



Control Number: 51721



Item Number: 42

Addendum StartPage: 0

SAP 6561 - 8-18-14 CO

		This Box for TCEQ Use Only	
Texas Commission on Environmental Quality		Registration No. 8 6561	
Registration of Submetered OR Allocated Utility Service		Date 8-18-14	By JL
This Box for TCEQ Use Only			
CUSTOMER REFERENCE NUMBER		REGULATED ENTITY REFERENCE NUMBER	
CN(9 digits)	N/A	RN(9 digits)	N/A
Send a completed Core Data Form (TCEQ-10400) with this registration.			
PROPERTY OWNER (Customer on TCEQ-10400)			
Name	HEATHER VILLAGE APARTMENTS		
Do not enter the name of the owner's contract manager, management company, or billing company.			
NAME AND TYPE OF PROPERTY WHERE UTILITY SERVICE IS PROVIDED (Regulated Entity on TCEQ-10400)			
Name	HEATHER VILLAGE APARTMENTS		
<input checked="" type="checkbox"/> Apartment Complex	<input type="checkbox"/> Condominium	<input type="checkbox"/> Manufactured Home Rental Community	<input type="checkbox"/> Multiple-Use Facility
If applicable, describe the "multiple-use facility" here: N/A			
INFORMATION ON UTILITY SERVICE			
Tenants are billed for	<input checked="" type="checkbox"/> Water	<input checked="" type="checkbox"/> Wastewater	<input type="checkbox"/> Submetered OR <input checked="" type="checkbox"/> Allocated ★★☆
Name of utility providing water/wastewater	WATER & SEWER		
Date submetered or allocated billing begins (or began)	JULY 9 2014		Required
METHOD USED TO OFFSET CHARGES FOR COMMON AREAS Check one line only.			
<input type="checkbox"/> Not applicable, because	<input type="checkbox"/> Bills are based on the tenant's actual submetered consumption		
<input type="checkbox"/> There are neither common areas nor an installed irrigation system			
<input type="checkbox"/> All common areas and the irrigation system(s) are metered or submetered;			
We deduct the actual utility charges for water and wastewater to these areas then allocate the remaining charges among our tenants.			
<input checked="" type="checkbox"/> This property has an installed irrigation system that is not separately metered or submetered;			
We deduct <input type="checkbox"/> percent (we deduct at least 25 percent) of the utility's total charges for water and wastewater consumption, then allocate the remaining charges among our tenants.			
<input type="checkbox"/> This property has an installed irrigation system(s) that is/are separately metered or submetered;			
We deduct the actual utility charges associated with the irrigation system(s), then deduct at least 5 percent of the utility's total charges for water and wastewater consumption, then allocate the remaining charges among our tenants.			
<input type="checkbox"/> This property does not have an installed irrigation system;			
We deduct at least 5 percent of the retail public utility's total charges for water and wastewater consumption, and then allocate the remaining charges among our tenants.			
★★★ IF UTILITY SERVICES ARE ALLOCATED, YOU MUST ALSO COMPLETE PAGE TWO OF THIS FORM ★★★			
Send BOTH this form 10363 and the TCEQ Core Data 10400 form by fax to: 512/239-6972		OR By mail to: TCEQ, Utilities & Districts Section, MG 153 PO Box 13087 Austin, TX 78711-3087	
If you need help completing this form, call the Utilities & Districts Section at 512-239-4691. Additional information about submetering and allocation billing is available at the following Website ¹ .			
If you need help completing the Core Data Form call our Central Registry Program at 512-239-5175 or visit the following Website ² .			

1. <http://www.tceq.texas.gov/utilities/submeter.html>
2. http://www.tceq.texas.gov/permitting/central_registry/

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METHOD USED TO ALLOCATE UTILITY CHARGES

Check the box or boxes that describe the allocation method used to bill tenant(s).

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 month for which bills are being rendered.

<input type="checkbox"/> Ratio occupancy method:	Number of Occupants	Number of Occupants for Billing Purposes
The number of occupants in the tenant's dwelling unit is adjusted as shown in the table to the right. This adjusted value is divided by the total of these values for all dwelling units occupied at the beginning of the retail public utility's billing period.	1	1.0
	2	1.6
	3	2.2
	>3	2.2 + 0.4 for each additional occupant.

<input type="checkbox"/> Estimated occupancy method:	Number of Bedrooms	Number of Occupants for Billing Purposes
The estimated occupancy for each unit is based on the number of bedrooms as shown in the table to the right. The estimated occupancy in the tenant's dwelling unit is divided by the total estimated occupancy in all dwelling units regardless of the actual number of occupants of occupied units.	0 (Efficiency)	1
	1	1.6
	2	2.8
	3	4.0
	>3	4.0 + 1.2 for each additional bedroom

<input checked="" type="checkbox"/> Occupancy and size of rental unit <input type="checkbox"/> 60 percent (in which no more than 50%) of the utility bill for water/wastewater consumption is allocated using the occupancy method checked above. 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.

<input type="checkbox"/> 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.

<input type="checkbox"/> Submetered cold water:
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.

<input type="checkbox"/> As outlined in the condominium contract. Describe:

<input type="checkbox"/> Size of manufactured home rental space:
The size of the area rented by the tenant divided by the total area of all the size of rental spaces.
<input type="checkbox"/> Size of the rented space in a multi-use facility:

The square footage of the space rented by the tenant divided by the total square footage of all rental spaces.
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TCEQ Form
 Report Form

TCEQ Use Only

TCEQ

TCEQ Core Data Form

For detailed instructions regarding completion of this form, please read the Core Data Form Instructions or call 512-239-6176.

