



Filing Receipt

Received - 2021-09-21 05:55:30 PM

Control Number - 52324

ItemNumber - 7

MANVEL TERRACE UTILITIES, INC
PO BOX 690521
HOUSTON, TX 77269
832-534-8545

September 16th, 2021

DOCKET 52324

Application Content

1. The wrong corporation number was listed and has been corrected see Exhibit A
2. An amendment application was originally mailed to the SOS in may but was never received. We have since then filed an expedited application and have confirmation that Harrison Williams is now listed as the President of the Corporation. See exhibit B
3. See attached Exhibit C from Jacolyn Saldana with TCEQ regarding the past due RAF and clearance for all missing years.
4. Annual Reports for both companies have been filed. Exhibit D and Exhibit E
5. The only organization that is affiliated with Manvel Terrace Utilities is the Operation and Maintenance Company which is Flow-Tech Utility which IS owned by Harrison Williams. There are 2 other Utility companies owned by Harrison Williams SP Utility and South Coast Utilities but are not affiliated with Manvel Terrace utilities and have separate financial records.
6. Manvel Terrace utilities will resolve all open violations and have listed each open violation below.
 - A) Will prepare a Drought Contingency plan to satisfy Violation
 - B) Will have engineer apply with TCEQ to replace ground Storage tank with larger tank.
 - C) Will contract out meter company to calibrate flow meters.
 - D) Will have engineer submit completion data to TCEQ for the approval to use the well.
 - E) Will have engineer develop as built plans for water plant site
 - F) With installation of Larger Gst will resolve 85% capacity rule.

I have also attached the updated maps on Exhibit A at the end for the General location map and a revised detail map

Harrison Williams
Harrison Williams



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

- I. **COMPLETE:** In order for the Commission to find the application sufficient for filing, the Applicant should:
 - i. Provide an answer to every question and submit any required attachment applicable to the STM request (i.e., agreements or contracts).
 - ii. Use attachments or additional pages to answer questions as necessary. If you use attachments or additional pages, reference their inclusion in the form.
 - iii. 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.
 - i. **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 been filed:
 - i. **DEFICIENT (Administratively Incomplete):** 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.*
 - ii. **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.

FAQ:
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

Transferor: Southwest Environmental Resources
(selling entity)

CCN No.s: 11648

- Sale
 Transfer
 Merger
 Consolidation
 Lease/Rental

Transferee: MANVEL TERRACE UTILITIES
(acquiring entity)

CCN No.s: 12080

- Water
 Sewer
 All CCN
 Portion CCN
 Facilities transfer

County(ies): Fort Bend

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Please mark the items included in this filing

- | | |
|--|-----------------------------------|
| <input checked="" type="checkbox"/> Contract, Lease, Purchase, or Sale Agreement | Part A: Question 1 |
| <input checked="" type="checkbox"/> Tariff including Rate Schedule | Part B: Question 4 |
| <input checked="" type="checkbox"/> List of Customer Deposits | Part B: Question 5 |
| <input type="checkbox"/> Partnership Agreement | Part C: Question 7 |
| <input type="checkbox"/> Articles of Incorporation and By-Laws (WSC) | Part C: Question 7 |
| <input type="checkbox"/> Certificate of Account Status | Part C: Question 7 |
| <input type="checkbox"/> Financial Audit | Part C: Question 10 |
| <input checked="" type="checkbox"/> Application Attachment A & B | Part C: Question 10 |
| <input type="checkbox"/> Disclosure of Affiliated Interests | Part C: Question 10 |
| <input type="checkbox"/> Capital Improvement Plan | Part C: Question 10 |
| <input type="checkbox"/> List of Assets to be Transferred | Part D: 11.B |
| <input type="checkbox"/> Developer Contribution Contracts or Agreements | Part D: 11.D |
| <input checked="" type="checkbox"/> Enforcement Action Correspondence | Part E: Question 18 (Part D: Q12) |
| <input checked="" type="checkbox"/> TCEQ Compliance Correspondence | Part F: Question 22 |
| <input type="checkbox"/> TCEQ Engineering Approvals | Part F: Question 24 |
| <input type="checkbox"/> Purchased Water Supply or Treatment Agreement | Part F: Question 26 |
| <input checked="" type="checkbox"/> Detailed (large scale) Map | Part G: Question 29 |
| <input checked="" type="checkbox"/> General Location (small scale) Map | Part G: Question 29 |
| <input type="checkbox"/> Digital Mapping Data | Part G: Question 29 |
| <input checked="" type="checkbox"/> Signed & Notarized Oath | 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:

Southwest Environmental Resources CCN 11648, transferor, does sell in its entirety to Manvale Terrace Utilities CCN 12080, transferee, all land, equipment and assets of Southwest Environmental Resources.

2. The proposed transaction will require (check all applicable):

For **Transferee** (Purchaser) CCN:

For **Transferor** (Seller) CCN:

- Obtaining a NEW CCN for Purchaser
- Transfer all CCN into Purchaser's CCN (Merger)
- Transfer Portion of CCN into Purchaser's CCN
- Transfer all CCN to Purchaser and retain Seller CCN
- Uncertificated area added to Purchaser's CCN

- Cancellation of Seller's CCN
- Transfer of a Portion of Seller's CCN to Purchaser
- Only Transfer of Facilities, No CCN or Customers
- Only Transfer of Customers, No CCN or Facilities
- 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: Southwest Environmental Resources
(individual, corporation, or other legal entity)
 Individual Corporation WSC Other: _____

B. Mailing Address: PO BOX 727 Rosenberg, TX 77471-727

Phone: (832) 496-5512 Email: JEFF_MAHAN@Sbcglobal.net

- C. **Contact Person.** 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: Jeffrey Mahan Title: Owner

Mailing Address: PO BOX 727 Rosenberg, TX 77471-727

Phone: (832) 496-5512 Email: JEFF_MAHAN@Sbcglobal.net

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: April 6, 2006

- 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: TCEQ 34963-S

If the transferor is a Water Supply or Sewer Service Corporation, provide a copy of the current tariff.

