

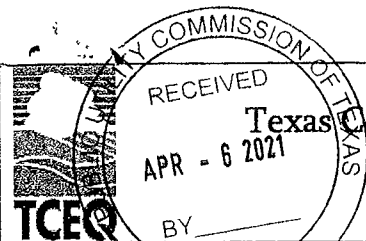


Control Number: 51721



Item Number: 443

Addendum StartPage: 0



# Texas Commission on Environmental Quality

Registration of Submetered  
or Allocated Utility Service

This Box for TCEQ Use Only

Registration No. S 6013

Date: 3-15-12 By: DCT

SAP 6013 CO

This Box for TCEQ Use Only

## CUSTOMER REFERENCE NUMBER

## REGULATED ENTITY REFERENCE NUMBER

CN(9 digits)

RN(9 digits)

☐ Send a completed Core Data Form (TCEQ-10400) with this registration.

### PROPERTY OWNER ("Customer" on TCEQ-10400)

Name Austin M3-03, LLC

☐ 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 Villas of Quail Creek Apartments

☒ Apartment Complex ☐ Condominium ☐ Manufactured Home Rental Community ☐ Multiple-Use Facility

☐ If applicable, describe the "multiple-use facility" here:

### INFORMATION ON UTILITY SERVICE

Tenants are billed for ☒ Water ☒ Wastewater ☐ Both these bills are ☐ Submetered ☒ Allocated \*\*

Name of utility providing water/wastewater City of Austin

Date submetered or allocated billing begins (or began) 4-1-2012 ☐ Required

### METHOD USED TO OFFSET CHARGES FOR COMMON AREAS ☐ Check one line only.

☐ Not applicable, because

☐ Bills are based on the tenant's actual submetered consumption

☐ There are neither common areas nor an installed irrigation system OR

☐ 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.

☒ This property has an installed irrigation system that is not separately metered or submetered.

We deduct 25 percent (which is equal to or greater than 25 percent) of the utility's total charges for water and wastewater consumption, then allocate the remaining charges among our tenants.

☐ 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.

☐ 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, 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 and the TCEQ Core Data Form by fax to: 512/239-6972 OR by mail to: TCEQ, Utilities & Districts Section, MC-153 PO Box 13087 Austin, TX 78711-3087

☐ If you need help completing this form, call TCEQ's Utilities & Districts Section at 512/239-4691. Additional information about submetered and allocated billing is available at the following site:

[http://www.tceq.texas.gov/permitting/water\\_supply/ud/submeter.html](http://www.tceq.texas.gov/permitting/water_supply/ud/submeter.html)

☐ If you need help completing the TCEQ's Core Data Form, call our Central Registry Program at 512/239-5175. You can also find instructions for completing this form at the following site:

[http://www.tceq.texas.gov/permitting/central\\_registry/](http://www.tceq.texas.gov/permitting/central_registry/)

## METHOD USED TO ALLOCATE UTILITY CHARGES

☒ Check the box or boxes that describe the allocation method used to bill tenants.

<input type="checkbox"/>	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.
--------------------------	---

	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 checked="" 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 or occupied units.		0 (Efficiency)	1
		1	1.6
		2	2.8
		3	4.0
		>3	4.0 + 1.2 for each additional bedroom

	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 above. The remainder is allocated according to either:		
<ul style="list-style-type: none"> <li>• the size of the tenant's dwelling unit divided by the total size of all dwelling units, OR</li> <li>• the size of the space rented by the tenant of a manufactured home divided by the size of all rental spaces.</li> </ul>		

<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 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. <input checked="" type="checkbox"/> 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 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.
--------------------------	--



RECEIVED

## TCEQ Core Data Form

TCEQ Use Only

For detailed instructions regarding completion of this form, please read the Core Data Form Instructions or call 512-239-5175.

## SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided)		
<input checked="" type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application)		
<input type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)	<input type="checkbox"/> Other	
2. Attachments Describe Any Attachments: (ex. Title V Application, Waste Transporter Application, etc.)		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Registration of Submetered or Allocated Utility Service		
3. Customer Reference Number (if issued)	Follow this link to search for CN or RN numbers in Central Registry**	4. Regulated Entity Reference Number (if issued)
CN		RN

## SECTION II: Customer Information

5. Effective Date for Customer Information Updates (mm/dd/yyyy)		5/1/2011	
6. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check only one of the following:			
<input type="checkbox"/> Owner	<input type="checkbox"/> Operator	<input checked="" type="checkbox"/> Owner & Operator	
<input type="checkbox"/> Occupational Licensee	<input type="checkbox"/> Responsible Party	<input type="checkbox"/> Voluntary Cleanup Applicant	<input type="checkbox"/> Other: _____
7. General Customer Information			
<input checked="" type="checkbox"/> New Customer <input type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership			
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State) <input type="checkbox"/> No Change**			
**If "No Change" and Section I is complete, skip to Section III – Regulated Entity Information.			
8. Type of Customer:			
<input checked="" 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 (If an individual, print last name first: ex: Doe, John) If new Customer, enter previous Customer below End Date:			
Austin M3-03, LLC ✓ DET 3/15/12			
10. Mailing Address: Villas of Quail Creek Apartments			
9036 N Lamar Blvd.			
City	Austin	State	TX
ZIP	78753	ZIP + 4	
11. Country Mailing Information (if outside USA)		12. E-Mail Address (if applicable) Villas@m3multitasking.com	
13. Telephone Number (512) 837- 8905		14. Extension or Code	
15. Fax Number (if applicable) (512) 837- 8897		8997	
16. Federal Tax ID (9 digits) 45-1608367	17. TX State Franchise Tax ID (11 digits) 32044049735	18. DUNS Number (if applicable)	19. TX SOS Filing Number (if applicable) 201109510204
20. Number of Employees <input type="checkbox"/> 0-20 <input checked="" type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher		21. Independently Owned and Operated? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

## SECTION III: Regulated Entity Information

22. General Regulated Entity Information (If "New Regulated Entity" is selected below this form should be accompanied by a permit application)			
<input checked="" type="checkbox"/> New Regulated Entity	<input type="checkbox"/> Update to Regulated Entity Name	<input type="checkbox"/> Update to Regulated Entity Information	<input type="checkbox"/> No Change** (See below)
**If "NO CHANGE" is checked and Section I is complete, skip to Section IV, Preparer Information.			
23. Regulated Entity Name (name of the site where the regulated action is taking place)			
Austin M3-03, LLC			

24. Street Address of the Regulated Entity: (No P.O. Boxes)	9036 N. Lamar Blvd.						
	City	Austin	State	TX	ZIP	78753	ZIP + 4
25. Mailing Address:	Same as above						
	City		State		ZIP		ZIP + 4
26. E-Mail Address:	jmosby@m3multifamily.com						
27. Telephone Number	28. Extension or Code		29. Fax Number (if applicable)				
(512)837- 8905			(512)837- 8897				
30. Primary SIC Code (4 digits)	31. Secondary SIC Code (4 digits)		32. Primary NAICS Code (5 or 6 digits)		33. Secondary NAICS Code (5 or 6 digits)		
34. What is the Primary Business of this entity? (Please do not repeat the SIC or NAICS description.)							
Apartment Complex							

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

35. Description to Physical Location:	Take TX-71 E, merge onto US-183 N for 9 mi. Take exit towards 1-35/Lamar Blvd. Stay straight, merge onto Anderson Ln. E for 1.5 mi. Slight right onto N. Lamar Blvd for 12 mi.				
36. Nearest City	County	State	Nearest ZIP Code		
Austin	Travis	TX	78753		
37. Latitude (N) In Decimal:	30.361896		38. Longitude (W) In Decimal:	97.699657	
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
30	21	42	97	41	58

39. TCEQ Programs and ID Numbers Check all Programs and write in the permits/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 other and write it in See the Core Data Form instructions for additional guidance.

<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<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"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS	<input type="checkbox"/> Sludge
<input type="checkbox"/> Stormwater	<input type="checkbox"/> Title V – Air	<input type="checkbox"/> Tires	<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:	Michael Bracy	41. Title:	Analyst
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(805)962- 1155		(805)962- 2919	mbracy@m3multifamily.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:	Austin M3-03, LLC	Job Title:	Analyst
Name (In Print):	Michael Bracy	Phone:	(805)962- 1155
Signature:		Date:	2/29/2012