

Filing Receipt

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| Date Filed: | Jun. 27, 2022 |
|-------------------|---------------|
| CCN Water No.(s): | 12949 |
| CCN Sewer No.(s): | N/A |

Public Utility Commission of Texas Class "D" Water or Sewer Utility Request for an Annual Rate Adjustment

Pursuant to Texas Water Code §13.1872 and 16 Texas Administrative Code Chapter 24

Utility Name: Lakeview Hills Property Owners Association

| Applicant: | | | |
|---|---|--|---|
| | (If applicable | e, an Individual, Corporation | n, or Other Legal Entity other than Utility) |
| Address: | 110 Lakeview E | Drive Loop | E-Mail: <u>vorks@eastex.net</u> |
| City: | Coldspring | | Web Site: www.lakeviewhillspoa.wixsite.com/home |
| State/Zip: | Texas 77331 | | |
| Telephone: | 713-859-7481 | | |
| Fax: | N/A | | |
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| | | | |
| | | | |
| I | erson to whom c | correspondence concer | rning this request should be addressed: |
| | | correspondence concer | rning this request should be addressed: |
| | Mark York | Correspondence concer (First/Last Name) | rning this request should be addressed: |
| Name: | Mark York | (First/Last Name) | rning this request should be addressed: E-Mail: yorks@eastex.net |
| Name: Address: | Mark York | (First/Last Name) | |
| Name: Address: City: | Mark York 325 lakeview Di | (First/Last Name) | E-Mail: <u>vorks@eastex.net</u> |
| Name: Address: City: State/Zip: | Mark York 325 lakeview Dr Colspring | (First/Last Name) | E-Mail: <u>vorks@eastex.net</u> |
| Name: Address: City: State/Zip: | Mark York 325 lakeview Dr Colspring Texas 77331 713-859-7481 | (First/Last Name) | E-Mail: <u>vorks@eastex.net</u> |
| Name: Address: City: State/Zip: Telephone: | Mark York 325 lakeview Dr Colspring Texas 77331 713-859-7481 | (First/Last Name) | E-Mail: <u>vorks@eastex.net</u> |
| Name: Address: City: State/Zip: Telephone: | Mark York 325 lakeview Dr Colspring Texas 77331 713-859-7481 | (First/Last Name) | E-Mail: <u>vorks@eastex.net</u> |
| Name: Address: City: State/Zip: Telephone: Fax: | Mark York 325 lakeview Dr Colspring Texas 77331 713-859-7481 N/A | (First/Last Name) | E-Mail: <u>vorks@eastex.net</u> |
| Name: Address: City: State/Zip: Telephone: | Mark York 325 lakeview Dr Colspring Texas 77331 713-859-7481 N/A | (First/Last Name) | E-Mail: <u>vorks@eastex.net</u> Web Site: <u>www.lakeviewhillspoa.wixsite.com/home</u> |
| Name: Address: City: State/Zip: Telephone: Fax: Affiliates* | Mark York 325 lakeview Di Colspring Texas 77331 713-859-7481 N/A | (First/Last Name) rive Loop | E-Mail: <u>vorks@eastex.net</u> Web Site: <u>www.lakeviewhillspoa.wixsite.com/home</u> |

* If the total of affiliate water connections plus the applicant's water connections is more than 500, the applicant is not a Class D utlity and may not file this form and must file the application for Class C utilities.

Number of Current Active Water Connections: Number of Current Active Sewer Connections: (Total for all of the utility's CCNs and subdivisions.)

53 N/A

APPLICATION

Class D Water or Sewer Utility Request for an Annual Rate Adjustment

Lakeview Hills Property Owners Association

June 27, 2022 (Date of Application)

(Utility Name)

Enter all applicable data in unlocked cells. For example, the "Other:_____" cell or the "Previous Tariff Rates" column should be completed using the utility's previously approved tariff. The remainder of the worksheet will automatically calculate new tariff values.

| WATER | | revious iff Rates | Annual Rate Adjustment | Proposed Minium Monthly Charge | | |
|-------------------|--------------|--------------------------|---------------------------|--------------------------------------|----|-------|
| Gallons Included: | | 0 | | | | |
| Mete | er Sizes | | | | | |
| | | | \$ - | | \$ | - |
| 5/8" | 5/8" or 3/4" | | \$ 17.64 | | \$ | 18.52 |
| | | \$ - | | \$ | - | |
| | | | \$ - | | \$ | - |
| | | | \$ - | 5.00% ¹ | \$ | - |
| | | | \$ - | 5.00% | \$ | - |
| | | | \$ - | | \$ | - |
| | | | \$ - | | \$ | - |
| | | | \$ - | | \$ | - |
| | | | \$ - | | \$ | - |
| Other: | | 0 | \$ - | | \$ | - |