County

Affected County (a county to which Subchapter B, Chapter 232, Local Government Code, applies)

Other (please explain): _____

8. If the transferee operates under any d/b/a, provide the name below:

Name: N/A

9. If the transferee's legal status is anything other than an individual, provide the following information regarding the officers, members, or partners of the legal entity applying for the transfer:

Name: Harrison Williams

Position: President

Ownership % (if applicable): 100.00%

Address: _____

Phone: _____

Email: _____

Name: _____

Position: _____

Ownership % (if applicable): 0.00%

Address: _____

Phone: _____

Email: _____

Name: _____

Position: _____

Ownership % (if applicable): 0.00%

Address: _____

Phone: _____

Email: _____

Name: _____

Position: _____

Ownership % (if applicable): 0.00%

Address: _____

Phone: _____

Email: _____

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.

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

1. Completed Appendix B;
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. A. Proposed Purchase Price: \$ _____

If the transferee Applicant is an investor owned utility (IOU) provide answers to B through D.

B. Transferee has a copy of an inventory list of assets to be transferred (*attach*):

No Yes N/A

Filed confidentially

Total Original Cost of Plant in Service: \$ _____

Accumulated Depreciation: \$ _____

Net Book Value: \$ _____

C. **Customer contributions in aid of construction (CIAC):** Have the customers been billed for any surcharges approved by the Commission or TCEQ to fund any assets currently used and useful in providing utility service? Identify which assets were funded, or are being funded, by surcharges on the list of assets.

No Yes

Total Customer CIAC: \$ _____

Accumulated Amortization: \$ _____

D. **Developer CIAC:** Did the transferor receive any developer contributions to pay for the assets proposed to be transferred in this application? If so, identify which assets were funded by developer contributions on the list of assets and provide any applicable developer agreements.

No Yes

Total developer CIAC: \$ _____

Accumulated Amortization: \$ _____

12. A. Are any improvements or construction required to meet the minimum requirements of the TCEQ or Commission and to ensure continuous and adequate service to the requested area to be transferred plus any area currently certificated to the transferee Applicant? Attach supporting documentation and any necessary TCEQ approvals, if applicable.

No Yes

B. If yes, describe the source and availability of funds and provide an estimated timeline for the construction of any planned or required improvements:

N/A

13. Provide any other information concerning the nature of the transaction you believe should be given consideration:

None

14. 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:	\$ _____	
Accumulated Depreciation of Plant:	\$ _____	Filed confidentially
Cash:	\$ _____	
Notes Payable:	\$ _____	
Mortgage Payable:	\$ _____	
(Proposed) Acquisition Adjustment*:	\$ _____	
Other (NARUC account name & No.):	_____	
Other (NARUC account name & No.):	_____	

* Acquisition Adjustments will be subject to review under 16 TAC § 24.41(d) and (e)

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 proposed billing changes

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:

Undertermined at this time. A rate study will be conducted after the tranfer has been approved by the PUC and the trasnfer has been finanlized.

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:

The quality of service is expected to improve as a result of the water utility being under the ownership and operation of a full-time professional with 20 years of experience of owning and operating Investor Owned Public Water and Wastewater Utilities.

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.

Harrison Williams has over 20 years experience ng and operating Investor Owned Public Water and Wastewater Utilities. SP Utilities has 2 CCN 12978 & 20817. SP Utily has no outstanding compliance violation. The last compliance violation was in 2010 and was corrected. DOCKET NO.:2010-0301-PWS-ETCEQ ID:RN103779039CASE NO.:3920

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:

The environmental integrity will not be impacted or disrupted becasue these is no new construction or any changes that will impact the land.

20. How will the proposed transaction serve the public interest?

The public interest will be served by the delivery of imporved service with professional management of the water utilities.

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:

10713 City of Rosenberg

Part F: TCEQ Public Water System or Sewer (Wastewater) Information

Complete Part F for EACH Public Water or Sewer system to be transferred subject to approval of the transaction. Attach a separate sheet with this information if you need more space for additional systems being transferred.

22. A. For Public Water System (PWS):

TCEQ PWS Identification Number: 0790144 (7 digit ID)

Name of PWS: Millbrook Water and Sanitary System

Date of last TCEQ compliance inspection: January 22, 2020 (attach TCEQ letter)

Subdivisions served: Horseshoe Bend Village

B. For Sewer service:

TCEQ Water Quality (WQ) Discharge Permit Number: WQ - (8 digit ID)

Name of Wastewater Facility: _____

Name of Permittee: _____

Date of last TCEQ compliance inspection: _____ (attach TCEQ letter)

Subdivisions served: _____

Date of application to transfer permit *submitted* to TCEQ: _____

23. List the number of *existing* connections, by meter/connection type, to be affected by the proposed transaction:

Water				Sewer	
	Non-metered		2"		Residential
167	5/8" or 3/4"		3"		Commercial
	1"		4"		Industrial
	1 1/2"		Other		Other
Total Water Connections:				Total Sewer Connections:	

24. A. Are any improvements required to meet TCEQ or Commission standards?

No Yes

B. Provide details on each required major capital improvement necessary to correct deficiencies to meet the TCEQ or Commission standards (attach any engineering reports or TCEQ approval letters):

Description of the Capital Improvement:	Estimated Completion Date:	Estimated Cost:

C. Is there a moratorium on new connections?

No Yes:

25. Does the system being transferred operate within the corporate boundaries of a municipality?

No Yes: _____ (name of municipality)

If yes, indicate the number of customers within the municipal boundary.

