



Office hours: 8:00 a.m. to 4:30 p.m. Monday - Friday
420 N Rice Avenue, Hamilton, Texas
(254)386-3123 or (800)595-3401
Pay By Phone - (877)833-4031

CORIX UTILITIES TX INC
ATTN: ACCOUNTS PAYABLE
500 W MONROE ST STE 3600
CHICAGO IL 60661-3779

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- BILLING AND SERVICE INFORMATION**
- It pays to be prompt! You can avoid a late fee of 5% or \$5.00, whichever is greater, by making sure your payment is received by the due date shown on the bill. Your monthly bill may be electronically drafted from your bank account, credit card or debit card. You may also make payments using a credit card, debit card or electronic check by calling (877)833-4031 or by accessing our website at www.hamiltonelectric.coop.
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Payment locations:

Hamilton Office - 420 N Rice, Hamilton
Ft Gates Water - 103 Gateway Circle, Gatesville
Kempner Water - 11986 E Hwy 190, Kempner
Lometa City Hall - 109 W San Saba, Lometa
Brown & Wesson INS CO - 915 3rd ST. Goldthwaite

Account No.	Cycle	Rate	Service Address	Service From	Service To	Billing Date
5915402	2	NET	SEWER TREATMENT PLANT	04/20/2021	05/20/2021	05/29/2021
Meter Number	Type	Prev Read	Pres Read	KWH Used	Map Location	
142100818	Delivered	5337	11405	6068	4340- 37- 82	
142100818	Received	96924	96924	0	PCRF Factor	
	Net			6068	0.0179800	
Activity Since Last Bill	\$ Amount	Current Bill Information				\$ Amount
Previous Balance	639.41	ELECTRIC SERVICE **DO NOT PAY - PAID BY CREDIT CARD**				623.79
Payments	-639.41					
Other Adjustments	0.00					
Balance Prior to this Billing	0.00					
<p>The Due Date on your bill applies only to current charges. Any past due amount is subject to immediate disconnection. Failure to receive a bill does not exempt you from payment, late charges or disconnection for nonpayment.</p>		Due Upon Receipt - Pay This Amount				\$623.79
		Past Due After				06/18/2021

Retain this portion for your records

Please detach and return this portion with your payment

Account No.	Cycle	Service From	Service To
5915402	2	04/20/2021	05/20/2021
Service Address	Map Location		
SEWER TREATMENT PLANT	4340- 37- 82		
Billing Date	05/29/2021	Past Due After	06/18/2021
Due Upon Receipt Pay This Amount		\$623.79	

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HAMILTON COUNTY ELECTRIC COOPERATIVE
PO BOX 753
HAMILTON TX 76531-0753



4607000059154020006237900062379052920214



"Owned by those we serve"

**Hamilton County
Electric Cooperative**
PO BOX 753
Hamilton, TX 76531-0753

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CORIX UTILITIES TX INC
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C-36 P-43

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Account No.	Cycle	Rate	Service Address			Service From	Service To	Billing Date
5959202	2	4	LIFT STATION #1			04/21/2021	05/21/2021	05/29/2021
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCRF Factor	
142100819	44730	45970	1.0	1240	4340- 42- 13LOM		0.0179800	
Activity Since Last Bill		\$ Amount		Current Bill Information				\$ Amount
Previous Balance		122.83		ELECTRIC SERVICE LOMETA FRANCHISE FEE **DO NOT PAY - PAID BY CREDIT CARD**				147.37 2.95
Payments		-122.83						
Other Adjustments		0.00						
Balance Prior to this Billing		0.00						
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				Due Upon Receipt - Pay This Amount				\$150.32
				Past Due After				06/18/2021

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Account No.	Cycle	Service From	Service To
5959202	2	04/21/2021	05/21/2021
Service Address		Map Location	
LIFT STATION #1		4340- 42- 13LOM	
Billing Date	05/29/2021	Past Due After	06/18/2021
Due Upon Receipt Pay This Amount			\$150.32

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Brown & Wesson INS CO - 915 3rd ST. Goldthwaite

Account No.	Cycle	Rate	Service Address			Service From	Service To	Billing Date
5900602	2	1	LIFT STATION #2			05/21/2021	06/21/2021	07/01/2021
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCRF Factor	
136788558	2337	2386	1.0	49	4340- 42- 75MDA		0.0180600	
Activity Since Last Bill		\$ Amount		Current Bill Information				\$ Amount
Previous Balance		20.53		ELECTRIC SERVICE **DO NOT PAY - PAID BY CREDIT CARD**				19.83
Payments		-20.53						
Other Adjustments		0.00						
Balance Prior to this Billing		0.00						
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				Due Upon Receipt - Pay This Amount				\$19.83
				Past Due After				07/16/2021

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Account No.	Cycle	Service From	Service To
5900602	2	05/21/2021	06/21/2021
Service Address		Map Location	
LIFT STATION #2		4340- 42- 75MDA	
Billing Date	07/01/2021	Past Due After	07/16/2021
Due Upon Receipt Pay This Amount			\$19.83

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HAMILTON COUNTY ELECTRIC COOPERATIVE
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5915402	2	NET	SEWER TREATMENT PLANT	05/20/2021	06/20/2021	07/01/2021
Meter Number	Type	Prev Read	Pres Read	KWH Used	Map Location	
142100818	Delivered	11405	20979	9574	4340- 37- 82	
142100818	Received	96924	96924	0	PCRF Factor	
	Net			9574	0.0180600	
Activity Since Last Bill	\$ Amount	Current Bill Information				\$ Amount
Previous Balance	623.79	ELECTRIC SERVICE **DO NOT PAY - PAID BY CREDIT CARD**				970.53
Payments	-623.79					
Other Adjustments	0.00					
Balance Prior to this Billing	0.00					
The Due Date on your bill applies only to current charges. Any past due amount is subject to immediate disconnection. Failure to receive a bill does not exempt you from payment, late charges or disconnection for nonpayment.		Due Upon Receipt - Pay This Amount				\$970.53
		Past Due After				07/16/2021

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5915402	2	05/20/2021	06/20/2021
Service Address	Map Location		
SEWER TREATMENT PLANT	4340- 37- 82		
Billing Date	07/01/2021	Past Due After	07/16/2021
Due Upon Receipt Pay This Amount		\$970.53	

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HAMILTON TX 76531-0753



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5959202	2	4	LIFT STATION #1			05/21/2021	06/21/2021	07/01/2021
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCRF Factor	
142100819	45970	48134	1.0	2164	4340- 42- 13LOM		0.0180600	
Activity Since Last Bill		\$ Amount		Current Bill Information				\$ Amount
Previous Balance		150.32		ELECTRIC SERVICE LOMETA FRANCHISE FEE **DO NOT PAY - PAID BY CREDIT CARD**				238.71 4.77
Payments		-150.32						
Other Adjustments		0.00						
Balance Prior to this Billing		0.00						
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				Due Upon Receipt - Pay This Amount				\$243.48
				Past Due After				07/16/2021

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Account No.	Cycle	Service From	Service To
5959202	2	05/21/2021	06/21/2021
Service Address		Map Location	
LIFT STATION #1		4340- 42- 13LOM	
Billing Date	07/01/2021	Past Due After	07/16/2021
Due Upon Receipt Pay This Amount			\$243.48

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5900602	2	1	LIFT STATION #2			06/21/2021	07/21/2021	07/30/2021
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCRF Factor	
136788558	2386	2499	1.0	113	4340- 42- 75MDA		0.0187900	
Activity Since Last Bill		\$ Amount		Current Bill Information				\$ Amount
Previous Balance		19.83		ELECTRIC SERVICE **DO NOT PAY - PAID BY CREDIT CARD**				26.24
Payments		-19.83						
Other Adjustments		0.00						
Balance Prior to this Billing		0.00						
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				Due Upon Receipt - Pay This Amount				\$26.24
				Past Due After				08/18/2021

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5900602	2	06/21/2021	07/21/2021
Service Address		Map Location	
LIFT STATION #2		4340- 42- 75MDA	
Billing Date	07/30/2021	Past Due After	08/18/2021
Due Upon Receipt Pay This Amount			\$26.24

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Meter Number	Type	Prev Read	Pres Read	KWH Used	Map Location	
142100818	Delivered	20979	30716	9737	4340- 37- 82	
142100818	Received	96924	96924	0	PCRF Factor	
	Net			9737	0.0187900	
Activity Since Last Bill	\$ Amount	Current Bill Information				\$ Amount
Previous Balance	970.53	ELECTRIC SERVICE **DO NOT PAY - PAID BY CREDIT CARD**				993.74
Payments	-970.53					
Other Adjustments	0.00					
Balance Prior to this Billing	0.00					
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		Past Due After				08/18/2021

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5915402	2	06/20/2021	07/21/2021
Service Address	Map Location		
SEWER TREATMENT PLANT	4340- 37- 82		
Billing Date	07/30/2021	Past Due After	08/18/2021
Due Upon Receipt Pay This Amount		\$993.74	

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Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCRF Factor	
142100819	48134	49005	1.0	871	4340- 42- 13LOM		0.0187900	
Activity Since Last Bill		\$ Amount		Current Bill Information				\$ Amount
Previous Balance		243.48		ELECTRIC SERVICE LOMETA FRANCHISE FEE **DO NOT PAY - PAID BY CREDIT CARD**				111.66 2.23
Payments		-243.48						
Other Adjustments		0.00						
Balance Prior to this Billing		0.00						
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				Due Upon Receipt - Pay This Amount				\$113.89
				Past Due After				08/18/2021

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Account No.	Cycle	Service From	Service To
5959202	2	06/21/2021	07/21/2021
Service Address		Map Location	
LIFT STATION #1		4340- 42- 13LOM	
Billing Date	07/30/2021	Past Due After	08/18/2021
Due Upon Receipt Pay This Amount		\$113.89	

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CHICAGO IL 60661-3779

HAMILTON COUNTY ELECTRIC COOPERATIVE
PO BOX 753
HAMILTON TX 76531-0753



4607000059592020001138900011389073020214



"Owned by those we serve"

**Hamilton County
Electric Cooperative**
PO BOX 753
Hamilton, TX 76531-0753

Office hours: 8:00 a.m. to 4:30 p.m. Monday - Friday
420 N Rice Avenue, Hamilton, Texas
(254)386-3123 or (800)595-3401
Pay By Phone - (877)833-4031

13566 1 MB 0.482
CORIX UTILITIES TX INC
ATTN: ACCOUNTS PAYABLE
500 W MONROE ST STE 3600
CHICAGO IL 60661-3779

4 13566
C-36 P-43

**BILLING AND SERVICE INFORMATION**

• It pays to be prompt! You can avoid a late fee of 5% or \$5.00, whichever is greater, by making sure your payment is received by the due date shown on the bill. Your monthly bill may be electronically drafted from your bank account, credit card or debit card. You may also make payments using a credit card, debit card or electronic check by calling (877)833-4031 or by accessing our website at www.hamiltonelectric.coop.

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Payment locations:

Hamilton Office - 420 N Rice, Hamilton
Ft Gates Water - 103 Gateway Circle, Gatesville
Kempner Water - 11986 E Hwy 190, Kempner
Lometa City Hall - 109 W San Saba, Lometa
Brown & Wesson INS CO - 915 3rd ST. Goldthwaite

Account No.	Cycle	Rate	Service Address			Service From	Service To	Billing Date
5900602	2	1	LIFT STATION #2			07/21/2021	08/21/2021	08/31/2021
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCRF Factor	
136788558	2499	2621	1.0	122	4340- 42- 75MDA		0.0196900	
Activity Since Last Bill		\$ Amount		Current Bill Information				\$ Amount
Previous Balance		26.24		ELECTRIC SERVICE **DO NOT PAY - PAID BY CREDIT CARD**				27.25
Payments		-26.24						
Other Adjustments		0.00						
Balance Prior to this Billing		0.00						
<p>The Due Date on your bill applies only to current charges. Any past due amount is subject to immediate disconnection. Failure to receive a bill does not exempt you from payment, late charges or disconnection for nonpayment.</p>								
				Due Upon Receipt - Pay This Amount				\$27.25
				Past Due After				09/17/2021

Retain this portion for your records

Please detach and return this portion with your payment

Account No.	Cycle	Service From	Service To
5900602	2	07/21/2021	08/21/2021
Service Address		Map Location	
LIFT STATION #2		4340- 42- 75MDA	
Billing Date	08/31/2021	Past Due After	09/17/2021
Due Upon Receipt Pay This Amount			\$27.25

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HAMILTON COUNTY ELECTRIC COOPERATIVE
PO BOX 753
HAMILTON TX 76531-0753



4607000059006020000272500002725083120215



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Brown & Wesson INS CO - 915 3rd ST. Goldthwaite

Account No.	Cycle	Rate	Service Address		Service From	Service To	Billing Date
5915402	2	NET	SEWER TREATMENT PLANT		07/21/2021	08/20/2021	08/31/2021
Meter Number	Type		Prev Read	Pres Read	KWH Used	Map Location	
142100818	Delivered		30716	39210	8494	4340- 37- 82	
142100818	Received		96924	96924	0	PCRF Factor	
	Net				8494	0.0196900	
Activity Since Last Bill			\$ Amount	Current Bill Information			\$ Amount
Previous Balance			993.74	ELECTRIC SERVICE **DO NOT PAY - PAID BY CREDIT CARD**			877.72
Payments			-993.74				
Other Adjustments			0.00				
Balance Prior to this Billing			0.00				
<div>The Due Date on your bill applies only to current charges. Any past due amount is subject to immediate disconnection. Failure to receive a bill does not exempt you from payment, late charges or disconnection for nonpayment.</div>				Due Upon Receipt - Pay This Amount			\$877.72
				Past Due After			09/17/2021

