

Filing Receipt

Received - 2022-04-07 12:04:59 PM Control Number - 53396 ItemNumber - 5

PUC DOCKETNO 53396

RATEPAYER COMMENTS/REQUESTS TO INTERVENE

If you wish to PROTEST the proposed rate change, you must complete this form and file it electronically using the PUC Interchange Filer (<u>http://www.puc.texas.gov/industry/filings/E-FilingInstructions.pdf</u>) or mail the original to:

Filing Clerk Public Utility Commission of Texas 1701 North Congress Avenue P.O. Box 13326 Austin, Texas 78711-3326

No hearing will be held and the rates will be effective as proposed <u>unless</u> protests are received from at least 10% of ratepayers or from any affected municipality, or the Commission Staff requests a hearing.

CUSTOMER INFORMATION (please provide all of the requested information)

First Name: Margarof	Last Name: Tatum
Phone Number: 830 895-171	Fax Number: N/A
Email Address: MAggietatur	n Coutlook, com,
Address, City, State: 214 Woo	of Trail Kerruille 14 18038
Location where service is received:	Same as above

Please select the applicable :

I wish to PROTEST the following proposed rate action/s:

A I wish to be a COMMENTER. I understand that: I am NOT a party to this case; my comments are not considered evidence in this case; and I have no further obligation to participate in the proceeding. Public comments may help inform the PUCT of the public concerns and identify issues to be explored. Please provide comments below. Attach a separate page, if necessary.

□ I am requesting to INTERVENE in this proceeding. As an INTERVENOR, I understand that: I am a party to the case; I am required to respond to all discovery requests from other parties; I may be required to attend hearings, and if I file testimony, I may be cross-examined in the hearing; if I file any documents in the case, I must provide a copy to every other party in the case; and I acknowledge that I am bound by the Procedural Rules of the PUCT and the State Office of Administrative Hearings (SOAH).

Signature of Ratepayer: May Salum Date:

Si desea informacion en Espanol, puede llamar al 1-888-782-8477

Hearing- and speech-impaired individuals with text telephones may contact the PUCT's Customer Assistance Hotline

at

512-936-7136

Updated: September 29, 2021



WATER UTILITY TARIFF

Docket Number. <u>53</u>396

(this number will be assigned by the Public Utility Commission after your tariff is filed)

(Utility Name)

(Business Address) 6REG GRIENNAN - MANAGER

830.214.5481

350 WOOD TRAILS, KERRVILLE TX 87028

(City, State, Zip Code)

(Area Code/Telephone) OWNERS - JOSEPH & SHIRLEY MAYHEW

This tariff is effective for utility operations under the following Certificate of 928-308-979 Convenience and Necessity:

This tariff is effective in the following counties: $K \in R \in \mathbb{R}$

This tariff is effective in the following cities or unincorporated towns (if any): KERRVILLE

This tariff is effective in the following subdivisions or public water systems:

TABLE OF CONTENTS

The above utility lists the following sections of its tariff (if additional pages are needed for a section, all pages should be numbered consecutively):

TABLE OF CONTENTS

SECTION 1.0-RATE SCHEDULE	2
SECTION 2.0- SERVICE RULES AND POLICIES	4
SECTION 3.0- EXTENSION POLICY	13
APPENDIX A - DROUGHT CONTINGENCY PLAN	18
APPENDIX B- APPLICATION FOR SERVICE	19

Note: Appendix A – Drought Contingency Plan (DCP) is approved by the Texas Commission on Environmental Quality; however, the DCP is included as part of your approved utility tariff pursuant to PUC rules. If you are establishing a tariff for the first time, please contact the TCEQ to complete and submit a DCP for approval.

PUCT 9/1/2014 Water Tariff (Previous TCEQ Form 10330) Page 1 of 19



NOTICE OF PROPOSED RATE CHANGE PURSUANT TO TEXAS WATER CODE §§ 13.1871 AND 13.18715

WOOD) TRAILS	WATER	SUPPLY	INC.	1) 88	0	
	Company M	lame			CCN Num	ber(s)	
utility's office rates will app If the Comm ratepayers (1) municipality	wed online at inter e at the address belo ly to service receive lission receives a s 0 percent of the utili	change.puc.te ow or at the Co d after the effo ufficient num ty's customen after the prope	xas.gov. You ommission's of ective date pro ber of protest s over whose r osed effective	may also in ffice (1701 f wided below s, separateh ates the Con	of Texas (Commission spect a copy of the rand N. Congress Ave, Austry, unless modified or sur- y or in a combined pro- mission has original junct that ter will be set for h	te change applic in, TX 78701). T uspended by the (protest letter, from risdiction) or from	ation at your The proposed Commission. at least any affected
(must be at lea (Proposed rates bills all sums c	requested by the util ollected during the pe	ice is provided to ity are not final indency of the ra	to customers and The Commiss the proceeding in	nd 35 days af sion may mod	ter application is filed) ify the rates and order a e rate finally ordered plus	refund or credit aga s interest.)	inst future
	for Proposed R						
COSTS OF	OPERATING	HAVE MO	DRE THAN	DOUBLE	D SINCE OUR L	AST RAISE (7/2003)
BILLING <u>Water</u>	COMPARISO	N					
	5,000 gallons: \$ 10,000 gallons: \$	4800		Proposed Proposed	5,000 gallons: \$ 10,000 gallons: \$	62.50 80.50	/mo /mo
Water - Pa	<u>ss Through Ch</u>	arges					
_	5,000 gallons: \$ 10,000 gallons: \$	N/A		Proposed Proposed	5,000 gallons: \$ 10,000 gallons: \$	· · · · · · · · · · · · · · · · · · ·	/mo /mo
Sewer							
	5,000 gallons: \$	N/A	/mo l	Proposed	5,000 gallons: \$		/mo
WOOR	TRAILS	RAN					
		Subdivision	(s) or System(s) Affected l	by Rate Change		
2944	LINDSEY	DR. PF	ESCOTT	AZ	-	86301	
Company		City		Sta	te	Zip	
928- 3	308-979	u i '					
	Phone Number	•			·····		·····
· 9,58	\$5.00		N/A			N/A	
Water Annua	Revenue Increase	Water Pas	ss-Through An	nualReven	ue Increase Sewer	AnnualRevenue	Increase
3.1	5-2022				.7-1-	-2003	
	Rate Change Notic	e Delivered		······	Date of Last		
Prior to provid	ling notice, the utili	ty shall file a r	equest for the	assignment	of a docket number fo	r the application.	