Water: _____ Sewer: _____

26. A. Does the system being transferred purchase water or sewer treatment capacity from another source?

No Yes: If yes, attach a copy of purchase agreement or contract.

Capacity is purchased from: _____

Water: _____

Sewer: _____

B. Is the PWS required to purchase water to meet capacity requirements or drinking water standards?

No Yes

C. What is the amount of water supply or sewer treatment purchased, per the agreement or contract? What is the percent of overall demand supplied by purchased water or sewer treatment (if any)?

	Amount in Gallons	Percent of demand
Water:		0.00%
Sewer:		0.00%

D. Will the purchase agreement or contract be transferred to the Transferee?

No Yes:

27. Does the PWS or sewer treatment plant have adequate capacity to meet the current and projected demands in the requested area?

No Yes:

28. List the name, class, and TCEQ license number of the operator that will be responsible for the operations of the water or sewer utility service:

Name (as it appears on license)	Class	License No.	Water or Sewer
Harrison Williams	B	WG0014737 & VVW00472074	Water & Wastewater
Frank Ontiveros	C	WG0017682 & VVW0054976	Water & Wastewater
Abril Reyna	C	WG0012670 & VVW0039104	Water & Wastewater

Part G: Mapping & Affidavits

ALL applications require mapping information to be filed in conjunction with the STM application.
Read question 29 A and B to determine what information is required for your application.

29. A. For applications requesting to transfer an entire CCN, without a CCN boundary adjustment, 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 in reference to the nearest county boundary, city, or town. The following guidance should be adhered to:
 - i. If the application requests to transfer certificated service areas for both water and sewer, separate maps must be provided for each.
 - ii. A hand drawn map, graphic, or diagram of the requested area is not considered an acceptable mapping document.

- 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: 83.90

Number of customer connections in the requested area: 167

Affected subdivision :

The closest city or town: Rosenburg

Approximate mileage to closest city or town center: 3

Direction to closest city or town: North

The requested area is generally bounded on the North by: Geronino Lane

on the East by: Highway 36

on the South by: Arapahoe Drive

on the West by: Apache Lane

31. A copy of the proposed map will be available at: 12111 Spring Cypress Tomball, TX 77377

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 Transferee (Acquiring Entity)

STATE OF TEXAS

COUNTY OF Harris

I, HARRISON WILLIAMS being duly sworn, file this application for sale, transfer, merger, consolidation, acquisition, lease, or rental, as PRESIDENT

(owner, member of partnership, title as officer of corporation, or authorized representative)

I attest that, in such capacity, I am qualified and authorized to file and verify such application, am personally familiar with the documents filed with this application, and have complied with all the requirements contained in the application; and, that all such statements made and matters set forth therein with respect to Applicant are true and correct. Statements about other parties are made on information and belief. I further state that the application is made in good faith and that this application does not duplicate any filing presently before the Commission.

I further state that I have been provided with a copy of the 16 TAC § 24.239 Commission rules. I am also authorized to agree and do agree to be bound by and comply with any outstanding enforcement orders of the Texas Commission on Environmental Quality, the Public Utility Commission of Texas or the Attorney General which have been issued to the system or facilities being acquired and recognize that I will be subject to administrative penalties or other enforcement actions if I do not comply.

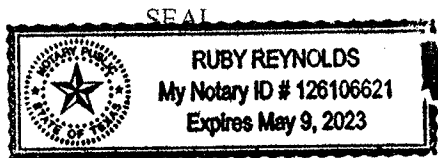
[Handwritten signature]

AFFIANT

(Utility's Authorized Representative)

If the Affiant to this form is any person other than the sole owner, partner, officer of the Applicant, or its attorney, a properly verified Power of Attorney must be enclosed.

SUBSCRIBED AND SWORN BEFORE ME, a Notary Public in and for the State of Texas this day the 15th of July, 2021



[Handwritten signature of Ruby Reynolds]

NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS

Ruby Reynolds PRINT OR TYPE NAME OF NOTARY

My commission expires: May 9, 2023

Oath for Transferor (Transferring Entity)

STATE OF TEXAS

COUNTY OF Harris

I, JEFFREY MAHAN

being duly sworn, file this application for sale, transfer,

merger, consolidation, acquisition, lease, or rental, as

OWNER

(owner, member of partnership, title as officer of corporation, or authorized representative)

I attest that, in such capacity, I am qualified and authorized to file and verify such application, am personally familiar with the documents filed with this application, and have complied with all the requirements contained in the application; and, that all such statements made and matters set forth therein with respect to Applicant are true and correct. Statements about other parties are made on information and belief. I further state that the application is made in good faith and that this application does not duplicate any filing presently before the Commission.

I further state that I have been provided with a copy of the 16 TAC § 24.239 Commission rules. I am also authorized to agree and do agree to be bound by and comply with any outstanding enforcement orders of the Texas Commission on Environmental Quality, the Public Utility Commission of Texas or the Attorney General which have been issued to the system or facilities being acquired and recognize that I will be subject to administrative penalties or other enforcement actions if I do not comply.