SECTION I: General Information

1. Reason for Submission: If "Other" is selected, please describe in space provided.

New Permit (Regulated Utility Service) Core Data Form should be submitted with the program application.

Renewal (Core Data Form should be submitted with the renewal form) Other _____

2. Attachments: Describe Any Attachments (Ex: Title/V Application, Waste Transfer Application, etc.)

Yes No REGISTRATION OF ALLOCATED UTILITY SERVICE

3. Customer Reference Number (If issued)

Follow this field search for CN or RN numbers in Central Registry

RN N/A

SECTION II: Customer Information

5. Effective Date for Customer Information Updates (mm/dd/yyyy) N/A

6. Customer Role (Owner of Actual & Regulated Utilities) to the Regulated Entity listed on this form. Please check only one of the following:

Owner Operator Owner & Operator
 Occupational Licensee Responsible Party Voluntary Cleanup Applicant Other: _____

7. General Customer Information

New Customer Update to Customer Information Change In Regulated Entity Ownership
 Change In Legal Name (Verifiable with the Texas Secretary of State) No Change**

**If "No Change" and Section I is complete, skip to Section III - Regulated Entity Information.

8. Type of Customer	<input type="checkbox"/> Corporation	<input type="checkbox"/> Individual	<input type="checkbox"/> Sole Proprietorship-D.B.A
<input type="checkbox"/> City Government	<input type="checkbox"/> County Government	<input type="checkbox"/> Federal Government	<input type="checkbox"/> State Government
<input type="checkbox"/> Other Government	<input type="checkbox"/> General Partnership	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Other: _____

9. Customer Legal Name (For Individual, print last name, first, middle initial) Heather Village LP End Date _____

Heather Village LP

Attn: Rob Dryman, VP-Property Operations

10. Mailing Address: 10670 N. Central Expressway, #606

City	Dallas	State	TX	ZIP	75231	ZIP + 4	
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11. Country/Mailing Information (Outside USA) E-Mail Address (if applicable)

N/A rdryman@uhmgtx.com

12. Telephone Number Extension or Code FAX Number (If applicable)

(214) 266-7227 106 (214) 266-0722

13. Federal Tax ID / TX State Franchise Tax ID DUNS Number TX SOS Filing Number (Complete)

460678873 N/A

14. Number of Employees 0-20 21-100 101-250 251-500 501 and higher Yes No

SECTION III: Regulated Entity Information

15. General Regulated Entity Information (If New Regulated Entity is selected below this form should be accompanied by a permit application)

New Regulated Entity Update to Regulated Entity Name Update to Regulated Entity Information No Change** (See below)

"If "NO CHANGE" is checked and Section I is complete, skip to Section IV, Property Information.

16. Regulated Entity Name (Name of the site where the regulated entity is failing place)

Heather Village Apartments

24. Street Address City/Address (No P.O. Boxes)	Attn: Christine Moreno, Property Manager 6000 Boca Raton Blvd. City Ft. Worth State TX ZIP 76116 ZIP + 4				
25. Mailing Address	Attn: Christine Moreno, Property Manager 6000 Boca Raton Blvd. City Ft. Worth State TX ZIP 76116 ZIP + 4				
26. E-mail Address	healthervillage@uhmg1.com				
27. Telephone Number	(817) 446-4390		28. Extension or Code	29. Fax Number (if applicable) (817) 446-4319	
30. Primary SIC Code (4 digits)	31. Secondary SIC Code (4 digits)	32. Primary NAICS Code	33. Secondary NAICS Code (681410)		
N/A	N/A	N/A	N/A		
34. What is the primary business of this entity? (Please do not repeat the SIC or NAICS description.) Multi-Family Housing					

Questions 34 - 37 address geographic location. Please refer to the instructions for applicability.

35. Description of Physical Location	36. County	State	37. Nearest ZIP Code		
Ft. Worth	Tarrant	TX	76116		
38. Latitude (N) in Decimal Degrees	Minutes	Seconds	39. Longitude (W) in Decimal Degrees	Minutes	Seconds
N/A	N/A	N/A	N/A	N/A	N/A
39. TCEQ Programs and ID Numbers Check all Programs and write in the permit/registration numbers that will be affected by the updates submitted on this form or the updates may not be made. If your Program is not listed, check off and write it in. See the Core Data Form Instructions for additional guidance.					
<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Disposal	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Industrial Hazardous Waste	<input type="checkbox"/> Municipal Solid Waste	
<input type="checkbox"/> New Source Review - Air	<input type="checkbox"/> OSRF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS	<input type="checkbox"/> Sludge	
<input type="checkbox"/> Stormwater	<input type="checkbox"/> TSCA	<input type="checkbox"/> TSCA	<input type="checkbox"/> Used Oil	<input type="checkbox"/> Utilities	
<input type="checkbox"/> Voluntary Cleanup	<input type="checkbox"/> Waste Water	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other	

SECTION IV. Preparer Information

40. Name	41. Title	42. Organization
43. Telephone Number (No P.O. Boxes)	44. Fax Number	45. E-mail Address
(817) 446-4390	(817) 446-4319	healthervillage@uhmg1.com

SECTION V. Authorized Signature

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 9 and/or as required for the updates to the ID numbers identified in field 39.	
(See the Core Data Form Instructions for more information on who should sign this form.)	
Company	UHMG PROPERTY MANAGEMENT
Name (Print)	Christine Moreno
Signature	
Job Title	PROPERTY MANAGER
Phone	(817) 261-7232
Date	03/14/2019