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Class D Water or Sewer Utility Request for an Annual Rate Adjustment

Utility Name: Lakeview Hills Property Owners Association

CCN Number(s):

Water 12949 Sewer

N/A

WATER

| (1 | (Do not complete if you have BLOCK gallonage rates.) GALLONAGE CHARGE: | | | | | |
|--|---|--------------------|---------|--|--|--|
| for each additional 1,000 gallons over the minimum (use this table for a single gallonage rate) | | | | | | |
| | PreviousAnnual RateProposedTariff RatesAdjustmentTariff Rates | | | | | |
| \$ | 3.31 | 5.00% ¹ | \$ 3.48 | | | |

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NOTICE OF APPROVED UTILITY ANNUAL RATE ADJUSTMENT

| Utility Name: | | Lakevie | w Hills Pro | perty Owners | Association | l | |
|---|---|---|---|--|-------------------|-------------------|--------|
| CCN Number(s |): | Water | 12949 | Sewer | | N/A | |
| below. This rat based on Texas | on the next page e was requested Water Code § 1 g, of no more thar | by the util 3.1872, w | lity and appr | roved by the P | ublic Utility | Commission of | Texas |
| adjustment: | ıblic water syster | | er system(s), | or subdivision | n(s) will be a | affected by this | rate |
| Effective Da | ite of Approved 1 | Increase: | | October | 31, 2022 | | |
| | •• | | (must be at lea | ast 30 days from the | date the customer | s receive notice) | |
| The rate adjustm | ent will apply to approximately 30 | all service | e rendered af | fter the effectiv | | | on the |
| The rate adjustm | nent will apply to | all service to 45 days | e rendered at after the eff | fter the effectiv | | | on the |
| The rate adjustm bill you receive a | ent will apply to approximately 30 | all service to 45 days | e rendered at after the eff | fter the effectiv | | | on the |
| The rate adjustm bill you receive a Address: | ent will apply to approximately 30 | all service to 45 days | e rendered at after the eff | fter the effectiv | | | on the |
| The rate adjustm bill you receive a Address: City: | ent will apply to approximately 30 <u>110 Lakeview I</u> Coldspring | all service to 45 days | e rendered at after the eff | fter the effectiv | | | on the |
| The rate adjustm bill you receive a Address: City: State/Zip: | nent will apply to approximately 30 110 Lakeview I Coldspring Texas 77331 713-859-7481 | all service to 45 days Drive Loo | e rendered at s after the eff p | fter the effective date. | | | on the |
| The rate adjustm bill you receive a Address: City: State/Zip: | ent will apply to approximately 30 <u>110 Lakeview I</u> <u>Coldspring</u> <u>Texas 77331</u> <u>713-859-7481</u> Percent | all service to 45 days Drive Loo – of Rate A | e rendered af after the eff p - djustment: | fter the effective date. | | | on the |
| The rate adjustm bill you receive a Address: City: State/Zip: | nent will apply to approximately 30 <u>110 Lakeview I</u> <u>Coldspring</u> <u>Texas 77331</u> <u>713-859-7481</u> Percent Date No | all servic to 45 days Drive Loo – of Rate A ptice Deliv | e rendered at s after the eff p - - djustment: rered: | fter the effective date. | | | on the |
| The rate adjustm bill you receive a Address: City: State/Zip: | nent will apply to approximately 30 <u>110 Lakeview I</u> <u>Coldspring</u> <u>Texas 77331</u> <u>713-859-7481</u> Percent Date No | all service to 45 days Drive Loo of Rate A otice Deliv eters are R | e rendered at after the eff p - djustment: greed: 2ead: | fter the effective ective date. | | | on the |
| The rate adjustm bill you receive a Address: City: State/Zip: | ent will apply to approximately 30 <u>110 Lakeview I</u> <u>Coldspring</u> <u>Texas 77331</u> <u>713-859-7481</u> Percent Date No Date Mo | all service to 45 days Drive Loo of Rate A otice Deliv eters are R Billing | e rendered af after the eff p - djustment: rered: tead: g Compa | fter the effective ective date. 5.00% ¹ Sept. 15, 2022 Last day each month arison ² | e date and w | | on the |
| The rate adjustm bill you receive a Address: City: State/Zip: | ent will apply to approximately 30 <u>110 Lakeview I</u> <u>Coldspring</u> <u>Texas 77331</u> <u>713-859-7481</u> Percent Date No Date Mo | all service to 45 days Drive Loo of Rate A otice Deliv eters are R Billing | e rendered af after the eff p - djustment: rered: tead: g Compa | fter the effective ective date. | e date and w | | on the |
| The rate adjustm bill you receive a Address: City: State/Zip: | ent will apply to approximately 30 <u>110 Lakeview I</u> <u>Coldspring</u> <u>Texas 77331</u> <u>713-859-7481</u> Percent Date No Date Mo | all service to 45 days Drive Loo of Rate A otice Deliv eters are R Billing | e rendered af after the eff p - djustment: rered: tead: g Compa | fter the effective ective date. 5.00% ¹ Sept. 15, 2022 Last day each month arison ² | e date and w | | on the |
| The rate adjustm bill you receive a Address: City: State/Zip: | ent will apply to approximately 30 <u>110 Lakeview I</u> <u>Coldspring</u> <u>Texas 77331</u> <u>713-859-7481</u> Percent Date No Date Mo | all service to 45 days Drive Loo of Rate A otice Deliv eters are R Billing es based of | e rendered at s after the eff p - - - djustment: rered: Read: g Compa n Gallons (G) | fter the effective ective date. 5.00% ¹ Sept. 15, 2022 Last day each month arison ² | e date and w | | on the |
| The rate adjustm bill you receive a Address: City: State/Zip: | ient will apply to approximately 30 110 Lakeview I Coldspring Texas 77331 713-859-7481 Percent Date No Date Mo Charge G \$3 | all service to 45 days Drive Loo of Rate A otice Deliv eters are R Billing es based of | e rendered at s after the eff p - - - djustment: rered: Read: g Compa n Gallons (G) | fter the effective ective date. 5.00% ¹ Sept. 15, 2022 Last day each month arison ² | e date and w | | on the |