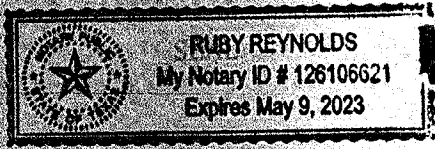
Jeffrey Mahan

AFFIANT

(Utility's Authorized Representative)

If the Affiant to this form is any person other than the sole owner, partner, officer of the Applicant, or its attorney, a properly verified Power of Attorney must be enclosed.

SUBSCRIBED AND SWORN BEFORE ME, a Notary Public in and for the State of Texas this day the 15th of July, 2021



Ruby Reynolds

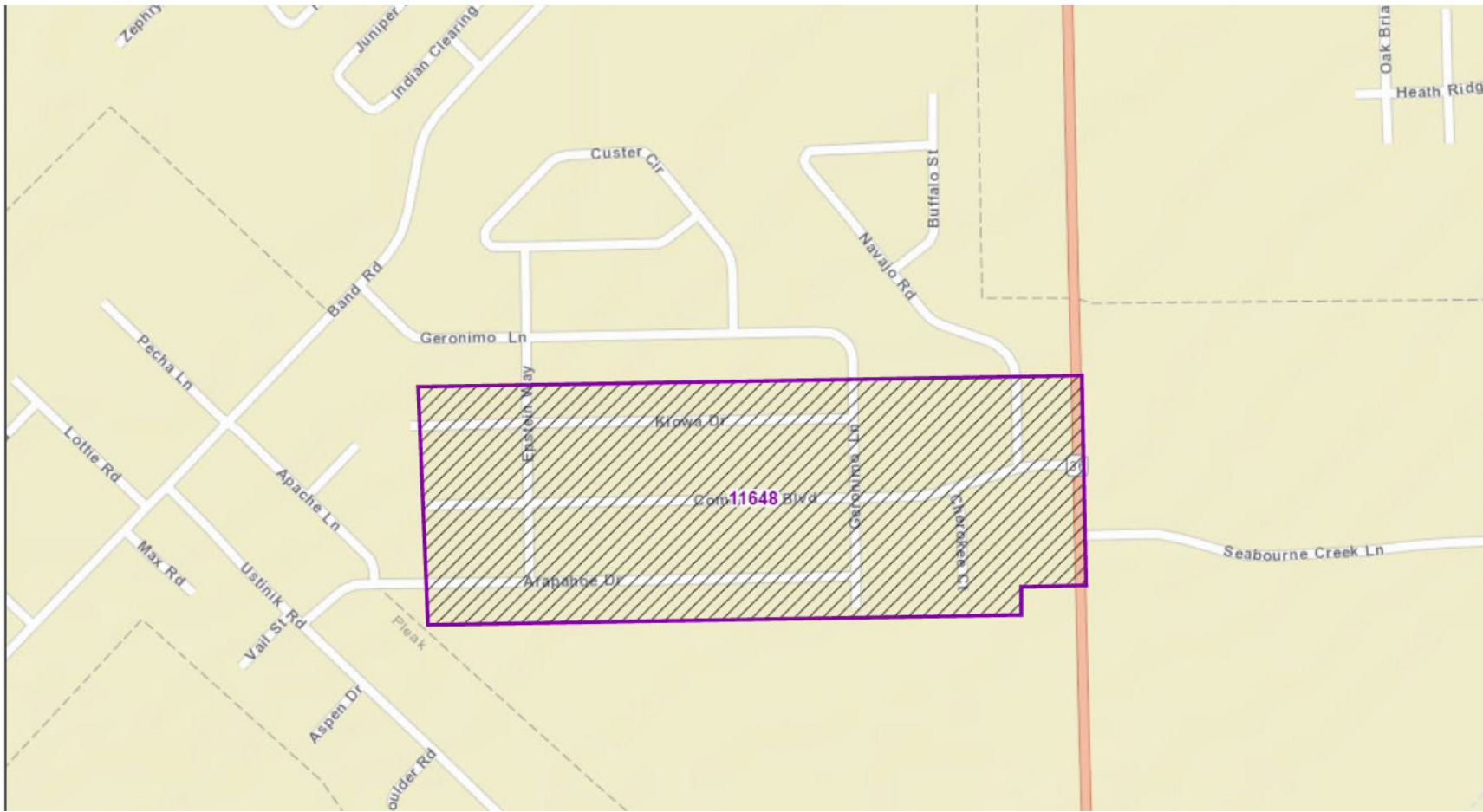
NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS

Ruby Reynolds

PRINT OR TYPE NAME OF NOTARY

My commission expires: May 9, 2023

**ALL FINANCIAL
DOCUMENTS
HAVE BEEN FILED
CONFIDENTIALLY**

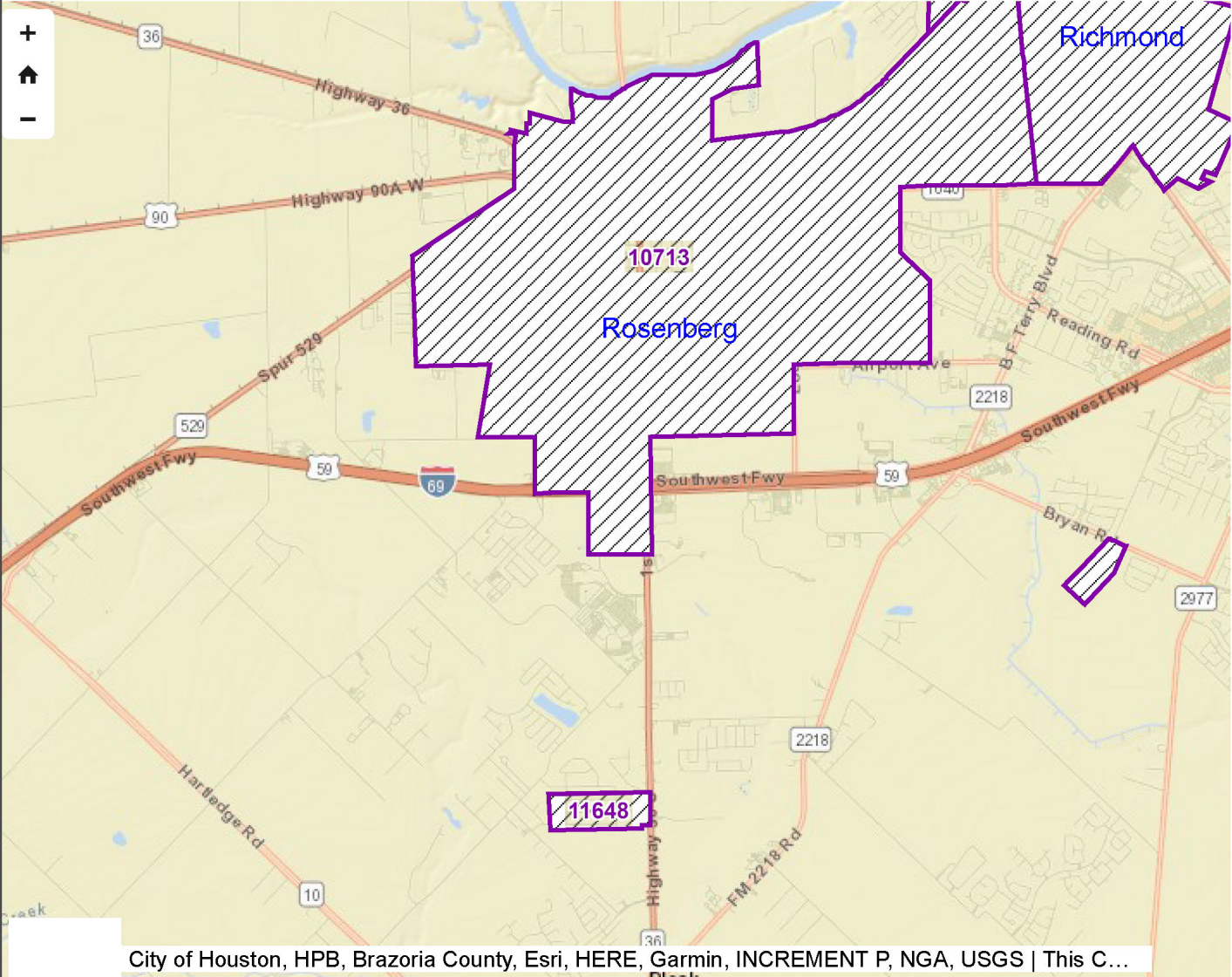




Public Utility Commission

Water and Sewer CCN Viewer

- Legend
- Layers
- Basemap gallery
- Measure
- Details
- Share
- Print



City of Houston, HPB, Brazoria County, Esri, HERE, Garmin, INCREMENT P, NGA, USGS | This C...



Office of the Secretary of State
Packing Slip

August 25, 2021
Page 1 of 1

Manvel Terrace Utilities, Inc
25298 FM 2978 Suite B
Tomball, TX 77375

Batch Number: **107407396**

Batch Date: **08-19-2021**

Client ID: **833565585**

Return Method: **Fax and Mail 0**

Document Number	Document Detail	Number / Name	Page Count	Fee
1074073960002	Expedited	MANVEL TERRACE UTILITIES, INC.	0	\$25.00
1074073960002	Certificate of Amendment	MANVEL TERRACE UTILITIES, INC.	0	\$150.00
			Total Fees:	\$175.00

Payment Type	Payment Status	Payment Reference	Amount	
Credit Card	Received	*****8139	\$175.00	
			Total:	\$175.00

Total Amount Charged to Client Account: \$0.00
(Applies to documents or orders where Client Account is the payment method)

Note to Customers Paying by Client Account: This is not a bill. Payments to your client account should be based on the monthly statement and not this packing slip. Amounts credited to your client account may be refunded upon request. Refunds (if applicable) will be processed within 10 business days.

There is a 2.7% convenience fee on credit card payments. This additional amount will be computed and shown on your credit card statement when the credit card transaction is settled.

User ID: MKERR



Office of the Secretary of State

August 25, 2021

Manvel Terrace Utilities, Inc
25298 FM 2978 Suite B
Tomball, TX 77375 USA

RE: MANVEL TERRACE UTILITIES, INC.
File Number: 78001700

It has been our pleasure to file the Certificate of Amendment for the referenced entity. Enclosed is the certificate evidencing filing. Payment of the filing fee is acknowledged by this letter.

If we may be of further service at any time, please let us know.