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Account No.	Cycle	Service From	Service To
5915402	2	07/21/2021	08/20/2021
Service Address		Map Location	
SEWER TREATMENT PLANT		4340- 37- 82	
Billing Date	08/31/2021	Past Due After	09/17/2021
Due Upon Receipt Pay This Amount			\$877.72

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4607000059154020008777200087772083120215



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13567 1 MB 0.482
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4 13567
C-36 P-43

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Brown & Wesson INS CO - 915 3rd ST. Goldthwaite

Account No.	Cycle	Rate	Service Address			Service From	Service To	Billing Date
5959202	2	4	LIFT STATION #1			07/21/2021	08/21/2021	08/31/2021
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCRF Factor	
142100819	49005	49762	1.0	757	4340- 42- 13LOM		0.0196900	
Activity Since Last Bill		\$ Amount		Current Bill Information				\$ Amount
Previous Balance		113.89		ELECTRIC SERVICE LOMETA FRANCHISE FEE **DO NOT PAY - PAID BY CREDIT CARD**				101.00 2.02
Payments		-113.89						
Other Adjustments		0.00						
Balance Prior to this Billing		0.00						
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				Due Upon Receipt - Pay This Amount				\$103.02
				Past Due After				09/17/2021

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Account No.	Cycle	Service From	Service To
5959202	2	07/21/2021	08/21/2021
Service Address		Map Location	
LIFT STATION #1		4340- 42- 13LOM	
Billing Date	08/31/2021	Past Due After	09/17/2021
Due Upon Receipt Pay This Amount			\$103.02

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HAMILTON COUNTY ELECTRIC COOPERATIVE
PO BOX 753
HAMILTON TX 76531-0753



4607000059592020001030200010302083120212



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Hamilton, TX 76531-0753

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13612 1 MB 0.482
CORIX UTILITIES TX INC
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4 13612
C-36 P-43

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Brown & Wesson INS CO - 915 3rd ST. Goldthwaite

Account No.	Cycle	Rate	Service Address			Service From	Service To	Billing Date
5900602	2	1	LIFT STATION #2			08/21/2021	09/21/2021	10/01/2021
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCRF Factor	
136788558	2621	2745	1.0	124	4340- 42- 75MDA		0.0240600	
Activity Since Last Bill		\$ Amount		Current Bill Information				\$ Amount
Previous Balance		27.25		ELECTRIC SERVICE **DO NOT PAY - PAID BY CREDIT CARD**				27.99
Payments		-27.25						
Other Adjustments		0.00						
Balance Prior to this Billing		0.00						
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				Past Due After				10/18/2021

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Account No.	Cycle	Service From	Service To
5900602	2	08/21/2021	09/21/2021
Service Address		Map Location	
LIFT STATION #2		4340- 42- 75MDA	
Billing Date	10/01/2021	Past Due After	10/18/2021
Due Upon Receipt Pay This Amount			\$27.99

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HAMILTON TX 76531-0753





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Account No.	Cycle	Rate	Service Address	Service From	Service To	Billing Date
5915402	2	NET	SEWER TREATMENT PLANT	08/20/2021	09/21/2021	10/01/2021
Meter Number	Type	Prev Read	Pres Read	KWH Used	Map Location	
142100818	Delivered	39210	48381	9171	4340- 37- 82	
142100818	Received	96924	96924	0	PCRF Factor	
	Net			9171	0.0240600	
Activity Since Last Bill	\$ Amount	Current Bill Information				\$ Amount
Previous Balance	877.72	ELECTRIC SERVICE **DO NOT PAY - PAID BY CREDIT CARD**				985.75
Payments	-877.72					
Other Adjustments	0.00					
Balance Prior to this Billing	0.00					
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		Past Due After				10/18/2021

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Account No.	Cycle	Service From	Service To
5915402	2	08/20/2021	09/21/2021
Service Address	Map Location		
SEWER TREATMENT PLANT	4340- 37- 82		
Billing Date	10/01/2021	Past Due After	10/18/2021
Due Upon Receipt Pay This Amount		\$985.75	

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13613 1 MB 0.482
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4 13613
C-36 P-43



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5959202	2	4	LIFT STATION #1			08/21/2021	09/21/2021	10/01/2021
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCRF Factor	
142100819	49762	50592	1.0	830	4340- 42- 13LOM		0.0240600	
Activity Since Last Bill		\$ Amount		Current Bill Information				\$ Amount
Previous Balance		103.02		ELECTRIC SERVICE LOMETA FRANCHISE FEE **DO NOT PAY - PAID BY CREDIT CARD**				111.95 2.24
Payments		-103.02						
Other Adjustments		0.00						
Balance Prior to this Billing		0.00						
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				Due Upon Receipt - Pay This Amount				\$114.19
				Past Due After				10/18/2021

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5959202	2	08/21/2021	09/21/2021
Service Address		Map Location	
LIFT STATION #1		4340- 42- 13LOM	
Billing Date	10/01/2021	Past Due After	10/18/2021
Due Upon Receipt Pay This Amount			\$114.19

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4 13646
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5900602	2	1	LIFT STATION #2			09/21/2021	10/21/2021	10/30/2021
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCRF Factor	
136788558	2745	2806	1.0	61	4340- 42- 75MDA		0.0281300	
Activity Since Last Bill		\$ Amount		Current Bill Information				\$ Amount
Previous Balance		27.99		ELECTRIC SERVICE **DO NOT PAY - PAID BY CREDIT CARD**				21.64
Payments		-27.99						
Other Adjustments		0.00						
Balance Prior to this Billing		0.00						
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				Due Upon Receipt - Pay This Amount				\$21.64
				Past Due After				11/18/2021

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5900602	2	09/21/2021	10/21/2021
Service Address		Map Location	
LIFT STATION #2		4340- 42- 75MDA	
Billing Date	10/30/2021	Past Due After	11/18/2021
Due Upon Receipt Pay This Amount			\$21.64

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Meter Number	Type	Prev Read	Pres Read	KWH Used	Map Location	
142100818	Delivered	48381	54244	5863	4340- 37- 82	
142100818	Received	96924	96924	0	PCRF Factor	
	Net			5863	0.0281300	
Activity Since Last Bill	\$ Amount	Current Bill Information				\$ Amount
Previous Balance	985.75	ELECTRIC SERVICE **DO NOT PAY - PAID BY CREDIT CARD**				663.07
Payments	-985.75					
Other Adjustments	0.00					
Balance Prior to this Billing	0.00					
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		Past Due After				11/18/2021

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Account No.	Cycle	Service From	Service To
5915402	2	09/21/2021	10/20/2021
Service Address	Map Location		
SEWER TREATMENT PLANT	4340- 37- 82		
Billing Date	10/30/2021	Past Due After	11/18/2021
Due Upon Receipt Pay This Amount		\$663.07	

Do Not Pay - Paid by Credit Card

Your payment and any returned checks
may be processed electronically.



911 Address: _____

CORIX UTILITIES TX INC
ATTN: ACCOUNTS PAYABLE
500 W MONROE STE 3600
CHICAGO IL 60661-3779

HAMILTON COUNTY ELECTRIC COOPERATIVE
PO BOX 753
HAMILTON TX 76531-0753



4607000059154020006630700066307103020210



"Owned by those we serve"

**Hamilton County
Electric Cooperative**
PO BOX 753
Hamilton, TX 76531-0753

Office hours: 8:00 a.m. to 4:30 p.m. Monday - Friday
420 N Rice Avenue, Hamilton, Texas
(254)386-3123 or (800)595-3401
Pay By Phone - (877)833-4031

13647 1 MB 0.482
CORIX UTILITIES TX INC
ATTN: ACCOUNTS PAYABLE
500 W MONROE ST STE 3600
CHICAGO IL 60661-3779

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C-36 P-43



BILLING AND SERVICE INFORMATION

- It pays to be prompt! You can avoid a late fee of 5% or \$5.00, whichever is greater, by making sure your payment is received by the due date shown on the bill. Your monthly bill may be electronically drafted from your bank account, credit card or debit card. You may also make payments using a credit card, debit card or electronic check by calling (877)833-4031 or by accessing our website at www.hamiltonelectric.coop.

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Payment locations:

Hamilton Office - 420 N Rice, Hamilton
Ft Gates Water - 103 Gateway Circle, Gatesville
Kempner Water - 11986 E Hwy 190, Kempner
Lometa City Hall - 109 W San Saba, Lometa
Brown & Wesson INS CO - 915 3rd ST. Goldthwaite

Account No.	Cycle	Rate	Service Address			Service From	Service To	Billing Date
5959202	2	4	LIFT STATION #1			09/21/2021	10/21/2021	10/30/2021
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCRF Factor	
142100819	50592	51306	1.0	714	4340- 42- 13LOM		0.0281300	
Activity Since Last Bill		\$ Amount		Current Bill Information				\$ Amount
Previous Balance		114.19		ELECTRIC SERVICE LOMETA FRANCHISE FEE **DO NOT PAY - PAID BY CREDIT CARD**				102.70 2.05
Payments		-114.19						
Other Adjustments		0.00						
Balance Prior to this Billing		0.00						
<p>The Due Date on your bill applies only to current charges. Any past due amount is subject to immediate disconnection. Failure to receive a bill does not exempt you from payment, late charges or disconnection for nonpayment.</p>								
				Due Upon Receipt - Pay This Amount				\$104.75
				Past Due After				11/18/2021

Retain this portion for your records

Please detach and return this portion with your payment

Account No.	Cycle	Service From	Service To
5959202	2	09/21/2021	10/21/2021
Service Address		Map Location	
LIFT STATION #1		4340- 42- 13LOM	
Billing Date	10/30/2021	Past Due After	11/18/2021
Due Upon Receipt Pay This Amount			\$104.75

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HAMILTON COUNTY ELECTRIC COOPERATIVE
PO BOX 753
HAMILTON TX 76531-0753



4607000059592020001047500010475103020215



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**Hamilton County
Electric Cooperative**
PO BOX 753
Hamilton, TX 76531-0753

Office hours: 8:00 a.m. to 4:30 p.m. Monday - Friday
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Pay By Phone - (877)833-4031

13688 1 MB 0.482
CORIX UTILITIES TX INC
ATTN: ACCOUNTS PAYABLE
500 W MONROE ST STE 3600
CHICAGO IL 60661-3779

4 13688
C-37 P-44

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Kempner Water - 11986 E Hwy 190, Kempner
Lometa City Hall - 109 W San Saba, Lometa
Brown & Wesson INS CO - 915 3rd ST. Goldthwaite

Account No.	Cycle	Rate	Service Address			Service From	Service To	Billing Date
5900602	2	1	LIFT STATION #2			10/21/2021	11/21/2021	12/01/2021
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCRF Factor	
136788558	2806	2942	1.0	136	4340- 42- 75MDA		0.0345300	
Activity Since Last Bill		\$ Amount		Current Bill Information				\$ Amount
Previous Balance		21.64		ELECTRIC SERVICE **DO NOT PAY - PAID BY CREDIT CARD**				30.68
Payments		-21.64						
Other Adjustments		0.00						
Balance Prior to this Billing		0.00						
<p>The Due Date on your bill applies only to current charges. Any past due amount is subject to immediate disconnection. Failure to receive a bill does not exempt you from payment, late charges or disconnection for nonpayment.</p>				Due Upon Receipt - Pay This Amount				\$30.68
				Past Due After				12/17/2021

Retain this portion for your records

Please detach and return this portion with your payment

Account No.	Cycle	Service From	Service To
5900602	2	10/21/2021	11/21/2021
Service Address		Map Location	
LIFT STATION #2		4340- 42- 75MDA	
Billing Date	12/01/2021	Past Due After	12/17/2021
Due Upon Receipt Pay This Amount			\$30.68

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500 W MONROE STE 3600
CHICAGO IL 60661-3779

HAMILTON COUNTY ELECTRIC COOPERATIVE
PO BOX 753
HAMILTON TX 76531-0753



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**Hamilton County
Electric Cooperative**
PO BOX 753
Hamilton, TX 76531-0753

Office hours: 8:00 a.m. to 4:30 p.m. Monday - Friday
420 N Rice Avenue, Hamilton, Texas
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CHICAGO IL 60661-3779

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Payment locations:

Hamilton Office - 420 N Rice, Hamilton
Ft Gates Water - 103 Gateway Circle, Gatesville
Kempner Water - 11986 E Hwy 190, Kempner
Lometa City Hall - 109 W San Saba, Lometa
Brown & Wesson INS CO - 915 3rd ST. Goldthwaite

Account No.	Cycle	Rate	Service Address	Service From	Service To	Billing Date
5915402	2	NET	SEWER TREATMENT PLANT	10/20/2021	11/21/2021	12/01/2021
Meter Number	Type	Prev Read	Pres Read	KWH Used	Map Location	
142100818	Delivered	54244	59736	5492	4340- 37- 82	
142100818	Received	96924	96924	0	PCRF Factor	
	Net			5492	0.0345300	
Activity Since Last Bill	\$ Amount	Current Bill Information				\$ Amount
Previous Balance	663.07	ELECTRIC SERVICE **DO NOT PAY - PAID BY CREDIT CARD**				657.84
Payments	-663.07					
Other Adjustments	0.00					
Balance Prior to this Billing	0.00					
The Due Date on your bill applies only to current charges. Any past due amount is subject to immediate disconnection. Failure to receive a bill does not exempt you from payment, late charges or disconnection for nonpayment.		Due Upon Receipt - Pay This Amount				\$657.84
		Past Due After				12/17/2021