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Updated: September 29, 2021

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NOTICE OF PROPOSED RATE CHANGE	-WATER

CURRENT RATES				PRO	POSED RATES					
Minimum Monthly Charge includes 1, 600 gallons			Minimu	m Monthly Charge inc	ludes	10	00 g	allons		
Meter Size:			Meter Size:				<u> </u>			
RESIDE	INTIAL		,		RESI	DENTIAL				
	5/8"	\$	35.0	0	ļ	5/8"		\$	40.00	
	3/4" -	\$				3/4"		\$	7	
	1"	/ \$	·		1	1"		\$		
	1 1/2"	(\$				1 1/2"		\$		-
	2"	\$				2"		\$	1	
	3"	<u>۲</u>				3"		\$		
Other:		\$			Other:			\$		
	GALLONA	GE CHA	RGE:			GALLONA	GE (CHAR	RGE:	
TIER	VOLUME		CHARGE 1000 gals.	l per	TIER	VOLUME	-		CHARG 1000 gals.	-
лт ` 1			\$ 3.25	/1000	T: 1				\$ 4.50	/1000
Tier 1	to	gals.	\$ 3.23	<u>gals.</u> /1000	Tier 1	to		gals.	3 100	gals. /1000
Tier 2	to	gals.	\$	gals.	Tier 2	to		gals.	\$	gals.
		<u></u>		/1000				<u> </u>		/1000
Tier 3	to	gals.	\$	gals.	Tier 3	; to		gals.	\$	gals. /1000
Tier 4	to	gals.	\$	/1000 gals.	Tier 4	to		gals.	\$	gals.
	10	ga 15.	4	/1000	1101 4			ga is.		/1000
Tier 5	to	gals.	\$	gals.	Tier 5	to		gals.	\$	gals.
MISCELLANEOUS FEES				MISCELLANEOUS FEES						
	Tap Fee	\$ 5	50.00			Tap Fee	\$	15	0.00	
Re	connect Fee:				Re	econnect Fee:				
Non-payment				Ion-payment		_	,			
	4 .	\$	25.00			<u>ximum - \$25.00)</u>	\$		5.00	
Customer's Request \$		A	50.00		Customer's Request		\$		0.00	
	ransfer Fee	\$	46.00			Fransfer Fee	\$	4	5.00	
L	ate Charge	\$	5.00			Charge (Indicate r \$5.00 or 10%)	\$		10%	
Returne	d Check Charge	\$	25.00		Return	ed Check Charge	\$	2	5.00	
	Deposit	\$	50.00		` (Ma	Deposit ximum \$50.00)	\$	5	0.00	
Me	ter Test Fee	\$	25.00		М	eter Test Fee imum - \$25.00)	\$		5.00	

25.00(Maximum - \$25.00)25.00Regulatory Assessment of 1% is added to the minimum monthly charge and gallonage charges.Additional fees and meter sizes may be shown on a separate page.

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: If applicable, list any bill payment assistance programs to low income ratepayers.

Updated: September 29, 2021

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AFFIDAVIT

STATE OF TEXAS

COUNTY OF KERE

I, JOSEPH MATHEW being duly swom, file this NOTICE OF PROPOSED RATE CHANGE

as OWNFR / PRESIDENT (indicate relationship to Utility that is, owner, member of partnership, title as officer of corporation, or of Utility); that, in such capacity, I am qualified and authorized to file and verify such notice; and that all statements and matters set forth herein are true and correct.

I further represent that a copy of the attached notice was provided by _____

MAIL (method of delivery)

Joseph W. May han AFFIANT

(Utility's Authorized Representative)

NAME OF UTILITY

If the Affiant to this form is any person other than the sole owner, partner, officer of the Utility, or its attorney, a properly verified Power of Attorney must be enclosed. Notice may be deemed deficient if the affidavit is executed and notarized before the date the Notice is provided.

SUBSCRIBED AND SWORN TO BEFORE this the 9^{+h} day of WUCh, 20 22, to certify which witness my hand and seal of office.

ź	SEAL KATHERINE ROSE JARRELL Notary Public - Arizona Yavapai County Commission # 552622 My Comm. Expires Sep 23, 2022	Katherine Rose Jamell NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS AVIZONA Katherine Rose Jurper PRINT OR TYPE NAME OF NOTARY
•	MY COMMISSION EXPIRES	September 23,2022

Updated: September 29, 2021-



WATER UTILITY TARIFF

Docket Number: 53396

(this number will be assigned by the Public Utility Commission after your tariff is filed)

WOOD TRAILS WATER SUPPLY INC (Utility Name) (Business Address) GREG GRIENNAW - MANAGER 830-214.5481

350 WOOD TRAILS, KERRVILLE TX 87028

(City, State, Zip Code)

(Area Code/Telephone) OWNERS - JOSEPH & SHIRLEY MAYHEW

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