Sincerely,

Corporations Section
Business & Public Filings Division
(512) 463-5555

Enclosure



Office of the Secretary of State

CERTIFICATE OF FILING OF

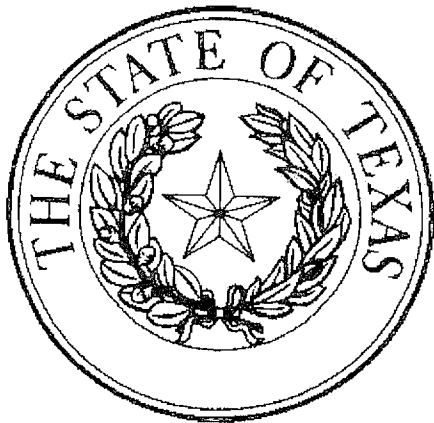
MANVEL TERRACE UTILITIES, INC.
78001700

The undersigned, as Deputy Secretary of State of Texas, hereby certifies that a Certificate of Amendment for the above named entity has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Deputy Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

Dated: 08/19/2021

Effective: 08/19/2021



A handwritten signature in black ink, appearing to read "Jose A. Esparza".

Jose A. Esparza
Deputy Secretary of State

harrison.ftu@gmail.com

Subject: RE: Manvel Road Terrace Subdivision & Southwest Environmental Resources - RAF

From: Jacolyn Saldana <jacolyn.saldana@tceq.texas.gov>
Sent: Friday, September 3, 2021 5:08 PM
To: harrison.ftu@gmail.com
Cc: Wufees <Wufees@tceq.texas.gov>; Theresa Cisneros <theresa.cisneros@tceq.texas.gov>
Subject: RE: Manvel Road Terrace Subdivision & Southwest Environmental Resources - RAF

Good Afternoon,

Regarding Southwest Environmental Resources, we received the RAF report from Cecilia Buchanan for the missing CY 2015 RAF on 08/18/2021 and were able to find the payment made in 2017 by searching our financial records. For the missing CY 2005, 2007 & 2008 RAF years, we discussed with our management and agreed that we could apply a resolving zero pay code in our database since they are well outside of the four years that we are able to enforce upon.

For the missing CY 2008 RAF for Manvel Road Terrace Subdivision, we also discussed with our management and agreed that we could apply the resolving zero pay code in our database since is also well outside of the four years that we are able to enforce upon.

The RAF for both utilities has been resolved in our database. Please let me know if you have any questions or need anything else.

Thank you,

Jaci Saldaña (she/her)

Team Lead, Drinking Water Inventory and Protection Team
Water Supply Division
Texas Commission on Environmental Quality (TCEQ)
Phone: (512) 239-4445
Email: Jacolyn.Saldana@tceq.texas.gov



WATER AND SEWER INVESTOR-OWNED UTILITIES

CLASS D ANNUAL FINANCIAL REPORT

OF

MANVEL TERRACE UTILITIES

TO THE

PUBLIC UTILITY COMMISSION OF TEXAS

FOR THE

12 Months Ending December 31, 2020

Check one:

This is an original submission

This is a revised submission

Date of submission: 9/1/2021

PUBLIC UTILITY COMMISSION OF TEXAS
1701 N. CONGRESS AVE., PO BOX 13326, AUSTIN, TX 78711-3326

Annual Report for Class D Water and Sewer Utilities

Under the provisions of TWC § 13.136 and 16 Texas Administrative Code §§ 24.127 and 24.129

UTILITY INFORMATION

(Attach additional pages as necessary)

A. Utility Name: MANVEL TERRACE

List all assumed names or dba names:

B. Street Address, City or Town & Zip code:

3302A NOTTINGHAM STREET
PEARLAND, TX 77581

County: BRAZORIA

CCN #s: 12080

C. List All PWS System names and numbers:

(attach a separate list if necessary)

MANVEL TERRACE SUBDIVISION
PWS#0790144

D. List All WQ Permitted system names and numbers:

(attach a separate list if necessary)

N/A

E. Type of Ownership:

Corporation:

Partnership:

Individual:

Other:

F. Name of entity and type of form filed for federal tax purposes (1120, 1065, etc).

G. If a corporation, list names of the officers. If an individual or partnership, list the name of the individual or each partner.

Jeffrey Mahan

H. If the controlling ownership of this utility changed during the last twelve (12) months, state the date of ownership change and the name and address of the prior owner.

I. Date the utility was formed or incorporated: 1985

J. Is the utility commonly owned or controlled by another corporation? no
If yes, by whom?

K. List all entities under common control or ownership with this utility by entity name, CCN number, Public Water System (PWS) numbers and names of water systems owned, Water Quality (WQ) Discharge Permit numbers and names of wastewater systems owned and contact information.

L. If the utility owner has multiple CCNs, please list all CCN numbers owned:

PERSON TO CONTACT REGARDING THE INFORMATION SUPPLIED ON THESE FORMS

A. Name and Title:

JENNIFER JAMISON
PRESIDENT

B. Street Address, city, zip code

3302A NOTTINGHAM STREET
PEARLAND, TX 77581

C. Telephone Number with Area Code:

281-485-0550

Cell Phone Number with Area Code:

Fax Number with Area Code:

Email address:

D. If not an officer, owner or employee, give name of firm employed by:

SUMMARY OF REVENUES AND EXPENSES

(Except for blue cells, the values in this table will populate)

Line	Reference	(a) Total Company	(b) Water Operations	(c) Sewer Operations
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

Note 1: This amount will be carried automatically from Schedule II, line 45.