Retain this portion for your records

Please detach and return this portion with your payment

Account No.	Cycle	Service From	Service To
5915402	2	10/20/2021	11/21/2021
Service Address	Map Location		
SEWER TREATMENT PLANT	4340- 37- 82		
Billing Date	12/01/2021	Past Due After	12/17/2021
Due Upon Receipt Pay This Amount		\$657.84	

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500 W MONROE STE 3600
CHICAGO IL 60661-3779

HAMILTON COUNTY ELECTRIC COOPERATIVE
PO BOX 753
HAMILTON TX 76531-0753



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**Hamilton County
Electric Cooperative**
PO BOX 753
Hamilton, TX 76531-0753

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420 N Rice Avenue, Hamilton, Texas
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Pay By Phone - (877)833-4031

13689 1 MB 0.482
CORIX UTILITIES TX INC
ATTN: ACCOUNTS PAYABLE
500 W MONROE ST STE 3600
CHICAGO IL 60661-3779

4 13689
C-37 P-44



BILLING AND SERVICE INFORMATION

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Kempner Water - 11986 E Hwy 190, Kempner
Lometa City Hall - 109 W San Saba, Lometa
Brown & Wesson INS CO - 915 3rd ST. Goldthwaite

Account No.	Cycle	Rate	Service Address			Service From	Service To	Billing Date
5959202	2	4	LIFT STATION #1			10/21/2021	11/21/2021	12/01/2021
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCRF Factor	
142100819	51306	52153	1.0	847	4340- 42- 13LOM		0.0345300	
Activity Since Last Bill		\$ Amount		Current Bill Information				\$ Amount
Previous Balance		104.75		ELECTRIC SERVICE LOMETA FRANCHISE FEE **DO NOT PAY - PAID BY CREDIT CARD**				122.60 2.45
Payments		-104.75						
Other Adjustments		0.00						
Balance Prior to this Billing		0.00						
<p>The Due Date on your bill applies only to current charges. Any past due amount is subject to immediate disconnection. Failure to receive a bill does not exempt you from payment, late charges or disconnection for nonpayment.</p>								
				Due Upon Receipt - Pay This Amount				\$125.05
				Past Due After				12/17/2021

Retain this portion for your records

Please detach and return this portion with your payment

Account No.	Cycle	Service From	Service To
5959202	2	10/21/2021	11/21/2021
Service Address		Map Location	
LIFT STATION #1		4340- 42- 13LOM	
Billing Date	12/01/2021	Past Due After	12/17/2021
Due Upon Receipt Pay This Amount			\$125.05

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500 W MONROE STE 3600
CHICAGO IL 60661-3779

HAMILTON COUNTY ELECTRIC COOPERATIVE
PO BOX 753
HAMILTON TX 76531-0753



HCEC

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**Hamilton County
Electric Cooperative**
PO BOX 753
Hamilton, TX 76531-0753

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420 N Rice Avenue, Hamilton, Texas
(254)386-3123 or (800)595-3401
Pay By Phone - (877)833-4031

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ATTN: ACCOUNTS PAYABLE
500 W MONROE ST STE 3600
CHICAGO IL 60661-3779

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Kempner Water - 11986 E Hwy 190, Kempner
Lometa City Hall - 109 W San Saba, Lometa
Brown & Wesson INS CO - 915 3rd ST. Goldthwaite

Account No.	Cycle	Rate	Service Address		Service From	Service To	Billing Date
5900602	2	1	LIFT STATION #2		11/21/2021	12/21/2021	12/31/2021
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCRF Factor
136788558	2942	3306	1.0000	364	4340- 42- 75MDA		0.0354700
Activity Since Last Bill		\$ Amount		Current Bill Information			\$ Amount
Previous Balance		30.68		ELECTRIC SERVICE			57.28
Payment		-30.68					
Other Adjustments		0.00					
Balance Prior to this Billing		0.00					
<div>The Due Date on your bill applies only to current charges. Any past due amount is subject to immediate disconnection. Failure to receive a bill does not exempt you from payment, late charges or disconnection for nonpayment.</div>				<div>**DO NOT PAY - PAID BY CREDIT CARD**</div>			
				Due Upon Receipt - Pay This Amount			\$57.28
				Past Due After			01/18/2022

Retain this portion for your records

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Account No.	Cycle	Service From	Service To
5900602	2	11/21/2021	12/21/2021
Service Address		Map Location	
LIFT STATION #2		4340- 42- 75MDA	
Billing Date	12/31/2021	Past Due After	01/18/2022
Due Upon Receipt Pay This Amount			\$57.28

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CHICAGO IL 60661-3779

HAMILTON COUNTY ELECTRIC COOPERATIVE
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HAMILTON TX 76531-0753

2



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CHICAGO IL 60661-3779

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Lometa City Hall - 109 W San Saba, Lometa
Brown & Wesson INS CO - 915 3rd ST. Goldthwaite

Account No.	Cycle	Rate	Service Address	Service From	Service To	Billing Date
5915402	2	NET	SEWER TREATMENT PLANT	11/21/2021	12/21/2021	12/31/2021
Meter Number	Type	Prev Read	Pres Read	KWH Used	Map Location	
142100818	Delivered	59736	64449	4713	4340- 37- 82	
142100818	Received	96924	96924	0	PCRF Factor	
	Net	0	0	4713	0.0354700	
Activity Since Last Bill	\$ Amount	Current Bill Information				\$ Amount
Previous Balance	657.84	ELECTRIC SERVICE **DO NOT PAY - PAID BY CREDIT CARD**				572.51
Payment	-657.84					
Other Adjustments	0.00					
Balance Prior to this Billing	0.00					
The Due Date on your bill applies only to current charges. Any past due amount is subject to immediate disconnection. Failure to receive a bill does not exempt you from payment, late charges or disconnection for nonpayment.		Due Upon Receipt - Pay This Amount				\$572.51
		Past Due After				01/18/2022

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Account No.	Cycle	Service From	Service To
5915402	2	11/21/2021	12/21/2021
Service Address	Map Location		
SEWER TREATMENT PLANT	4340- 37- 82		
Billing Date	12/31/2021	Past Due After	01/18/2022
Due Upon Receipt Pay This Amount		\$572.51	

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CHICAGO IL 60661-3779

HAMILTON COUNTY ELECTRIC COOPERATIVE
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HAMILTON TX 76531-0753

2

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CHICAGO IL 60661-3779

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Brown & Wesson INS CO - 915 3rd ST. Goldthwaite

Account No.	Cycle	Rate	Service Address		Service From	Service To	Billing Date
5959202	2	4	LIFT STATION #1		11/21/2021	12/21/2021	12/31/2021
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCRF Factor
142100819	52153	52851	1.0000	698	4340- 42- 13LOM		0.0354700
Activity Since Last Bill		\$ Amount		Current Bill Information			\$ Amount
Previous Balance		125.05		ELECTRIC SERVICE LOMETA FRANCHISE FEE			106.09 2.12
Payment		-125.05					
Other Adjustments		0.00					
Balance Prior to this Billing		0.00					
The Due Date on your bill applies only to current charges. Any past due amount is subject to immediate disconnection. Failure to receive a bill does not exempt you from payment, late charges or disconnection for nonpayment.				**DO NOT PAY - PAID BY CREDIT CARD**			
				Due Upon Receipt - Pay This Amount			\$108.21
				Past Due After			01/18/2022

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Account No.	Cycle	Service From	Service To
5959202	2	11/21/2021	12/21/2021
Service Address		Map Location	
LIFT STATION #1		4340- 42- 13LOM	
Billing Date	12/31/2021	Past Due After	01/18/2022
Due Upon Receipt Pay This Amount			\$108.21

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2



4607000059592020001082100010821123120217

HCEC

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www.hamiltonelectric.coop

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- If service is interrupted, check your fuses and circuit breakers, both inside your home and your main breaker located outside your home. If the problem persists, please contact HCEC immediately! Please give name, address and meter number as it's listed on this bill.

Payment locations:

Hamilton Office - 112 E Gentry St, Hamilton
Ft Gates Water - 103 Gateway Circle, Gatesville
Kempner Water - 11986 E Hwy 190, Kempner
Lometa City Hall - 109 W San Saba, Lometa
Head Insurance - 1006 4th St., Goldthwaite

Account No.	Cycle	Rate	Service Address		Service From	Service To	Billing Date
5900602	2	1	LIFT STATION #2		12/21/2021	01/21/2022	02/01/2022
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCRF Factor
136788558	3306	3375	1.0000	69	4340- 42- 75MDA		0.0365000
Activity Since Last Bill		\$ Amount		Current Bill Information			\$ Amount
Previous Balance		57.28		ELECTRIC SERVICE			23.09
Payment		-57.28					
Other Adjustments		0.00					
Balance Prior to this Billing		0.00					
<div>The Due Date on your bill applies only to current charges. Any past due amount is subject to immediate disconnection. Failure to receive a bill does not exempt you from payment, late charges or disconnection for nonpayment.</div>				<div>**DO NOT PAY - PAID BY CREDIT CARD**</div>			
				Due Upon Receipt - Pay This Amount			\$23.09
				Past Due After			02/18/2022

Retain this portion for your records

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Account No.	Cycle	Service From	Service To
5900602	2	12/21/2021	01/21/2022
Service Address		Map Location	
LIFT STATION #2		4340- 42- 75MDA	
Billing Date	02/01/2022	Past Due After	02/18/2022
Due Upon Receipt Pay This Amount			\$23.09

Do Not Pay - Paid by Credit Card

911 Address: _____

CORIX UTILITIES TX INC
ATTN: ACCOUNTS PAYABLE
500 W MONROE STE 3600
CHICAGO IL 60661-3779

HAMILTON COUNTY ELECTRIC COOPERATIVE
PO BOX 753
HAMILTON TX 76531-0753

2



4607000059006020000230900002309020120220

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Hamilton, TX 76531-0753

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(254)386-3123 or (800)595-3401
Pay By Phone - (877)833-4031
www.hamiltonelectric.coop

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500 W MONROE ST STE 3600
CHICAGO IL 60661-3779

BILLING AND SERVICE INFORMATION

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Kempner Water - 11986 E Hwy 190, Kempner
Lometa City Hall - 109 W San Saba, Lometa
Head Insurance - 1006 4th St., Goldthwaite

Account No.	Cycle	Rate	Service Address	Service From	Service To	Billing Date
5915402	2	NET	SEWER TREATMENT PLANT	12/21/2021	01/21/2022	02/01/2022
Meter Number	Type	Prev Read	Pres Read	KWH Used	Map Location	
142100818	Delivered	64449	70562	6113	4340- 37- 82	
142100818	Received	96924	96924	0	PCRF Factor	
	Net	0	0	6113	0.0365000	
Activity Since Last Bill		\$ Amount	Current Bill Information			\$ Amount
Previous Balance		572.51	ELECTRIC SERVICE			741.44
Payment		-572.51				
Other Adjustments		0.00				
Balance Prior to this Billing		0.00				
<div>The Due Date on your bill applies only to current charges. Any past due amount is subject to immediate disconnection. Failure to receive a bill does not exempt you from payment, late charges or disconnection for nonpayment.</div>			<div>**DO NOT PAY - PAID BY CREDIT CARD**</div>			
			Due Upon Receipt - Pay This Amount			\$741.44
			Past Due After			02/18/2022

Retain this portion for your records

Please detach and return this portion with your payment

Account No.	Cycle	Service From	Service To
5915402	2	12/21/2021	01/21/2022
Service Address		Map Location	
SEWER TREATMENT PLANT		4340- 37- 82	
Billing Date	02/01/2022	Past Due After	02/18/2022
Due Upon Receipt Pay This Amount			\$741.44

Do Not Pay - Paid by Credit Card

911 Address: _____

CORIX UTILITIES TX INC
ATTN: ACCOUNTS PAYABLE
500 W MONROE STE 3600
CHICAGO IL 60661-3779

HAMILTON COUNTY ELECTRIC COOPERATIVE
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500 W MONROE ST STE 3600
CHICAGO IL 60661-3779

BILLING AND SERVICE INFORMATION

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Kempner Water - 11986 E Hwy 190, Kempner
Lometa City Hall - 109 W San Saba, Lometa
Head Insurance - 1006 4th St., Goldthwaite

Account No.	Cycle	Rate	Service Address		Service From	Service To	Billing Date
5959202	2	4	LIFT STATION #1		12/21/2021	01/21/2022	02/01/2022
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCRF Factor
142100819	52851	53637	1.0000	786	4340- 42- 13LOM		0.0365000
Activity Since Last Bill		\$ Amount		Current Bill Information			\$ Amount
Previous Balance		108.21		ELECTRIC SERVICE LOMETA FRANCHISE FEE			117.12 2.34
Payment		-108.21					
Other Adjustments		0.00					
Balance Prior to this Billing		0.00					
The Due Date on your bill applies only to current charges. Any past due amount is subject to immediate disconnection. Failure to receive a bill does not exempt you from payment, late charges or disconnection for nonpayment.				**DO NOT PAY - PAID BY CREDIT CARD**			
				Due Upon Receipt - Pay This Amount			\$119.46
				Past Due After			02/18/2022

Retain this portion for your records

Please detach and return this portion with your payment

Account No.	Cycle	Service From	Service To
5959202	2	12/21/2021	01/21/2022
Service Address		Map Location	
LIFT STATION #1		4340- 42- 13LOM	
Billing Date	02/01/2022	Past Due After	02/18/2022
Due Upon Receipt Pay This Amount		\$119.46	

