name: **Commander's Palace Apartments**☒ Apartment ☐ Condominium ☐ Manufactured Home Rental Community ☐ Multiple-Use Facility (describe below)

If multiple-use facility, describe here:

INFORMATION ON UTILITY SERVICETenants are billed for: ☐ Water ☐ Wastewater ☒ Both These bills are: ☐ Submetered ☒ Allocated

Name of utility providing water/wastewater: City of Killeen

Date submetered or allocated billing begins (or began): December-02

METHOD USED TO OFFSET CHARGES FOR COMMON AREAS (CHECK ONE):☐ This provision does not apply to this property. (Each unit is submetered, and we bill the tenant accordingly.)☐ All common areas are metered or submetered. We deduct the actual charges for water and wastewater to these areas. Then we allocate the remainder of the utility bill among our tenants.☒ This property has an installed irrigation system that **is not separately metered or submetered**. We deduct 25 percent of the retail public utility's total charges for water and wastewater consumption, then allocate the remaining charges among our tenants.☐ This property has an installed irrigation system that **is separately metered or submetered**. We deduct 5 percent of the retail public utility's total charges for water and wastewater consumption, then allocate the remaining charges among our tenants.☐ This property does not have an installed irrigation system. We deduct 5 percent of the retail public utility's total charges for water and wastewater consumption, then allocate the remaining charges among our tenants.***IF UTILITY SERVICES ARE ALLOCATED, COMPLETE THE FOLLOWING ALSO.****METHOD USED TO ALLOCATE UTILITY CHARGES (CHECK ALL THAT APPLY):**☐ As outlined in condominium contract (describe):☐ Size of manufactured home rental space: The size of the space rented by the tenant divided by the size of all rental spaces.☐ Occupancy and size of rental unit: _____ percent (which is equal to or greater than 50%) of the utility bill for water / wastewater consumption is allocated using the occupancy method **checked below**. The remainder is allocated according to either:

! The size of the tenant's dwelling unit divided by the total size of all dwelling units, or

! The size of the space rented by the tenant of a manufactured home divided by the size of all rental spaces.

(Note: If you check this option, you must also check one of the next three boxes to indicate the occupancy method used.)

☒ **Occupancy method:** The number of occupants in the tenant's dwelling unit is divided by the total number of occupants in all dwelling units at the beginning of the utility's billing period.☐ **Ratio occupancy method:** The number of occupants in the tenant's dwelling unit is adjusted as shown in the table at right. This adjusted value is divided by the total of these values for all dwelling units at the beginning of the retail public utility's billing period. (The idea behind this method is that increased occupancy does not result in an equal increase in usage.)

Number of Occupants	Number of Occupants for Billing Purposes
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1	1.0
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2	1.6
---	-----

3	2.2
---	-----

>3	2.2 + 0.4 for each additional occupant
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Number of Bedrooms	Number of Occupants for Billing Purposes
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0 (Efficiency)	1.0
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1	1.6
---	-----

2	2.8
---	-----

3	4.0
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>3	4.0 + 1.2 for each additional bedroom
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☐ **Submetered hot water:** The individually submetered hot water used in the tenant's dwelling unit is divided by all submetered hot water used in all dwelling units.☐ **Submetered cold water is used to allocate charges for hot water provided through a central system:** The individually submetered cold water used in the tenant's dwelling unit is divided by all submetered cold water used in all dwelling units.

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TNRCC Core Data Form

TNRCC Use Only

If you have questions on how to fill out this form or about our Central Registry, please contact us at 512-239-5175.

Individuals are entitled to request and review their personal information that the agency gathers on its forms. They may also have any errors in their information corrected. To review such information, contact us at 512-239-3282.