GENERAL & ADMINISTRATIVE and OPERATIONS AND MAINTENANCE EXPENSE

(Except for blue cells, the values in this table will populate)

<u>Line</u>	(a) Total Company (b)+(c)	(b) Water Operations	(c) Sewer Operations
21 Office Salaries	\$0	\$0	\$0
22 Office Rent	0	\$0	\$0
23 Office Supplies	565	\$565	\$0
24 Contract Accounting	755	\$755	\$0
25 Insurance	1,500	\$1,500	\$0
26 Legal	0	\$0	\$0
27 Management Salaries	6,000	\$6,000	\$0
28 Miscellaneous	0	\$0	\$0
29 Other-add description	0	\$0	\$0
30 TOTAL GENERAL AND ADMINISTRATIVE EXPENSE	8,820	8,820	0
31			
32			
33 Operations and Maintenance Salaries	\$0	\$0	\$0
34 Employee Benefits	0	\$0	\$0
35 Operations and Maintenance Contract Labor	9,873	\$9,873	\$0
36 Supplies	0	\$0	\$0
37 Purchased Power	1,762	\$1,762	\$0
38 Testing	0	\$0	\$0
39 Chemicals	0	\$0	\$0
40 Miscellaneous Operations and Maintenance	0	\$0	\$0
41 TOTAL OPERATIONS AND MAINTENANCE EXPENSES	11,635	11,635	0
42			
43 TOTAL GEN & ADM and OP & MAINTENANCE EXPENSES	\$20,455	\$20,455	\$0

MANVEL TERRACE UTILITIES
12 Months Ending December 31, 2020

Schedule III
09/01/21

INVESTED CAPITAL AT END OF REPORTING PERIOD

(Except for blue cells, the values in this table will populate)

Line	Reference	(a) Total Company (b)+(c)	(b) Water Operations	(c) Sewer Operations
44	Utility Plant In Service	\$461,705	\$461,705	\$0
45	Accumulated Depreciation (Note 1)	(255,105)	(255,105)	0
46				
47	Net Plant In Service (Lines 44 through 45)	206,600	206,600	0
48	Working Cash Allowance	52,142	52,142	0
49	Materials and Supplies Inventory	0	0	0
50	Prepayments	0	0	0
51	Customer Deposits (Note 1)	0	0	0
52	Customer Contributions in Aid of Construction (Note 1)	0	0	0
53	Other (attach schedule or itemize)	0	0	0
54	Other (attach schedule or itemize)	0	0	0
55				
56	TOTAL INVESTED CAPITAL (Lines 47 through 54)	\$258,742	\$258,742	\$0
57	Return (Schedule I, Line 18)	\$14,258	\$14,258	\$0
58	Rate of Return (Line 57 / Line 56)	5.51%	5.51%	0.00%

Note 1: These items are typically deductions from invested capital and thus should normally be entered as negative amounts.

EXTRAORDINARY AND NONRECURRING ITEMS

(Except for blue cells, the values in this table will populate)

Ref. Schedule	Column	Line Number	Description	Total Water	Total Sewer
		1			
		2		\$0	\$0
		3		0	0
		4		0	0
		5		0	0
		6		0	0
		7		0	0
		8		0	0
		9	OTHER INFORMATION	0	0
		10		0	0
		11	Number of Active Connections at End of Reporting Period	0	0
		12	5/8" Meters	155	0
		13	3/4" Meters	0	0
		14	1" Meters	0	0
		15	1 1/2" Meters	0	0
		16	2" Meters	0	0
		17	List all Additional Meter Sizes:	0	0
		18		0	0
		19		0	0
		20		0	0
		21	Number of Inactive Connections	0	0
		22	5/8" Meters	12	0
		23	3/4" Meters	0	0
		24	1" Meters	0	0
		25	1 1/2" meters	0	0
		26	2" Meters	0	0
		27	List all Additional Meter Sizes:	0	0
		28		0	0
		29		0	0
		30		0	0
		31	Total Gallons Pumped	5,862,000	---
		32	Total Gallons Purchased	0	---
		33	Total Water Produced	<u>5,862,000</u>	---
		34	Total Gallons Sold	4,058,000	---
		35	Line Loss or Unaccounted-for Water	1,804,000	---
		36	% Line Loss or Unaccounted-for Water	30.77%	---
		37	Total amount of sewer treated (gallons)		0



WATER AND SEWER INVESTOR-OWNED UTILITIES

CLASS D ANNUAL FINANCIAL REPORT

OF

SOUTHWEST ENVIRONMENTAL RESOURCES

TO THE

PUBLIC UTILITY COMMISSION OF TEXAS

FOR THE

12 Months Ending December 31, 2020

Check one:

This is an original submission

This is a revised submission

Date of submission: 9/1/2021

PUBLIC UTILITY COMMISSION OF TEXAS
1701 N. CONGRESS AVE., PO BOX 13326, AUSTIN, TX 78711-3326

Annual Report for Class D Water and Sewer Utilities

Under the provisions of TWC § 13.136 and 16 Texas Administrative Code §§ 24.127 and 24.129

UTILITY INFORMATION

(Attach additional pages as necessary)

A. Utility Name:

Southwest Environmental Resources

List all assumed names or dba names:

B. Street Address, City or Town & Zip code:

PO Box 727
Rosenberg, Tx 77471

County: fort bend CCN #s: 11648

C. List All PWS System names and numbers:

(attach a separate list if necessary)

SOUTHWEST ENVIRONMENTAL RESOURCES
PWS#0790144

D. List All WQ Permitted system names and numbers:

(attach a separate list if necessary)

N/A

E. Type of Ownership:

Corporation: Partnership: Individual: Other:

F. Name of entity and type of form filed for federal tax purposes (1120, 1065, etc).

G. If a corporation, list names of the officers. If an individual or partnership, list the name of the individual or each partner.