Do Not Pay - Paid by Credit Card

911 Address: _____

CORIX UTILITIES TX INC
ATTN: ACCOUNTS PAYABLE
500 W MONROE STE 3600
CHICAGO IL 60661-3779

HAMILTON COUNTY ELECTRIC COOPERATIVE
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HAMILTON TX 76531-0753

2



4607000059592020001194600011946020120222

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CORIX UTILITIES TX INC
729400 CORIX GROUP OF COMPANIES
PO BOX 182682 MS # 11
COLUMBUS OH 43218-2682

1 1

BILLING AND SERVICE INFORMATION

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Kempner Water - 11986 E Hwy 190, Kempner
Lometa City Hall - 109 W San Saba, Lometa
Head Insurance - 1006 4th St., Goldthwaite

Account No.	Cycle	Rate	Service Address		Service From	Service To	Billing Date
5900602	2	1	LIFT STATION #2		01/21/2022	02/21/2022	03/02/2022
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCR Factor
136788558	3375	3420	1.0000	45	4340- 42- 75MDA		0.0300000
Activity Since Last Bill		\$ Amount		Current Bill Information			\$ Amount
Previous Balance		23.09		ELECTRIC SERVICE			19.98
Payment		-23.09					
Other Adjustments		0.00					
Balance Prior to this Billing		0.00					
<div>The Due Date on your bill applies only to current charges. Any past due amount is subject to immediate disconnection. Failure to receive a bill does not exempt you from payment, late charges or disconnection for nonpayment.</div>				<div>** BANK DRAFT - DO NOT PAY **</div>			
				Due Upon Receipt - Pay This Amount			\$19.98
				Past Due After			03/18/2022

Retain this portion for your records

Please detach and return this portion with your payment

Account No.	Cycle	Service From	Service To
5900602	2	01/21/2022	02/21/2022
Service Address		Map Location	
LIFT STATION #2		4340- 42- 75MDA	
Billing Date	03/02/2022	Past Due After	03/18/2022
Due Upon Receipt Pay This Amount			\$19.98

911 Address: _____

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COLUMBUS OH 43218-2682

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Account No.	Cycle	Rate	Service Address	Service From	Service To	Billing Date
5915402	2	NET	SEWER TREATMENT PLANT	01/21/2022	02/21/2022	03/02/2022
Meter Number	Type	Prev Read	Pres Read	KWH Used	Map Location	
142100818	Delivered	70562	77013	6451	4340- 37- 82	
142100818	Received	96924	96924	0	PCRF Factor	
	Net	0	0	6451	0.0300000	
Activity Since Last Bill	\$ Amount	Current Bill Information				\$ Amount
Previous Balance	741.44	ELECTRIC SERVICE ** BANK DRAFT - DO NOT PAY **				739.13
Payment	-741.44					
Other Adjustments	0.00					
Balance Prior to this Billing	0.00					
The Due Date on your bill applies only to current charges. Any past due amount is subject to immediate disconnection. Failure to receive a bill does not exempt you from payment, late charges or disconnection for nonpayment.		Due Upon Receipt - Pay This Amount				\$739.13
		Past Due After				03/18/2022

Retain this portion for your records

Please detach and return this portion with your payment

Account No.	Cycle	Service From	Service To
5915402	2	01/21/2022	02/21/2022
Service Address	Map Location		
SEWER TREATMENT PLANT	4340- 37- 82		
Billing Date	03/02/2022	Past Due After	03/18/2022
Due Upon Receipt Pay This Amount		\$739.13	

911 Address: _____

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Account No.	Cycle	Rate	Service Address		Service From	Service To	Billing Date
5959202	2	4	LIFT STATION #1		01/21/2022	02/21/2022	03/02/2022
Meter Number	Prev Read	Pres Read	Mult	KWH Used	Map Location		PCR Factor
142100819	53637	54459	1.0000	822	4340- 42- 13LOM		0.0300000
Activity Since Last Bill		\$ Amount		Current Bill Information			\$ Amount
Previous Balance		119.46		ELECTRIC SERVICE LOMETA FRANCHISE FEE			116.00 2.32
Payment		-119.46					
Other Adjustments		0.00					
Balance Prior to this Billing		0.00					
The Due Date on your bill applies only to current charges. Any past due amount is subject to immediate disconnection. Failure to receive a bill does not exempt you from payment, late charges or disconnection for nonpayment.				** BANK DRAFT - DO NOT PAY **			
				Due Upon Receipt - Pay This Amount			\$118.32
				Past Due After			03/18/2022

Retain this portion for your records

Please detach and return this portion with your payment

Account No.	Cycle	Service From	Service To
5959202	2	01/21/2022	02/21/2022
Service Address		Map Location	
LIFT STATION #1		4340- 42- 13LOM	
Billing Date	03/02/2022	Past Due After	03/18/2022
Due Upon Receipt Pay This Amount		\$118.32	

911 Address: _____

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DOCKET NO. 53815
CORIX UTILITIES (TEXAS) INC.'S RESPONSE TO
COMMISSION STAFF'S AMENDED FIRST REQUEST FOR INFORMATION

STAFF 1-14

Reference Schedule II-3 Operating Expenses of the application for the Lometa Wastewater Rate Region. Please provide invoices, receipts, or work orders to support the region's stated test year expense of \$41,183 for NARUC Account 731-736-Contract Work. Please sum the totals to yield the stated test year expense.

RESPONSE:

Pursuant to an agreement with Commission Staff, this request does not seek invoices for expenses incurred by affiliates and for other costs that have been allocated from state and regional cost centers to Corix but which are not readily available. See Staff RFI 1-14 Attachment for excel file titled "Staff RFI 1-14 Attachment_GL Support" that shows the GL transactions totaling the \$41,183 expense. Invoices and receipts for items direct charged to Lometa Wastewater in Accounts 731-736 are located in Confidential Staff RFI 1-14 Attachment. Other expenses in this category are corporate allocations ("CAM" costs), which are described in the testimony of Justin Kersey and the CAM manual attached to Mr. Kersey's testimony as Confidential Exhibit JPK-JPK-7 and expenses allocated from Corix Texas' state/regional cost centers.

Please note that excel files will be provided in native format.

Preparer: Mary Blincoe, Senior Financial Analyst; Phil Drennan, Director of Financial Planning and Analysis
Sponsor: Phil Drennan, Director of Financial Planning and Analysis; Justin Kersey, President of the Prairie Path Water Company and Community Utilities of Indiana

DOCKET NO. 53815
CORIX UTILITIES (TEXAS) INC.'S RESPONSE TO
COMMISSION STAFF'S AMENDED FIRST REQUEST FOR INFORMATION

STAFF 1-15

Reference Schedule II-3 Operating Expenses of the application for the Lometa Wastewater Rate Region. Please provide invoices, receipts, or work orders to support the region's stated test year expense of \$1,161 for NARUC Account 767-Regulatory Expense (Other). Please sum the totals to yield the stated test year expense.

RESPONSE:

See Staff RFI 1-15 Attachment for excel file titled "Staff RFI 1-15 Attachment_GL support" that shows the GL transactions totaling the \$1,161 expense. There were four items that were charged to regulatory expense during the test year. The invoices and calculations for those 4 items are attached in Staff RFI 1-15 Attachment. The second spreadsheet titled "Staff RFI 1-15 Attachment_Summary" shows how those 4 items were allocated between water and wastewater and to the Lometa Wastewater Rate Region. Please note that 2 of those 4 items were adjusted out of the test year expenses as explained in the testimony of Justin Kersey and as shown on the supporting excel file titled "Staff RFI 1-15 Attachment_Summary", leaving only \$33 in the adjusted test year expense.

Please note that excel files will be provided in native format.

Preparer: Mary Blincoe, Senior Financial Analyst; Phil Drennan, Director of Financial Planning and Analysis
Sponsor: Phil Drennan, Director of Financial Planning and Analysis; Justin Kersey, President of the Prairie Path Water Company and Community Utilities of Indiana

25	*Monthly Surcharge is calculated by taking Total Rate Case Expense, multiplied by either the Water Weight or Wastewater Weight, divided by the respective Count and divided by 36 months.
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COFFIN RENNER LLP

P. O. Box 13366
Austin, TX 78711
512-879-0900

Federal I.D. No. 27-0934461

Docket No. 53815
Staff RFI 1-15 Attachment
Lometa WW Reg Exp
Page 2 of 57

Corix Utilities (Texas) Inc.
Attn: Allen Wilt
Utilities, Inc.
2335 Sanders Road
Northbrook, IL 60062
RE: Water Rate Case

Statement Date: May 14, 2021
Statement No. 5949
Client No. 658.002
Page: 1

Fees

			Rate	Hours	
04/01/2021	EDJ	Work on settlement and draft settlement documents	430.00	2.30	989.00
04/02/2021	EDJ	Draft settlement documents; analyze issues re Summit Springs	430.00	1.60	688.00
	CGA	Draft proposed order	300.00	2.50	750.00
04/05/2021	EDJ	Analyze issues re settlement; draft settlement documents	430.00	1.60	688.00
	CGA	Draft proposed order	300.00	3.00	900.00
04/06/2021	EDJ	Analyze and research issues re settlement tariffs and future minor tariff change	430.00	0.80	344.00
	CGA	Draft proposed order	300.00	3.00	900.00
04/07/2021	EDJ	Draft settlement documents	430.00	1.00	430.00
	SNT	Review/revise proposed order	175.00	1.30	227.50
	ERA	Research re Secretary of State registration filing number for proposed order	215.00	0.50	107.50
	CGA	Draft proposed order	300.00	3.50	1,050.00
04/08/2021	EDJ	Draft settlement documents	430.00	0.80	344.00
	CGA	Draft proposed order	300.00	5.00	1,500.00
04/09/2021	EDJ	Work on settlement; draft settlement documents; TC w/J. Kersey re CIAC	430.00	1.90	817.00
	CGA	Draft proposed order	300.00	6.10	1,830.00
04/12/2021	EDJ	Analyze issues re settlement; draft settlement documents	430.00	1.80	774.00
	AMC	Research Rule 11 agreement for Summit Springs issues	595.00	0.80	476.00
	CGA	Draft proposed order	300.00	4.20	1,260.00
04/13/2021	EDJ	Analyze issues re settlement; draft proposed order and tariffs	430.00	4.40	1,892.00
	ERA	Review/analyze evidentiary record for proposed order	215.00	1.20	258.00
	AMC	Review/revise Rule 11 agreement for Summit Springs	595.00	0.30	178.50
	CGA	Draft proposed order	300.00	1.20	360.00
04/14/2021	EDJ	Analyze issues re settlement; draft proposed order and tariffs	430.00	3.20	1,376.00

Corix Utilities (Texas) Inc.
Account No. 658.002
RE: Water Rate Case

Statement Date: 05/14/2021
Statement No. 5949
Page No. 2

			Rate	Hours	
04/21/2021	EDJ	Review settlement testimony and analyze issues re consolidation and tariffs	430.00	1.90	817.00
	EDJ	Analyze issues re settlement w/Summit Springs Alliance	430.00	1.20	516.00
04/22/2021	EDJ	Review settlement testimony and analyze issues re consolidation and tariffs	430.00	0.90	387.00
	SNT	Review/analyze proposed order	175.00	1.00	175.00
04/23/2021	EDJ	Review settlement testimony and analyze issues re consolidation and tariffs	430.00	0.90	387.00
04/28/2021	EDJ	Analyze issues re settlement and tariffs	430.00	0.70	301.00
04/29/2021	EDJ	Analyze issues re settlement and tariffs	430.00	0.60	258.00
04/30/2021	EDJ	Analyze issues re settlement and tariffs	430.00	0.60	258.00
		For Current Services Rendered		59.80	21,238.50

Recapitulation

Timekeeper	Hours	Rate	Total
Ann M. Coffin	1.10	\$595.00	\$654.50
Emma Azarani	1.70	215.00	365.50
Evan D. Johnson	26.20	430.00	11,266.00
Glenn Adkins	28.50	300.00	8,550.00
Stephanie N. Tanner	2.30	175.00	402.50

Expenses

04/07/2021	Online Legal Research - Sec. of State search	1.03
04/12/2021	Online Legal Research - G. Adkins	14.13
	Total Expenses	15.16
	Total Current Work	21,253.66
	Balance Due	<u>\$21,253.66</u>

Your transaction is complete. Thank you for using TCEQ ePay.

Note: It may take up to 3 working days for this electronic payment to be processed and be reflected in the TCEQ ePay system. Print this receipt and the vouchers for your records. An email receipt has also been sent.

Transaction Information

Trace Number:582EA000478473

Date:02/22/2022 02:57 PM

Payment Method:CC - Authorization 0000021331

ePay Actor:ROBERT HICKS

Actor Email:bobby.hicks@corixtexas.com

IP:75.50.238.229

TCEQ Amount:\$300.00

Texas.gov Price:\$307.01*

* This service is provided by Texas.gov, the official website of Texas. The price of this service includes funds that support the ongoing operations and enhancements of Texas.gov, which is provided by a third party in partnership with the State.

Payment Contact Information

Name:ROBERT HICKS

Company:CORIX UTILITIES

Address:1812 CENTRE CREEK DR STE 100, AUSTIN, TX 78754

Phone:512-541-9070

Cart Items

Click on the voucher number to see the voucher details.