SECTION I: General Information

1. Reason for Submission <i>Example: new wastewater permit; IHW registration; change in customer information; etc.</i> New Registration for Submetered or Allocated Utility Service	
2. Attachments <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Describe Any Attachments: (ex: Title V Application, Waste Transporter Application, etc.) Registration of Submetered or Allocated Utility Service
3. Customer Reference Number-If Issued CN (9 digits)	4. Regulated Entity Reference Number-if issued RN (9 digits)

SECTION II: Customer Information

5. Customer Role (Proposed or Actual) -- As It Relates to the Regulated Entity Listed on This Form Please check <u>one</u> of the following: <input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner and Operator <input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Volunteer Cleanup Applicant <input type="checkbox"/> Other: _____			
TNRCC Use Only <input type="checkbox"/> Superfund <input type="checkbox"/> PST <input type="checkbox"/> Respondent			
6. General Customer Information <input checked="" type="checkbox"/> New Customer <input type="checkbox"/> Change to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership <input type="checkbox"/> No Change* *If "No Change" and Section I is complete, skip to Section III - Regulated Entity Information.			
7. Type of Customer: <input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietorship - D.B.A. <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Federal Government <input type="checkbox"/> State Government <input type="checkbox"/> County Government <input type="checkbox"/> City Government <input type="checkbox"/> Other Government _____ <input type="checkbox"/> Other _____			
8. Customer Name (If an individual, please print last name first) If new name, enter previous name: Commander's Palace Apartments GP, LLC			
9. Mailing Address: 5421 Alpha Road			
City Dallas		State TX	ZIP 75240
ZIP + 4			
10. Country Mailing Information if outside USA		11. E-Mail Address if applicable	
12. Telephone Number (972)239-9800		13. Extension or Code	
		14. Fax Number if applicable (972)239-9801	
15. Federal Tax ID (9 digits) 753073216		16. State Franchise Tax ID Number if applicable	
		17. DUNS Number if applicable (9 digits)	
18. Number of Employees <input checked="" type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher		19. Independently Owned and Operated? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

SECTION III: Regulated Entity Information

20. General Regulated Entity Information <input checked="" type="checkbox"/> New Regulated Entity <input type="checkbox"/> Change to Regulated Entity Information <input type="checkbox"/> No Change* *If "No Change" and Section I is complete, skip to Section IV - Preparer Information.	
21. Regulated Entity Name (If an individual, please print last name first) Commander's Palace Apartments	

22. Street Address: 702 Santa Rosa					
(No P.O. Boxes)					
City Killeen			State TX	ZIP 76541	ZIP + 4
23. Mailing Address					
City			State	ZIP	ZIP + 4
24. E-Mail Address:					
25. Telephone Number (254)634-6460			26. Extension or Code		27. Fax Number if applicable (254)634-6586
28. Primary SIC Code (4 digits) 6513	29. Secondary SIC Code (4 digits) 6531	30. Primary NAICS Code (5 or 6 digits) 53111		31. Secondary NAICS Code (5 or 6 digits) 53110	
32. What is the Primary Business of this entity? (Please do not repeat the SIC or NAICS description.) Multifamily housing					
<i>Questions 33 - 37 address geographic location. Please refer to the instructions for applicability.</i>					
33. County:					
34. Description of Physical Location					
35. Nearest City			State	Nearest ZIP	
36. Latitude (N)			37. Longitude (W)		
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
38. TNRCC Programs In Which This Regulated Entity Participates <i>Not all programs have been listed. Please add to this list as needed. If you don't know or are unsure, please mark "unknown."</i>					
<input type="checkbox"/> Animal Feeding Operation	<input type="checkbox"/> Petroleum Storage Tank		<input type="checkbox"/> Water Rights		
<input type="checkbox"/> Title V – Air	<input type="checkbox"/> Wastewater Permit		<input type="checkbox"/> _____		
<input type="checkbox"/> Industrial & Hazardous Waste	<input type="checkbox"/> Water Districts		<input type="checkbox"/> _____		
<input type="checkbox"/> Municipal Solid Waste	<input checked="" type="checkbox"/> Water Utilities		<input type="checkbox"/> Unknown		
<input type="checkbox"/> New Source Review - Air	<input type="checkbox"/> Licensing - TYPE(s) _____				

SECTION IV: Preparer Information

39. Name Helen Letkeman - The Singenis Corporation			40. Title Executive Secretary		
41. Telephone Number (806)771-4364		42. Extension or Code 14		43. Fax Number if applicable (806)780-8159	
44. E-Mail Address: helen@singenis.com					