NOTICE OF APPROVED UTILITY ANNUAL RATE ADJUSTMENT

| CCN Number(s): | | Water | 12 | 2949 | S | Sewer | N/A |
|----------------|--------|------------------------|-----------------|------------------------------|---------|------------------------------------|-----|
| | | | | | . ^ | | |
| | | | WAT | 'ER | | | |
| | | MINIM | UM MON | FHLY CH | ARGE | | |
| | Μ | eter Size | Mo | s Minimum onthly narge | M N | New inimum Ionthly Charge | |
| | | | \$ | - | \$ | - | |
| | 5/8 | " or 3/4" | \$ | 17.64 | \$ | 18.52 | |
| | | | \$ | - | \$ | - | |
| | | | \$ | - | \$ | - | |
| | | | \$ | - | \$ | - | |
| | | | \$ | - | \$ | - | |
| | | | \$ | - | \$ | - | |
| | | | \$ | - | \$ | - | |
| | | | \$ | - | \$ | - | |
| | | | \$ | - | \$ | - | |
| | Other: | 0 | \$ | - | \$ | - | |
| | | GAI | LLONAGE | E CHARGI | ES | | |
| | | for each add | itional 1,000 g | allons over the r | ninimum | | |
| | | Previous riff Rates | Annual Ra | te Adjustment | Та | New riff Rates | |
| | | \$3.31 | 5.0 |)0% ¹ | | \$3.48 | |

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¹ A 5% rate increase is permitted by Texas Water Code § 13.1872 for a Class D utility without hearing for four out of five calendar years.

NOTICE OF APPROVED UTILITY ANNUAL RATE ADJUSTMENT

- 5. The Commission processed the application in accordance with the requirements of the TWC, the Administrative Procedure Act,¹ and Commission rules.
- 6. Lakeview Hills demonstrated that it has met the requirements of TWC § 13.1872 for approval of the rate adjustments.
- Under TWC § 13.1872(c)(1), the applicant must provide notice 30 days before the effective date of the proposed change.
- Under 16 TAC § 24.49(e), the applicant must provide notice after it receives a written order by the Commission approving or modifying the application.

III. Ordering Paragraphs

In accordance with these findings of fact and conclusions of law, the Commission issues the following orders.

- 1. The Commission approves Lakeview Hills' application for a class D annual rate adjustment, effective September 30, 2021.
- 2. The Commission adjusts Lakeview Hills's previously approved base rate to the following proposed water base rate, effective September 30, 2021, as follows:

| Meter Size (Includes 0 Gallons) | Approved Base Rate | Proposed Rate |
|---------------------------------------|--------------------|---------------|
| 5/8" or 3/4" | \$ 16.80 | \$ 17.64 |

 The Commission adjusts Lakeview Hills's proposed gallonage charges per each 1,000 gallons used as follows:

| Previously Approved Gallonage Rate | Proposed Rate |
|------------------------------------|---------------|
| \$ 3.15 | \$ 3.31 |

- 4. The Commission approves the water tariff attached to Commission Staff's July 19, 2021 recommendation on administrative completeness and final disposition.
- 5. Within ten days of the date of this Notice of Approval, Commission Staff must file a clean copy of the tariff, with the approved effective date, with Central Records to be marked *Approved* and kept in the Commission tariff book.

¹ Tex. Gov't Code §§ 2001.001–.903.