Voucher	Fee Description	AR Number	Amount
<u>563107</u>	TIER II - NON-MANUFACTURING	0643257Q	\$300.00
	TCEQ Amount:		\$300.00

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 1
Generated On: February 22, 2022

Facility Name: TOW VILLAGE WATER SYSTEM

FACILITY IDENTIFICATION:

TOW VILLAGE WATER SYSTEM
Dept: N/A
Physical Address: 115 GARRETT TRL, TOW, TX 78672-4947
Mailing Address: PO BOX 140164, AUSTIN, TX 78714-0164
Geographic Location:
County: LLANO
Latitude: 30.905614
Longitude: -98.454684
Fire Department: Tow VFD
LEPC: Llano LEPC

[x] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:

Dun & Bradstreet: 79168047
NAICS: 221310 (Water Supply and Irrigation Systems)

Is the facility manned? [x] Manned [] Unmanned
Maximum No. of Occupants: 2

REGULATORY INFORMATION:

Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [x] Yes [] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [] Yes [x] No

CONTACT INFORMATION:

Darrin Barker

Organization: CORIX UTILITIES TEXAS INC.
Title: PRESIDENT
Contact Type(s): OWNER / OPERATOR
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Work Phone: 512-306-4007 24-Hour: 325-205-2980
Email: darrin.barker@corixtexas.com

Tommy Collier

Organization: CORIX UTILITIES TEXAS
Title: AREA MANAGER
Contact Type(s): EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR
Address: 7104 W FM 1431, GRANITE SHOALS, TX, 78654
Phones: 24-Hour: 830-265-8186 Emergency: 830-265-8186
Email: Tommy.Collier@corixtexas.com

Robert Hicks

Organization: CORIX UTILITIES
Title: COMPLIANCE ANALYST/TRAINER
Contact Type(s): TIER II INFORMATION CONTACT
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Cell Phone: 512-541-9079
Email: Bobby.Hicks@corixtexas.com

Gloria Broussard

Organization: CORIX UTILITIES TEXAS
Title: COMPLIANCE MANAGER

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: TOW VILLAGE WATER SYSTEM

Contact Type(s): BILLING CONTACT, EMERGENCY CONTACT, TIER II INFORMATION CONTACT

Address: PO BOX 140164, AUSTIN, TX, 78714

Phones: 24-Hour: 512-663-6819 Cell Phone: 512-663-6819 Work Phone: 512-306-4001

Email: gloria.broussard@corixtexas.com

CHEMICAL DESCRIPTIONS:

CHEMICAL NAME: CHLORINE GAS

CAS #: 7782-50-5 EHS: YES

- ☐ Identical to previous year
☐ Trade Secret
☒ Pure ☐ Mixture
☐ Solid ☐ Liquid ☒ Gas

PHYSICAL HAZARDS:

- | | |
|---|--|
| <input type="checkbox"/> Combustible Dust | <input checked="" type="checkbox"/> Corrosive to metal |
| <input type="checkbox"/> Explosive | <input type="checkbox"/> Flammable (gases, aerosols, liquids, or solids) |
| <input checked="" type="checkbox"/> Gas under pressure (compressed gas) | <input type="checkbox"/> In contact with water emits flammable gas |
| <input type="checkbox"/> Organic peroxide | <input checked="" type="checkbox"/> Oxidizer (liquid, solid or gas) |
| <input type="checkbox"/> Pyrophoric Gas | <input type="checkbox"/> Pyrophoric (liquid or solid) |
| <input type="checkbox"/> Self-heating | <input type="checkbox"/> Self-reactive |

HEALTH HAZARDS:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Acute toxicity (any route of exposure) | <input type="checkbox"/> Aspiration hazard |
| <input type="checkbox"/> Carcinogenicity | <input type="checkbox"/> Germ cell mutagenicity |
| <input type="checkbox"/> Reproductive toxicity | <input checked="" type="checkbox"/> Respiratory or skin sensitization |
| <input checked="" type="checkbox"/> Serious eye damage or eye irritation | <input type="checkbox"/> Simple Asphyxiant |
| <input checked="" type="checkbox"/> Skin corrosion or irritation | <input type="checkbox"/> Specific target organ toxicity(single or repeated exposure) |

☐ Hazard not otherwise classified.

INVENTORY:

- ☐ Below Reporting Thresholds
Max Daily Amt code: 02 (100 - 499 pounds)
Avg Daily Amt code: 02 (100 - 499 pounds)
Avg Max Amt quantity in largest container: 150 pounds
No. days on-site: 365

STORAGE LOCATIONS

- ☐ Confidential
Container Type: Cylinder
Pressure: Greater Than Ambient Pressure Temp: Ambient Temperature
Location: Located in the chlorine gas storage building.
Amount: N/A pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

FACILITY STATE FIELDS:

Texas requests the following:

- ☐ Initial ☐ Updated ☒ Annual
TXT2 Number: 73373
TCEQ Regulated Entity Number (RN): RN100824770
TCEQ Customer Number (CN): CN604520213
Facility was Purchased or First Time Reporting Hazardous Substances: NO

Tier II Emergency and Hazardous Chemical Inventory
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Facility Name: TOW VILLAGE WATER SYSTEM

Effective Date: N/A

Facility was Sold, Closed or No Longer Stores Hazardous Substances: NO

Inactive Date: N/A

STATE / LOCAL FEES: \$300

☒ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

ATTACHMENTS

1.pdf

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3
and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Robert Hicks, Compliance Analyst/Trainer

Name and official title of owner/operator

OR owner/operator's authorized representative

Signature

02/22/2022

Date Signed

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: CAMP SWIFT WASTEWATER TREATMENT SYSTEM

FACILITY IDENTIFICATION:

CAMP SWIFT WASTEWATER TREATMENT SYSTEM
Dept: N/A
Physical Address: 101 COOL WATER DR, BASTROP, TX 78602-6786
Mailing Address: PO BOX 140164, AUSTIN, TX 78714-0164
Geographic Location:
County: BASTROP
Latitude: 30.17232
Longitude: -97.298438
Fire Department: Bastrop Fire Department
LEPC: Bastrop LEPC

[x] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:

Dun & Bradstreet: 79168047
NAICS: 221320 (Sewage Treatment Facilities)

Is the facility manned? [x] Manned [] Unmanned
Maximum No. of Occupants: 2

REGULATORY INFORMATION:

Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [x] Yes [] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [] Yes [x] No

CONTACT INFORMATION:

Darrin Barker

Organization: CORIX UTILITIES TEXAS INC.
Title: PRESIDENT
Contact Type(s): OWNER / OPERATOR
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Work Phone: 512-306-4007 24-Hour: 325-205-2980
Email: darrin.barker@corixtexas.com

Robert Hicks

Organization: CORIX UTILITIES
Title: COMPLIANCE ANALYST/TRAINER
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Phones: Cell Phone: 512-541-9079
Email: Bobby.Hicks@corixtexas.com

Henry Ochoa

Organization: CORIX UTILITIES
Title: AREA MANAGER
Contact Type(s): EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR
Address: 101 COOL WATER DR, BASTROP, TX, 78602
Phones: 24-Hour: 512-718-6734 Fax: 512-303-1306
Email: Bobby.Hicks@corixtexas.com

Gloria Broussard

Organization: CORIX UTILITIES TEXAS
Title: COMPLIANCE MANAGER

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: CAMP SWIFT WASTEWATER TREATMENT SYSTEM

Contact Type(s): BILLING CONTACT, EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR, TIER II
INFORMATION CONTACT

Address: PO BOX 140164, AUSTIN, TX, 78714

Phones: 24-Hour: 512-663-6819 Cell Phone: 512-663-6819 Work Phone: 512-306-4001

Email: gloria.broussard@corixtexas.com

CHEMICAL DESCRIPTIONS:

CHEMICAL NAME: **ALUMINUM SULFATE**

CAS #: 10043-01-3 EHS: NO

☒ Identical to previous year

☐ Trade Secret

☒ Pure ☐ Mixture

☐ Solid ☒ Liquid ☐ Gas

PHYSICAL HAZARDS:

- ☐ Combustible Dust
- ☐ Explosive
- ☐ Gas under pressure (compressed gas)
- ☐ Organic peroxide
- ☐ Pyrophoric Gas
- ☐ Self-heating

- ☒ Corrosive to metal
- ☐ Flammable (gases, aerosols, liquids, or solids)
- ☐ In contact with water emits flammable gas
- ☐ Oxidizer (liquid, solid or gas)
- ☐ Pyrophoric (liquid or solid)
- ☐ Self-reactive

HEALTH HAZARDS:

- ☐ Acute toxicity (any route of exposure)
- ☐ Carcinogenicity
- ☐ Reproductive toxicity
- ☒ Serious eye damage or eye irritation
- ☒ Skin corrosion or irritation

- ☐ Aspiration hazard
- ☐ Germ cell mutagenicity
- ☐ Respiratory or skin sensitization
- ☐ Simple Asphyxiant
- ☐ Specific target organ toxicity(single or repeated exposure)

☐ Hazard not otherwise classified.

INVENTORY:

☐ Below Reporting Thresholds

Max Daily Amt code: 04 (1,000 - 4,999 pounds)

Avg Daily Amt code: 04 (1,000 - 4,999 pounds)

Avg Max Amt quantity in largest container: 2000 pounds

No. days on-site: 365

STORAGE LOCATIONS

☐ Confidential

Container Type: Above Ground Tank

Pressure: Ambient Pressure Temp: Ambient Temperature

Location: Inside concrete secondary containment in the plant grounds.

Amount: N/A pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

FACILITY STATE FIELDS:

Texas requests the following:

☐ Initial ☐ Updated ☒ Annual

TXT2 Number: 73373

TCEQ Regulated Entity Number (RN): RN101018240

TCEQ Customer Number (CN): CN604520213

Tier II Emergency and Hazardous Chemical Inventory
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Facility Name: CAMP SWIFT WASTEWATER TREATMENT SYSTEM

Facility was Purchased or First Time Reporting Hazardous Substances: NO

Effective Date: N/A

Facility was Sold, Closed or No Longer Stores Hazardous Substances: NO

Inactive Date: N/A

STATE / LOCAL FEES: \$300

☐ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

ATTACHMENTS

N/A

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3
and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Robert Hicks, Compliance Analyst/Trainer

Name and official title of owner/operator

OR owner/operator's authorized representative

Signature

02/22/2022

Date Signed

Tier II Emergency and Hazardous Chemical Inventory
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Facility Name: PARADISE POINT WATER SYSTEM

FACILITY IDENTIFICATION:

PARADISE POINT WATER SYSTEM
Dept: N/A
Physical Address: 100 WILLOW, TOW, TX 78672-5186
Mailing Address: PO BOX 140164, AUSTIN, TX 78714-0164
Geographic Location:
County: LLANO
Latitude: 30.858284
Longitude: -98.431706
Fire Department: TOW VFD
LEPC: Llano LEPC

[x] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:

Dun & Bradstreet: 79168047
NAICS: 221310 (Water Supply and Irrigation Systems)

Is the facility manned? [x] Manned [] Unmanned
Maximum No. of Occupants: 2

REGULATORY INFORMATION:

Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [x] Yes [] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [] Yes [x] No

CONTACT INFORMATION:

Darrin Barker

Organization: CORIX UTILITIES TEXAS INC.
Title: PRESIDENT
Contact Type(s): OWNER / OPERATOR
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Work Phone: 512-306-4007 24-Hour: 325-205-2980
Email: darrin.barker@corixtexas.com

Tommy Collier

Organization: CORIX UTILITIES TEXAS
Title: AREA MANAGER
Contact Type(s): EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR
Address: 7104 W FM 1431, GRANITE SHOALS, TX, 78654
Phones: 24-Hour: 830-265-8186 Emergency: 830-265-8186
Email: Tommy.Collier@corixtexas.com

Robert Hicks

Organization: CORIX UTILITIES
Title: COMPLIANCE ANALYST/TRAINER
Contact Type(s): TIER II INFORMATION CONTACT
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Cell Phone: 512-541-9079
Email: Bobby.Hicks@corixtexas.com

Gloria Broussard

Organization: CORIX UTILITIES TEXAS
Title: COMPLIANCE MANAGER

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: PARADISE POINT WATER SYSTEM

Contact Type(s): BILLING CONTACT, EMERGENCY CONTACT, TIER II INFORMATION CONTACT

Address: PO BOX 140164, AUSTIN, TX, 78714

Phones: 24-Hour: 512-663-6819 Cell Phone: 512-663-6819 Work Phone: 512-306-4001

Email: gloria.broussard@corixtexas.com

CHEMICAL DESCRIPTIONS:

CHEMICAL NAME: **Chlorine (gas)**

CAS #: 7782-50-5 EHS:

- ☐ Identical to previous year
☐ Trade Secret
☒ Pure ☐ Mixture
☐ Solid ☐ Liquid ☒ Gas

PHYSICAL HAZARDS:

- | | |
|---|--|
| <input type="checkbox"/> Combustible Dust | <input checked="" type="checkbox"/> Corrosive to metal |
| <input type="checkbox"/> Explosive | <input type="checkbox"/> Flammable (gases, aerosols, liquids, or solids) |
| <input checked="" type="checkbox"/> Gas under pressure (compressed gas) | <input type="checkbox"/> In contact with water emits flammable gas |
| <input type="checkbox"/> Organic peroxide | <input checked="" type="checkbox"/> Oxidizer (liquid, solid or gas) |
| <input type="checkbox"/> Pyrophoric Gas | <input type="checkbox"/> Pyrophoric (liquid or solid) |
| <input type="checkbox"/> Self-heating | <input type="checkbox"/> Self-reactive |

HEALTH HAZARDS:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Acute toxicity (any route of exposure) | <input type="checkbox"/> Aspiration hazard |
| <input type="checkbox"/> Carcinogenicity | <input type="checkbox"/> Germ cell mutagenicity |
| <input type="checkbox"/> Reproductive toxicity | <input checked="" type="checkbox"/> Respiratory or skin sensitization |
| <input checked="" type="checkbox"/> Serious eye damage or eye irritation | <input type="checkbox"/> Simple Asphyxiant |
| <input checked="" type="checkbox"/> Skin corrosion or irritation | <input type="checkbox"/> Specific target organ toxicity(single or repeated exposure) |

☐ Hazard not otherwise classified.