Jeffrey Mahan

H. If the controlling ownership of this utility changed during the last twelve (12) months, state the date of ownership change and the name and address of the prior owner.

I. Date the utility was formed or incorporated: 2002

J. Is the utility commonly owned or controlled by another corporation?no
If yes, by whom?

K. List all entities under common control or ownership with this utility by entity name, CCN number, Public Water System (PWS) numbers and names of water systems owned, Water Quality (WQ) Discharge Permit numbers and names of wastewater systems owned and contact information.

L. If the utility owner has multiple CCNs, please list all CCN numbers owned:

PERSON TO CONTACT REGARDING THE INFORMATION SUPPLIED ON THESE FORMS

A. Name and Title:

Jeff Mahan
president

B. Street Address, city, zip code

PO Box 727
Rosenberg, Tx 77471

C. Telephone Number with Area Code:

832-496-5512

Cell Phone Number with Area Code:

Fax Number with Area Code:

Email address:

D. If not an officer, owner or employee, give name of firm employed by:

SUMMARY OF REVENUES AND EXPENSES

(Except for blue cells, the values in this table will populate)

<u>Line</u>	<u>Reference</u>	<u>(a) Total Company</u>	<u>(b) Water Operations</u>	<u>(c) Sewer Operations</u>
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

Note 1: This amount will be carried automatically from Schedule II, line 45.

GENERAL & ADMINISTRATIVE and OPERATIONS AND MAINTENANCE EXPENSE

(Except for blue cells, the values in this table will populate)

<u>Line</u>	(a) Total Company (b)+(c)	(b) Water Operations	(c) Sewer Operations
21 Office Salaries	\$0	\$0	\$0
22 Office Rent	0	\$0	\$0
23 Office Supplies	1,680	\$1,680	\$0
24 Contract Accounting	5,500	\$5,500	\$0
25 Insurance	0	\$0	\$0
26 Legal	0	\$0	\$0
27 Management Salaries	0	\$0	\$0
28 Miscellaneous	0	\$0	\$0
29 Other-add description	0	\$0	\$0
30 TOTAL GENERAL AND ADMINISTRATIVE EXPENSE	7,180	7,180	0
31			
32			
33 Operations and Maintenance Salaries	\$0	\$0	\$0
34 Employee Benefits	0	\$0	\$0
35 Operations and Maintenance Contract Labor	32,514	\$32,514	\$0
36 Supplies	0	\$0	\$0
37 Purchased Power	3,852	\$3,852	\$0
38 Testing	2,510	\$2,510	\$0
39 Chemicals	1,951	\$1,951	\$0
40 Miscellaneous Operations and Maintenance	982	\$982	\$0
41 TOTAL OPERATIONS AND MAINTENANCE EXPENSES	41,809	41,809	0
42			
43 TOTAL GEN & ADM and OP & MAINTENANCE EXPENSES	\$48,989	\$48,989	\$0

INVESTED CAPITAL AT END OF REPORTING PERIOD

(Except for blue cells, the values in this table will populate)

Line	Reference	(a) Total Company (b)+(c)	(b) Water Operations	(c) Sewer Operations
44	Utility Plant In Service	\$621,522	\$621,522	\$0
45	Accumulated Depreciation (Note 1)	(402,378)	(402,378)	0
46				
47	Net Plant In Service (Lines 44 through 45)	219,144	219,144	0
48	Working Cash Allowance	14,251	14,251	0
49	Materials and Supplies Inventory	0	0	0
50	Prepayments	0	0	0
51	Customer Deposits (Note 1)	0	0	0
52	Customer Contributions in Aid of Construction (Note1)	0	0	0
53	Other (attach schedule or itemize)	0	0	0
54	Other (attach schedule or itemize)	0	0	0
55				
56	TOTAL INVESTED CAPITAL (Lines 47 through 54)	\$233,395	\$233,395	\$0
57	Return (Schedule I, Line 18)	\$12,023	\$12,023	\$0
58	Rate of Return (Line 57 / Line 56)	5.15%	5.15%	0.00%

Note 1: These items are typically deductions from invested capital and thus should normally be entered as negative amounts.

EXTRAORDINARY AND NONRECURRING ITEMS

(Except for blue cells, the values in this table will populate)

Ref. Schedule	Column	Line Number	Description	Total Water	Total Sewer
		1			
		2		\$0	\$0
		3		0	0
		4		0	0
		5		0	0
		6		0	0
		7		0	0
		8		0	0
		9	OTHER INFORMATION	0	0
		10		0	0
		11	Number of Active Connections at End of Reporting Period	0	0
		12	5/8" Meters	145	0
		13	3/4" Meters	0	0
		14	1" Meters	0	0
		15	1 1/2" Meters	0	0
		16	2" Meters	0	0
		17	List all Additional Meter Sizes:	0	0
		18		0	0
		19		0	0
		20		0	0
		21	Number of Inactive Connections	0	0
		22	5/8" Meters	22	0
		23	3/4" Meters	0	0
		24	1"Meters	0	0
		25	1 1/2" meters	0	0
		26	2" Meters	0	0
		27	List all Additional Meter Sizes:	0	0
		28		0	0
		29		0	0
		30		0	0
		31	Total Gallons Pumped	9,155,000	---
		32	Total Gallons Purchased	0	---
		33	Total Water Produced	<u>9,155,000</u>	---
		34	Total Gallons Sold	5,676,000	---
		35	Line Loss or Unaccounted-for Water	3,479,000	---
		36	% Line Loss or Unaccounted-for Water	38.00%	---
		37	Total amount of sewer treated (gallons)		0