

Control Number: 51721



Item Number: 1954

_ ~						18410 07	127/60
	REGISTRATION	SUBMETERED	OR ALL	OCATED		This Box for TNRCC	Use Only
	ÚT L	ILITY SERVICE	. /	SAX	2		PCYU
	((- N45	54	Renusa	Date:	9/18/02	By: Roxo
ustomer Refe	erence Number-if issued		Regulat	ed Entity R	eference N	umber-if issu	ed*
CN		(9 digits)	RN				(9 digit:
Form (TNRCC-1	es no ក្រុទ្ធye jijis ក្ ហិ្រាb គាំំ្រ cd 0400) and submit it with thi	s registration.				the property, coubmit it with this	
OWNER ("CUSTO	MER") A POST	out of Con	mer	se sow	Nice	Inc	
	OF PROPERTY WHERE UTILIT	Y SERVICE IS PROVI	DEC"REGUL	ATED ENTITY	") U		
Vame Jac	ckson Squa	re Hoar	+mer	72			
	• Condominium 🖣 • M	lanufactured Home	Rental Co	nmunity •		se Facility (desc	ribe below)
f multiple-use fa	acility, describe here:				P. Ne		
NFORMATION ON	UTILITY SERVICE				,		
enants are bille	ed for: • Water • Wastev	vater • Both		Thes	se bills are:	 Submetered 	 Allocate
lame of utility p	roviding water/wastewater:	Metiler	- Pu	blic U	しナンレナ	وح	
Date submetere	d or allocated billing begins	(or began): りょう	Core	Deco	mber	2 Q00'	2//
	O OFFSET CHARGES FOR COM		•				
This provision	does not apply to this prop	perty .(Each unit is s	submetered	l, and we bill	the tenant a	ccordingly.)	
	reas are metered or submere remainder of the utility bill			harges for wa	ater and was	tewater to these	e areas. The
	has an installed irrigation sility's total charges for water						
	has an installed irrigation total charges for water and						
	does not have an installed stewater and then allocate t				he retail pub	lic utility's total o	charges for
	*IF UTILITY SERV	ICES ARE ALLOCAT	TED, COMP	LETE THE FO	LLOWING A	LSO.	· · · · · · · · · · · · · · · · · · ·
METHOD USED TO	O ALLOCATE UTILITY CHARGE	S CHECK ALL THAT A	PPLY):				
	nd size of rental unit: (Own						
	te the occupancy method ι						tion is
	the occupancy method chectenant's dwelling unit divide				ording to eit	her:	
	space rented for the tenant	-		-	of size of all	manufactured ho	ome spaces
	ethod: The number of occu						

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	Occupants	for Billing Purposes
adjusted as shown in the table at right. This adjusted value is divided by the total of	1	1.0
these values for all dwelling units at the beginning of the retail public utility's billing	2	1.6
period. (The idea behind this method is that increased occupancy does not result in an	3	2.2
equal increase in usage.)	>3	2.2 + 0.4 for each additional occupant
	Number of Bedrooms	Number of Occupants for Billing Purposes
Estimated occupancy method: The estimated occupancy in the tenant's dwelling unit is	0 (Efficiency)	1
divided by the total estimated occupancy of all dwelling units. The estimated occupancy	1	1.6
for each unit is based on the number of bedrooms and is determined from the table at	2	2.8
right.	3	4.0
,	>3	4.0 + 1.2 for each additional bedroom

• 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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Number of Number of Occupants

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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							
	xation tormula						
2. Attachments Describe Any Attachments: (e	x: Title V Application, Waste Transporter Application, etc.)						
Tres (No Registration of	Submetered or Allocated Utility Suc						
3. Customer Reference Number if issued 4 Regulated Entity Reference Number-if issued							
CN (9 digits)	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: ☐ Owner ☐ Or☐ Occupational Licensee ☐ Volunteer Cleanup Applicant	perator						
TNRCC Use Only Superfund DR	Respondent						
6. General Customer Information ☐ New Customer ☐ Change to Customer Information [*If "No Change" and Section I is complete, skip to S	☐ Change in Regulated Entity Ownership ☐ No Change* section III - Regulated Entity Information.						
7. Type of Customer:							
8. Customer Name (If an individual, please print last name first) If new name, enter previous name: 100 Jackson, Ltd. d.m. Jackson Square Hots.							
9. Mailing Address:							
4418 Ocean Drive							
City COCOUS Christi TX 78412 ZIP+4							
10. Country Mailing Information if outside USA 11. E-Mail Address if applicable							
12. Telephone Number / 13. Extension or Code 14. Fax Number if applicable							
CS11851-08125 (361)851-8122							
15. Federal Tax ID (9 digits) 16. State Franchise Tax ID Number if applicable 17. DUNS Number if applicable (9 digits)							
18. Number of Employees 19. Independently Owned and Operated?							
□ 0-20							
SECTION III: Regulated Entity Information							
20. General Regulated Entity Information ☐ New Regulated Entity ☐ Change to Regulated Entity Information ☐ 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 las	21. Regulated Entity Name (If an individual, please print last name first) SEP 13 2002						

22. Street Address:	700 E	وم	f Ja	ala	a			,			
(No P.O. Boxes)	~				0. /				710 . 4		
City		^ 0 0	١ ـ		State	· ·		ZIP	ZIP + 4		
		<u>WX</u>	en		<u>, , , , , , , , , , , , , , , , , , , </u>	<u></u>	100	701	10000		
23. Mailing			· · · · · · · · · · · · · · · · · · ·								
Address	2.				710		710	710 + 4			
	City				State	е		ZIP	ZIP + 4		
24. E-Mail Address:											
25. Telephone Num	ber		26. Extensio	on or Code	9 2	7. Fax	c Numbe	r ıf applicab	le		
	11851 0812			····				()	-		
28. Primary SIC Code (4 digits)	SIC Code SIC Code 30. Primary NA				31. Secondary NAICS Code (5 or 6 digits)						
32. What is the Prin	nary Business of this	entity	? (Please do	not repeat	t the	SIC or	· NAICS (description.)	ı		
Questic	ons 33 - 37 address g	 leograp	 ohic location	ı. Please r	refer	to the	instruct	tions for ap	plicability.		
33. County:									<u> </u>		
34. Description of F	Physical Location										
35. Nearest City							State		Nearest ZIP		
36. Latitude (N)				37. Long		 e (W)		<u></u>			
Degrees	Minutes	S	Seconds	De	grees	S	, , , , , , , , , , , , , , , , , , ,	Minutes	Seconds		
38. TNRCC Program	ms In Which This Reg this list as neede								i. Please add to		
☐ Animal Feeding (Operation	☐ Pe	☐ Petroleum Storage Tank				☐ Wa	☐ Water Rights			
☐ Title V – Air		☐ Wa	Wastewater Permit								
☐ Industrial & Haza	ardous Waste	☐ Water Districts									
☐ Municipal Solid V	☐ Water Utilities			☐ Unl	known						
☐ New Source Rev	/iew - Air	Lic	censing - TYP	,E(s)							
SECTION IV: F	Preparer Informa	at <u>ion</u>									
39. Name	39. Name Onua Hauden					40. Fittle Troperty Supervisor					
41. Telephone Number (361) 87 - 0812				ion or Cod	le	43. Fax Number if applicable (34) 81.22					
44. E-Mail Address	s:										

TNRCC-10400 (05/02)