INVENTORY:

- ☐ Below Reporting Thresholds
Max Daily Amt code: 03 (500 - 999 pounds)
Avg Daily Amt code: 02 (100 - 499 pounds)
Avg Max Amt quantity in largest container: 150 pounds
No. days on-site: 365

STORAGE LOCATIONS

- ☐ Confidential
Container Type: Cylinder
Pressure: Greater Than Ambient Pressure Temp: Ambient Temperature
Location: In chlorine building at plant site
Amount: 450 pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

FACILITY STATE FIELDS:

Texas requests the following:

- ☐ Initial ☐ Updated ☒ Annual
TXT2 Number: 73373
TCEQ Regulated Entity Number (RN): RN101193704
TCEQ Customer Number (CN): CN604520213
Facility was Purchased or First Time Reporting Hazardous Substances: NO

Tier II Emergency and Hazardous Chemical Inventory
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Facility Name: PARADISE POINT WATER SYSTEM

Effective Date: N/A

Facility was Sold, Closed or No Longer Stores Hazardous Substances: NO

Inactive Date: N/A

STATE / LOCAL FEES: \$300

☒ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

ATTACHMENTS

1.pdf

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3 and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Robert Hicks, Compliance Analyst/Trainer

Name and official title of owner/operator

OR owner/operator's authorized representative

Signature

02/22/2022

Date Signed

Tier II Emergency and Hazardous Chemical Inventory
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Facility Name: SPICEWOOD BEACH WATER SYSTEM

FACILITY IDENTIFICATION:

SPICEWOOD BEACH WATER SYSTEM
Dept: N/A
Physical Address: 120 LINDA DR, SPICEWOOD, TX 78669-4032
Mailing Address: PO BOX 140164, AUSTIN, TX 78714-0164
Geographic Location:
County: BURNET
Latitude: 30.517676
Longitude: -98.14824
Fire Department: Spicewood VFD
LEPC: Burnet LEPC

[x] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:

Dun & Bradstreet: 79168047
NAICS: 221310 (Water Supply and Irrigation Systems)

Is the facility manned? [x] Manned [] Unmanned
Maximum No. of Occupants: 2

REGULATORY INFORMATION:

Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [x] Yes [] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [] Yes [x] No

CONTACT INFORMATION:

Darrin Barker

Organization: CORIX UTILITIES TEXAS INC.
Title: PRESIDENT
Contact Type(s): OWNER / OPERATOR
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Email: darrin.barker@corixtexas.com

Tommy Collier

Organization: CORIX UTILITIES TEXAS
Title: AREA MANAGER
Contact Type(s): EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR
Address: 7104 W FM 1431, GRANITE SHOALS, TX, 78654
Phones: 24-Hour: 830-265-8186 Emergency: 830-265-8186
Email: Tommy.Collier@corixtexas.com

Robert Hicks

Organization: CORIX UTILITIES
Title: COMPLIANCE ANALYST/TRAINER
Contact Type(s): TIER II INFORMATION CONTACT
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Cell Phone: 512-541-9079
Email: Bobby.Hicks@corixtexas.com

Gloria Broussard

Organization: CORIX UTILITIES TEXAS
Title: COMPLIANCE MANAGER

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: SPICEWOOD BEACH WATER SYSTEM

Contact Type(s): BILLING CONTACT, EMERGENCY CONTACT, TIER II INFORMATION CONTACT

Address: PO BOX 140164, AUSTIN, TX, 78714

Phones: 24-Hour: 512-663-6819 Cell Phone: 512-663-6819 Work Phone: 512-306-4001

Email: gloria.broussard@corixtexas.com

CHEMICAL DESCRIPTIONS:

CHEMICAL NAME: **Chlorine (gas)**

CAS #: 7782-50-5 EHS:

☒ Identical to previous year
☐ Trade Secret
☒ Pure ☐ Mixture
☐ Solid ☐ Liquid ☒ Gas

PHYSICAL HAZARDS:

<input type="checkbox"/> Combustible Dust	<input checked="" type="checkbox"/> Corrosive to metal
<input type="checkbox"/> Explosive	<input type="checkbox"/> Flammable (gases, aerosols, liquids, or solids)
<input checked="" type="checkbox"/> Gas under pressure (compressed gas)	<input type="checkbox"/> In contact with water emits flammable gas
<input type="checkbox"/> Organic peroxide	<input checked="" type="checkbox"/> Oxidizer (liquid, solid or gas)
<input type="checkbox"/> Pyrophoric Gas	<input type="checkbox"/> Pyrophoric (liquid or solid)
<input type="checkbox"/> Self-heating	<input type="checkbox"/> Self-reactive

HEALTH HAZARDS:

<input checked="" type="checkbox"/> Acute toxicity (any route of exposure)	<input type="checkbox"/> Aspiration hazard
<input type="checkbox"/> Carcinogenicity	<input type="checkbox"/> Germ cell mutagenicity
<input type="checkbox"/> Reproductive toxicity	<input checked="" type="checkbox"/> Respiratory or skin sensitization
<input checked="" type="checkbox"/> Serious eye damage or eye irritation	<input type="checkbox"/> Simple Asphyxiant
<input checked="" type="checkbox"/> Skin corrosion or irritation	<input type="checkbox"/> Specific target organ toxicity(single or repeated exposure)

☐ Hazard not otherwise classified.

INVENTORY:

☐ Below Reporting Thresholds
Max Daily Amt code: 04 (1,000 - 4,999 pounds)
Avg Daily Amt code: 03 (500 - 999 pounds)
Avg Max Amt quantity in largest container: 150 pounds
No. days on-site: 365

STORAGE LOCATIONS

☐ Confidential
Container Type: Cylinder
Pressure: Greater Than Ambient Pressure Temp: Ambient Temperature
Location: Chlorine building in center of facility
Amount: 1500 pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

FACILITY STATE FIELDS:

Texas requests the following:
☐ Initial ☐ Updated ☒ Annual
TXT2 Number: 73373
TCEQ Regulated Entity Number (RN): RN101199321
TCEQ Customer Number (CN): CN604520213
Facility was Purchased or First Time Reporting Hazardous Substances: NO

Tier II Emergency and Hazardous Chemical Inventory
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Facility Name: SPICEWOOD BEACH WATER SYSTEM

Effective Date: N/A

Facility was Sold, Closed or No Longer Stores Hazardous Substances: NO

Inactive Date: N/A

STATE / LOCAL FEES: \$300

☒ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

ATTACHMENTS

1.pdf

Certification (Read and sign after completing all sections)

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Robert Hicks, Compliance Analyst/Trainer

Name and official title of owner/operator

OR owner/operator's authorized representative

Signature

02/22/2022

Date Signed

Tier II Emergency and Hazardous Chemical Inventory
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Facility Name: LAKE BUCHANAN WATER SYSTEM

FACILITY IDENTIFICATION:

LAKE BUCHANAN WATER SYSTEM
Dept: N/A
Physical Address: 601 BUCHANAN PLANT RD, BUCHANAN DAM, TX 78609-2628
Mailing Address: PO BOX 140164, AUSTIN, TX 78714-0164
Geographic Location:
County: LLANO
Latitude: 30.748622
Longitude: -98.417684
Fire Department: Buchanan VFD
LEPC: Llano LEPC

[x] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:

Dun & Bradstreet: 79168047
NAICS: 221310 (Water Supply and Irrigation Systems)

Is the facility manned? [x] Manned [] Unmanned
Maximum No. of Occupants: 2

REGULATORY INFORMATION:

Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [x] Yes [] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [] Yes [x] No

CONTACT INFORMATION:

Darrin Barker

Organization: CORIX UTILITIES TEXAS INC.
Title: PRESIDENT
Contact Type(s): OWNER / OPERATOR
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Work Phone: 512-306-4007 24-Hour: 325-205-2980
Email: darrin.barker@corixtexas.com

Tommy Collier

Organization: CORIX UTILITIES TEXAS
Title: AREA MANAGER
Contact Type(s): EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR
Address: 7104 W FM 1431, GRANITE SHOALS, TX, 78654
Phones: 24-Hour: 830-265-8186 Emergency: 830-265-8186
Email: Tommy.Collier@corixtexas.com

Robert Hicks

Organization: CORIX UTILITIES
Title: COMPLIANCE ANALYST/TRAINER
Contact Type(s): TIER II INFORMATION CONTACT
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Cell Phone: 512-541-9079
Email: Bobby.Hicks@corixtexas.com

Gloria Broussard

Organization: CORIX UTILITIES TEXAS
Title: COMPLIANCE MANAGER

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: LAKE BUCHANAN WATER SYSTEM

Contact Type(s): BILLING CONTACT, EMERGENCY CONTACT, TIER II INFORMATION CONTACT

Address: PO BOX 140164, AUSTIN, TX, 78714

Phones: 24-Hour: 512-663-6819 Cell Phone: 512-663-6819 Work Phone: 512-306-4001

Email: gloria.broussard@corixtexas.com

CHEMICAL DESCRIPTIONS:

CHEMICAL NAME: **CHLORINE GAS**

CAS #: 7782-50-5 EHS: YES

☒ Identical to previous year

☐ Trade Secret

☒ Pure ☐ Mixture

☐ Solid ☐ Liquid ☒ Gas

PHYSICAL HAZARDS:

☐ Combustible Dust

☐ Explosive

☒ Gas under pressure (compressed gas)

☐ Organic peroxide

☐ Pyrophoric Gas

☐ Self-heating

☒ Corrosive to metal

☐ Flammable (gases, aerosols, liquids, or solids)

☐ In contact with water emits flammable gas

☒ Oxidizer (liquid, solid or gas)

☐ Pyrophoric (liquid or solid)

☐ Self-reactive

HEALTH HAZARDS:

☒ Acute toxicity (any route of exposure)

☐ Carcinogenicity

☐ Reproductive toxicity

☒ Serious eye damage or eye irritation

☒ Skin corrosion or irritation

☐ Aspiration hazard

☐ Germ cell mutagenicity

☒ Respiratory or skin sensitization

☐ Simple Asphyxiant

☐ Specific target organ toxicity(single or repeated exposure)

☐ Hazard not otherwise classified.

INVENTORY:

☐ Below Reporting Thresholds

Max Daily Amt code: 04 (1,000 - 4,999 pounds)

Avg Daily Amt code: 03 (500 - 999 pounds)

Avg Max Amt quantity in largest container: 150 pounds

No. days on-site: 365

STORAGE LOCATIONS

☐ Confidential

Container Type: Cylinder

Pressure: Greater Than Ambient Pressure Temp: Ambient Temperature

Location: Located inside of a fiberglass chemical building.

Amount: 1200 pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

FACILITY STATE FIELDS:

Texas requests the following:

☐ Initial ☐ Updated ☒ Annual

TXT2 Number: 73373

TCEQ Regulated Entity Number (RN): RN101202778

TCEQ Customer Number (CN): CN604520213

Facility was Purchased or First Time Reporting Hazardous Substances: NO

Tier II Emergency and Hazardous Chemical Inventory
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Facility Name: LAKE BUCHANAN WATER SYSTEM

Effective Date: N/A

Facility was Sold, Closed or No Longer Stores Hazardous Substances: NO

Inactive Date: N/A

STATE / LOCAL FEES: \$300

☐ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

ATTACHMENTS

N/A

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3
and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Robert Hicks, Compliance Analyst/Trainer

Name and official title of owner/operator

OR owner/operator's authorized representative

Signature

02/22/2022

Date Signed

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: MITCHELL COUNTY WATER SYSTEM

FACILITY IDENTIFICATION:

MITCHELL COUNTY WATER SYSTEM
Dept: N/A
Physical Address: 1702 FM 2836, COLORADO CITY, TX 79512-7655
Mailing Address: PO BOX 140164, AUSTIN, TX 78714-0164
Geographic Location:
County: MITCHELL
Latitude: 32.359855
Longitude: -100.953507
Fire Department: Colorado City FD
LEPC: Mitchell LEPC

[x] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:

Dun & Bradstreet: 79168047
NAICS: 221310 (Water Supply and Irrigation Systems)

Is the facility manned? [x] Manned [] Unmanned
Maximum No. of Occupants: 2

REGULATORY INFORMATION:

Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [x] Yes [] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [] Yes [x] No

CONTACT INFORMATION:

Darrin Barker

Organization: CORIX UTILITIES TEXAS INC.
Title: PRESIDENT
Contact Type(s): OWNER / OPERATOR
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Work Phone: 512-306-4007 24-Hour: 325-205-2980
Email: darrin.barker@corixtexas.com

Robert Hicks

Organization: CORIX UTILITIES
Title: COMPLIANCE ANALYST/TRAINER
Contact Type(s): TIER II INFORMATION CONTACT
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Cell Phone: 512-541-9079
Email: Bobby.Hicks@corixtexas.com

Matt Molter

Organization: CORIX UTILITIES TEXAS
Title: AREA MANAGER
Contact Type(s): EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR, SAFETY MANAGER
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: 24-Hour: 512-525-6659 Cell Phone: 512-525-6659
Email: Matt.Molter@corixtexas.com

Gloria Broussard

Organization: CORIX UTILITIES TEXAS
Title: COMPLIANCE MANAGER

Tier II Emergency and Hazardous Chemical Inventory
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Facility Name: MITCHELL COUNTY WATER SYSTEM

Contact Type(s): BILLING CONTACT, EMERGENCY CONTACT, TIER II INFORMATION CONTACT

Address: PO BOX 140164, AUSTIN, TX, 78714

Phones: 24-Hour: 512-663-6819 Cell Phone: 512-663-6819 Work Phone: 512-306-4001

Email: gloria.broussard@corixtexas.com

CHEMICAL DESCRIPTIONS:

CHEMICAL NAME: CHLORINE GAS

CAS #: 7782-50-5 EHS: YES

☒ Identical to previous year

☐ Trade Secret

☒ Pure ☐ Mixture

☐ Solid ☐ Liquid ☒ Gas

PHYSICAL HAZARDS:

- ☐ Combustible Dust
- ☐ Explosive
- ☐ Gas under pressure (compressed gas)
- ☐ Organic peroxide
- ☐ Pyrophoric Gas
- ☐ Self-heating

- ☒ Corrosive to metal
- ☐ Flammable (gases, aerosols, liquids, or solids)
- ☐ In contact with water emits flammable gas
- ☒ Oxidizer (liquid, solid or gas)
- ☐ Pyrophoric (liquid or solid)
- ☐ Self-reactive

HEALTH HAZARDS:

- ☒ Acute toxicity (any route of exposure)
- ☐ Carcinogenicity
- ☐ Reproductive toxicity
- ☒ Serious eye damage or eye irritation
- ☒ Skin corrosion or irritation

- ☐ Aspiration hazard
- ☐ Germ cell mutagenicity
- ☒ Respiratory or skin sensitization
- ☐ Simple Asphyxiant
- ☐ Specific target organ toxicity(single or repeated exposure)

☐ Hazard not otherwise classified.

INVENTORY:

☐ Below Reporting Thresholds

Max Daily Amt code: 02 (100 - 499 pounds)

Avg Daily Amt code: 02 (100 - 499 pounds)

Avg Max Amt quantity in largest container: 150 pounds

No. days on-site: 365

STORAGE LOCATIONS

☐ Confidential

Container Type: Cylinder

Pressure: Greater Than Ambient Pressure Temp: Ambient Temperature

Location: Storage building located in well field.

Amount: N/A pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

FACILITY STATE FIELDS:

Texas requests the following:

☐ Initial ☐ Updated ☒ Annual

TXT2 Number: 73373

TCEQ Regulated Entity Number (RN): RN101204055

TCEQ Customer Number (CN): CN604520213

Facility was Purchased or First Time Reporting Hazardous Substances: NO

Tier II Emergency and Hazardous Chemical Inventory
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Generated On: February 22, 2022

Facility Name: MITCHELL COUNTY WATER SYSTEM

Effective Date: N/A

Facility was Sold, Closed or No Longer Stores Hazardous Substances: NO

Inactive Date: N/A

STATE / LOCAL FEES: \$300

☐ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

ATTACHMENTS

N/A

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3
and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Robert Hicks, Compliance Analyst/Trainer

Name and official title of owner/operator

OR owner/operator's authorized representative

Signature

02/22/2022

Date Signed

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: LOMETA WATER PLANT

FACILITY IDENTIFICATION:

LOMETA WATER PLANT
Dept: N/A
Physical Address: 1062 COUNTY ROAD 2509, LOMETA, TX 76853-3653
Mailing Address: PO BOX 140164, AUSTIN, TX 78714-0164
Geographic Location:
County: LAMPASAS
Latitude: 31.225647
Longitude: -98.418403
Fire Department: Lometa VFD
LEPC: Lampasas LEPC

[x] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:

Dun & Bradstreet: 79168047
NAICS: 221310 (Water Supply and Irrigation Systems)

Is the facility manned? [x] Manned [] Unmanned
Maximum No. of Occupants: 4

REGULATORY INFORMATION:

Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [x] Yes [] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [] Yes [x] No

CONTACT INFORMATION:

Darrin Barker

Organization: CORIX UTILITIES TEXAS INC.
Title: PRESIDENT
Contact Type(s): OWNER / OPERATOR
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Work Phone: 512-306-4007 24-Hour: 325-205-2980
Email: darrin.barker@corixtexas.com

Robert Hicks

Organization: CORIX UTILITIES
Title: COMPLIANCE ANALYST/TRAINER
Contact Type(s): TIER II INFORMATION CONTACT
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Cell Phone: 512-541-9079
Email: Bobby.Hicks@corixtexas.com

Matt Molter

Organization: CORIX UTILITIES TEXAS
Title: AREA MANAGER
Contact Type(s): EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: 24-Hour: 512-525-6659 Cell Phone: 512-525-6659
Email: Matt.Molter@corixtexas.com

Gloria Broussard

Organization: CORIX UTILITIES TEXAS
Title: COMPLIANCE MANAGER

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 2
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Facility Name: LOMETA WATER PLANT

Contact Type(s): BILLING CONTACT, EMERGENCY CONTACT, TIER II INFORMATION CONTACT

Address: PO BOX 140164, AUSTIN, TX, 78714

Phones: 24-Hour: 512-663-6819 Cell Phone: 512-663-6819 Work Phone: 512-306-4001

Email: gloria.broussard@corixtexas.com

CHEMICAL DESCRIPTIONS:

CHEMICAL NAME: **CHLORINE GAS**

CAS #: 7782-50-5 EHS: YES

☒ Identical to previous year

☐ Trade Secret

☒ Pure ☐ Mixture

☐ Solid ☐ Liquid ☒ Gas

PHYSICAL HAZARDS:

☐ Combustible Dust

☐ Explosive

☒ Gas under pressure (compressed gas)

☐ Organic peroxide

☐ Pyrophoric Gas

☐ Self-heating

☒ Corrosive to metal

☐ Flammable (gases, aerosols, liquids, or solids)

☐ In contact with water emits flammable gas

☒ Oxidizer (liquid, solid or gas)

☐ Pyrophoric (liquid or solid)

☐ Self-reactive

HEALTH HAZARDS:

☒ Acute toxicity (any route of exposure)

☐ Carcinogenicity

☐ Reproductive toxicity

☒ Serious eye damage or eye irritation

☒ Skin corrosion or irritation

☐ Aspiration hazard

☐ Germ cell mutagenicity

☒ Respiratory or skin sensitization

☐ Simple Asphyxiant

☐ Specific target organ toxicity(single or repeated exposure)

☐ Hazard not otherwise classified.

INVENTORY:

☐ Below Reporting Thresholds

Max Daily Amt code: 04 (1,000 - 4,999 pounds)

Avg Daily Amt code: 04 (1,000 - 4,999 pounds)

Avg Max Amt quantity in largest container: 150 pounds

No. days on-site: 365

STORAGE LOCATIONS

☐ Confidential

Container Type: Cylinder

Pressure: Greater Than Ambient Pressure Temp: Ambient Temperature

Location: Chemical building next to office

Amount: 2250 pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

CHEMICAL NAME: **Aluminum Chlorhydrate Solution**

CAS #: 12042-91-0 EHS:

☒ Identical to previous year

☐ Trade Secret

☒ Pure ☐ Mixture

☐ Solid ☒ Liquid ☐ Gas

Tier II Emergency and Hazardous Chemical Inventory
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Facility Name: LOMETA WATER PLANT

MIXTURE COMPONENTS:

MIXTURE COMPONENTS:

☐ EHS, CAS: 12042-91-0, Component: Aluminum chlorhydrate, 50% Wt, Max Amt Code:

PHYSICAL HAZARDS:

- | | |
|--|--|
| <input type="checkbox"/> Combustible Dust | <input checked="" type="checkbox"/> Corrosive to metal |
| <input type="checkbox"/> Explosive | <input type="checkbox"/> Flammable (gases, aerosols, liquids, or solids) |
| <input type="checkbox"/> Gas under pressure (compressed gas) | <input type="checkbox"/> In contact with water emits flammable gas |
| <input type="checkbox"/> Organic peroxide | <input type="checkbox"/> Oxidizer (liquid, solid or gas) |
| <input type="checkbox"/> Pyrophoric Gas | <input type="checkbox"/> Pyrophoric (liquid or solid) |
| <input type="checkbox"/> Self-heating | <input type="checkbox"/> Self-reactive |

HEALTH HAZARDS:

- | | |
|--|--|
| <input type="checkbox"/> Acute toxicity (any route of exposure) | <input type="checkbox"/> Aspiration hazard |
| <input type="checkbox"/> Carcinogenicity | <input type="checkbox"/> Germ cell mutagenicity |
| <input type="checkbox"/> Reproductive toxicity | <input checked="" type="checkbox"/> Respiratory or skin sensitization |
| <input checked="" type="checkbox"/> Serious eye damage or eye irritation | <input type="checkbox"/> Simple Asphyxiant |
| <input checked="" type="checkbox"/> Skin corrosion or irritation | <input type="checkbox"/> Specific target organ toxicity(single or repeated exposure) |

☐ Hazard not otherwise classified.

INVENTORY:

- ☐ Below Reporting Thresholds
Max Daily Amt code: 07 (25,000 - 49,999 pounds)
Avg Daily Amt code: 06 (10,000 - 24,999 pounds)
Avg Max Amt quantity in largest container: 44000 pounds
No. days on-site: 365

STORAGE LOCATIONS

- ☐ Confidential
Container Type: Above Ground Tank
Pressure: Ambient Pressure Temp: Ambient Temperature
Location: Bulk storage tank at chemical building
Amount: 44000 pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

FACILITY STATE FIELDS:

Texas requests the following:

☐ Initial ☐ Updated ☒ Annual

TXT2 Number: 73373

TCEQ Regulated Entity Number (RN): RN101211126

TCEQ Customer Number (CN): CN604520213

Facility was Purchased or First Time Reporting Hazardous Substances: NO

Effective Date: N/A

Facility was Sold, Closed or No Longer Stores Hazardous Substances: NO

Inactive Date: N/A

STATE / LOCAL FEES: \$300

- ☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: LOMETA WATER PLANT

ATTACHMENTS

N/A

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 4
and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Robert Hicks, Compliance Analyst/Trainer

Name and official title of owner/operator

OR owner/operator's authorized representative

Signature

02/22/2022

Date Signed

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: MATAGORDA DUNES WATER SYSTEM

FACILITY IDENTIFICATION:

MATAGORDA DUNES WATER SYSTEM
Dept: N/A
Physical Address: 513 BEACHFRONT, MATAGORDA DUNES SUBDIVISION, TX 77457
Mailing Address: P.O. BPX 140164, AUSTIN, TX 78714
Geographic Location:
County: MATAGORDA
Latitude: 28.601365
Longitude: -95.97005
Fire Department: Matagorda VFD
LEPC: Matagorda LEPC

[x] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:

Dun & Bradstreet: 79168047
NAICS: 221310 (Water Supply and Irrigation Systems)

Is the facility manned? [x] Manned [] Unmanned
Maximum No. of Occupants: 1

REGULATORY INFORMATION:

Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [x] Yes [] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [] Yes [x] No

CONTACT INFORMATION:

Darrin Barker

Organization: CORIX UTILITIES TEXAS INC.
Title: PRESIDENT
Contact Type(s): OWNER / OPERATOR
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Work Phone: 512-306-4007 24-Hour: 325-205-2980
Email: darrin.barker@corixtexas.com

Robert Hicks

Organization: CORIX UTILITIES
Title: COMPLIANCE ANALYST/TRAINER
Contact Type(s): TIER II INFORMATION CONTACT
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Cell Phone: 512-541-9079
Email: Bobby.Hicks@corixtexas.com

Henry Ochoa

Organization: CORIX UTILITIES
Title: AREA MANAGER
Contact Type(s): EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR
Address: 101 COOL WATER DR, BASTROP, TX, 78602
Phones: 24-Hour: 512-718-6734 Fax: 512-303-1306
Email: henry.ochoa@corixtexas.com

Gloria Broussard

Organization: CORIX UTILITIES TEXAS
Title: COMPLIANCE MANAGER

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: MATAGORDA DUNES WATER SYSTEM

Contact Type(s): BILLING CONTACT, EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR, TIER II
INFORMATION CONTACT

Address: PO BOX 140164, AUSTIN, TX, 78714

Phones: 24-Hour: 512-663-6819 Cell Phone: 512-663-6819 Work Phone: 512-306-4001

Email: gloria.broussard@corixtexas.com

CHEMICAL DESCRIPTIONS:

CHEMICAL NAME: **Chlorine (gas)**

CAS #: 7782-50-5 EHS:

☒ Identical to previous year
☐ Trade Secret
☒ Pure ☐ Mixture
☐ Solid ☐ Liquid ☒ Gas

PHYSICAL HAZARDS:

<input type="checkbox"/> Combustible Dust	<input checked="" type="checkbox"/> Corrosive to metal
<input type="checkbox"/> Explosive	<input type="checkbox"/> Flammable (gases, aerosols, liquids, or solids)
<input checked="" type="checkbox"/> Gas under pressure (compressed gas)	<input type="checkbox"/> In contact with water emits flammable gas
<input type="checkbox"/> Organic peroxide	<input checked="" type="checkbox"/> Oxidizer (liquid, solid or gas)
<input type="checkbox"/> Pyrophoric Gas	<input type="checkbox"/> Pyrophoric (liquid or solid)
<input type="checkbox"/> Self-heating	<input type="checkbox"/> Self-reactive

HEALTH HAZARDS:

<input checked="" type="checkbox"/> Acute toxicity (any route of exposure)	<input type="checkbox"/> Aspiration hazard
<input type="checkbox"/> Carcinogenicity	<input type="checkbox"/> Germ cell mutagenicity
<input type="checkbox"/> Reproductive toxicity	<input checked="" type="checkbox"/> Respiratory or skin sensitization
<input checked="" type="checkbox"/> Serious eye damage or eye irritation	<input type="checkbox"/> Simple Asphyxiant
<input checked="" type="checkbox"/> Skin corrosion or irritation	<input type="checkbox"/> Specific target organ toxicity(single or repeated exposure)

☐ Hazard not otherwise classified.

INVENTORY:

☐ Below Reporting Thresholds
Max Daily Amt code: 03 (500 - 999 pounds)
Avg Daily Amt code: 02 (100 - 499 pounds)
Avg Max Amt quantity in largest container: 150 pounds
No. days on-site: 365

STORAGE LOCATIONS

☐ Confidential
Container Type: Cylinder
Pressure: Greater Than Ambient Pressure Temp: Ambient Temperature
Location: Located in the storage room attached to the facility building.
Amount: 600 pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

FACILITY STATE FIELDS:

Texas requests the following:
☐ Initial ☐ Updated ☒ Annual
TXT2 Number: 73373
TCEQ Regulated Entity Number (RN): RN101240745
TCEQ Customer Number (CN): CN604520213

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: MATAGORDA DUNES WATER SYSTEM

Facility was Purchased or First Time Reporting Hazardous Substances: NO

Effective Date: N/A

Facility was Sold, Closed or No Longer Stores Hazardous Substances: NO

Inactive Date: N/A

STATE / LOCAL FEES: \$300

☒ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

ATTACHMENTS

Matagorda Dunes Chlorine Gas Room.pdf

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3
and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Robert Hicks, Compliance Analyst/Trainer

Name and official title of owner/operator

OR owner/operator's authorized representative

Signature

02/22/2022

Date Signed

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: SMITHWICK MILLS WATER SYSTEM

FACILITY IDENTIFICATION:

SMITHWICK MILLS WATER SYSTEM
Dept: N/A
Physical Address: 1455 COUNTY ROAD 344, MARBLE FALLS, TX 78654
Mailing Address: PO BOX 140164, AUSTIN, TX 78714-0164
Geographic Location:
County: BURNET
Latitude: 30.542412
Longitude: -98.165913
Fire Department: Marble Falls Area VFD
LEPC: Burnet LEPC

[x] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:

Dun & Bradstreet: 79168047
NAICS: 221310 (Water Supply and Irrigation Systems)

Is the facility manned? [x] Manned [] Unmanned
Maximum No. of Occupants: 2

REGULATORY INFORMATION:

Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [x] Yes [] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [] Yes [x] No

CONTACT INFORMATION:

Darrin Barker

Organization: CORIX UTILITIES TEXAS INC.
Title: PRESIDENT
Contact Type(s): OWNER / OPERATOR
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Work Phone: 512-306-4007 24-Hour: 325-205-2980
Email: darrin.barker@corixtexas.com

Tommy Collier

Organization: CORIX UTILITIES TEXAS
Title: AREA MANAGER
Contact Type(s): EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR
Address: 7104 W FM 1431, GRANITE SHOALS, TX, 78654
Phones: 24-Hour: 830-265-8186 Emergency: 830-265-8186
Email: Tommy.Collier@corixtexas.com

Robert Hicks

Organization: CORIX UTILITIES
Title: COMPLIANCE ANALYST/TRAINER
Contact Type(s): TIER II INFORMATION CONTACT
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Cell Phone: 512-541-9079
Email: Bobby.Hicks@corixtexas.com

Gloria Broussard

Organization: CORIX UTILITIES TEXAS
Title: COMPLIANCE MANAGER

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 2
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Facility Name: SMITHWICK MILLS WATER SYSTEM

Contact Type(s): BILLING CONTACT, EMERGENCY CONTACT, TIER II INFORMATION CONTACT

Address: PO BOX 140164, AUSTIN, TX, 78714

Phones: 24-Hour: 512-663-6819 Cell Phone: 512-663-6819 Work Phone: 512-306-4001

Email: gloria.broussard@corixtexas.com

CHEMICAL DESCRIPTIONS:

CHEMICAL NAME: **CHLORINE GAS**

CAS #: 7782-50-5 EHS: YES

☒ Identical to previous year

☐ Trade Secret

☒ Pure ☐ Mixture

☐ Solid ☐ Liquid ☒ Gas

PHYSICAL HAZARDS:

☐ Combustible Dust

☐ Explosive

☒ Gas under pressure (compressed gas)

☐ Organic peroxide

☐ Pyrophoric Gas

☐ Self-heating

☒ Corrosive to metal

☐ Flammable (gases, aerosols, liquids, or solids)

☐ In contact with water emits flammable gas

☒ Oxidizer (liquid, solid or gas)

☐ Pyrophoric (liquid or solid)

☐ Self-reactive

HEALTH HAZARDS:

☒ Acute toxicity (any route of exposure)

☐ Carcinogenicity

☐ Reproductive toxicity

☒ Serious eye damage or eye irritation

☒ Skin corrosion or irritation

☐ Aspiration hazard

☐ Germ cell mutagenicity

☒ Respiratory or skin sensitization

☐ Simple Asphyxiant

☐ Specific target organ toxicity(single or repeated exposure)

☐ Hazard not otherwise classified.

INVENTORY:

☐ Below Reporting Thresholds

Max Daily Amt code: 03 (500 - 999 pounds)

Avg Daily Amt code: 02 (100 - 499 pounds)

Avg Max Amt quantity in largest container: 150 pounds

No. days on-site: 365

STORAGE LOCATIONS

☐ Confidential

Container Type: Cylinder

Pressure: Greater Than Ambient Pressure Temp: Ambient Temperature

Location: Located in chlorine gas building in middle of plant.

Amount: N/A pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

FACILITY STATE FIELDS:

Texas requests the following:

☐ Initial ☐ Updated ☒ Annual

TXT2 Number: 73373

TCEQ Regulated Entity Number (RN): RN101250256

TCEQ Customer Number (CN): CN604520213

Facility was Purchased or First Time Reporting Hazardous Substances: NO

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: SMITHWICK MILLS WATER SYSTEM

Effective Date: N/A

Facility was Sold, Closed or No Longer Stores Hazardous Substances: NO

Inactive Date: N/A

STATE / LOCAL FEES: \$300

☒ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

ATTACHMENTS

1.pdf

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3
and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Robert Hicks, Compliance Analyst/Trainer

Name and official title of owner/operator

OR owner/operator's authorized representative

Signature

02/22/2022

Date Signed

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: NORTHEAST WASHINGTON COUNTY PLANT 1

FACILITY IDENTIFICATION:

NORTHEAST WASHINGTON COUNTY PLANT 1
Dept: N/A
Physical Address: 7250 LONE STAR ROAD, BRENHAM, TX 77833
Mailing Address: PO BOX 140164, AUSTIN, TX 78714-0164
Geographic Location:
County: WASHINGTON
Latitude: 30.340971
Longitude: -96.228881
Fire Department: Washington VFD
LEPC: Washington LEPC

[x] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:

Dun & Bradstreet: 79168047
NAICS: 221310 (Water Supply and Irrigation Systems)

Is the facility manned? [x] Manned [] Unmanned
Maximum No. of Occupants: 2

REGULATORY INFORMATION:

Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [x] Yes [] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [] Yes [x] No

CONTACT INFORMATION:

Darrin Barker

Organization: CORIX UTILITIES TEXAS INC.
Title: PRESIDENT
Contact Type(s): OWNER / OPERATOR
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Work Phone: 512-306-4007 24-Hour: 325-205-2980
Email: darrin.barker@corixtexas.com

Robert Hicks

Organization: CORIX UTILITIES
Title: COMPLIANCE ANALYST/TRAINER
Contact Type(s): TIER II INFORMATION CONTACT
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Cell Phone: 512-541-9079
Email: Bobby.Hicks@corixtexas.com

Henry Ochoa

Organization: CORIX UTILITIES
Title: AREA MANAGER
Contact Type(s): EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR
Address: 101 COOL WATER DR, BASTROP, TX, 78602
Phones: 24-Hour: 512-718-6734 Fax: 512-303-1306
Email: henry.ochoa@corixtexas.com

Gloria Broussard

Organization: CORIX UTILITIES TEXAS
Title: COMPLIANCE MANAGER

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 2
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Facility Name: NORTHEAST WASHINGTON COUNTY PLANT 1

Contact Type(s): BILLING CONTACT, EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR, TIER II
INFORMATION CONTACT

Address: PO BOX 140164, AUSTIN, TX, 78714

Phones: 24-Hour: 512-663-6819 Cell Phone: 512-663-6819 Work Phone: 512-306-4001

Email: gloria.broussard@corixtexas.com

CHEMICAL DESCRIPTIONS:

CHEMICAL NAME: CHLORINE GAS

CAS #: 7782-50-5 EHS: YES

☒ Identical to previous year

☐ Trade Secret

☒ Pure ☐ Mixture

☐ Solid ☐ Liquid ☒ Gas

PHYSICAL HAZARDS:

☐ Combustible Dust

☐ Explosive

☒ Gas under pressure (compressed gas)

☐ Organic peroxide

☐ Pyrophoric Gas

☐ Self-heating

☒ Corrosive to metal

☐ Flammable (gases, aerosols, liquids, or solids)

☐ In contact with water emits flammable gas

☒ Oxidizer (liquid, solid or gas)

☐ Pyrophoric (liquid or solid)

☐ Self-reactive

HEALTH HAZARDS:

☒ Acute toxicity (any route of exposure)

☐ Carcinogenicity

☐ Reproductive toxicity

☒ Serious eye damage or eye irritation

☒ Skin corrosion or irritation

☐ Aspiration hazard

☐ Germ cell mutagenicity

☒ Respiratory or skin sensitization

☐ Simple Asphyxiant

☐ Specific target organ toxicity(single or repeated exposure)

☐ Hazard not otherwise classified.

INVENTORY:

☐ Below Reporting Thresholds

Max Daily Amt code: 03 (500 - 999 pounds)

Avg Daily Amt code: 02 (100 - 499 pounds)

Avg Max Amt quantity in largest container: 150 pounds

No. days on-site: 365

STORAGE LOCATIONS

☐ Confidential

Container Type: Cylinder

Pressure: Greater Than Ambient Pressure Temp: Ambient Temperature

Location: Chlorine building in center of plant

Amount: 750 pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

FACILITY STATE FIELDS:

Texas requests the following:

☐ Initial ☐ Updated ☒ Annual

TXT2 Number: 73373

TCEQ Regulated Entity Number (RN): RN101266138

TCEQ Customer Number (CN): CN604520213

Tier II Emergency and Hazardous Chemical Inventory
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Facility Name: NORTHEAST WASHINGTON COUNTY PLANT 1

Facility was Purchased or First Time Reporting Hazardous Substances: NO

Effective Date: N/A

Facility was Sold, Closed or No Longer Stores Hazardous Substances: NO

Inactive Date: N/A

STATE / LOCAL FEES: \$300

☒ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

ATTACHMENTS

Chlorine gas building.pdf

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3
and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Robert Hicks, Compliance Analyst/Trainer

Name and official title of owner/operator

OR owner/operator's authorized representative

Signature

02/22/2022

Date Signed

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: RIDGE HARBOR WATER PLANT

FACILITY IDENTIFICATION:

RIDGE HARBOR WATER PLANT
Dept: N/A
Physical Address: 1530 HARBOR DRIVE, SPICEWOOD, TX 78669
Mailing Address: PO BOX 140164, AUSTIN, TX 78714-0164
Geographic Location:
County: BURNET
Latitude: 30.485511
Longitude: -98.10769
Fire Department: Spicewood VFD
LEPC: Burnet LEPC

[x] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:

Dun & Bradstreet: 79168047
NAICS: 221310 (Water Supply and Irrigation Systems)

Is the facility manned? [x] Manned [] Unmanned
Maximum No. of Occupants: 2

REGULATORY INFORMATION:

Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [x] Yes [] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [] Yes [x] No

CONTACT INFORMATION:

Darrin Barker

Organization: CORIX UTILITIES TEXAS INC.
Title: PRESIDENT
Contact Type(s): OWNER / OPERATOR
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Work Phone: 512-306-4007 24-Hour: 325-205-2980
Email: darrin.barker@corixtexas.com

Tommy Collier

Organization: CORIX UTILITIES TEXAS
Title: AREA MANAGER
Contact Type(s): EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR
Address: 7104 W FM 1431, GRANITE SHOALS, TX, 78654
Phones: 24-Hour: 830-265-8186 Emergency: 830-265-8186
Email: Tommy.Collier@corixtexas.com

Robert Hicks

Organization: CORIX UTILITIES
Title: COMPLIANCE ANALYST/TRAINER
Contact Type(s): TIER II INFORMATION CONTACT
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Cell Phone: 512-541-9079
Email: Bobby.Hicks@corixtexas.com

Gloria Broussard

Organization: CORIX UTILITIES TEXAS
Title: COMPLIANCE MANAGER

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 2
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Facility Name: RIDGE HARBOR WATER PLANT

Contact Type(s): BILLING CONTACT, EMERGENCY CONTACT, TIER II INFORMATION CONTACT

Address: PO BOX 140164, AUSTIN, TX, 78714

Phones: 24-Hour: 512-663-6819 Cell Phone: 512-663-6819 Work Phone: 512-306-4001

Email: gloria.broussard@corixtexas.com

CHEMICAL DESCRIPTIONS:

CHEMICAL NAME: Aluminum Sulfate, Liquid

CAS #: 10043-01-3 EHS:

☒ Identical to previous year

☐ Trade Secret

☒ Pure ☐ Mixture

☐ Solid ☒ Liquid ☐ Gas

MIXTURE COMPONENTS:

MIXTURE COMPONENTS:

☐ EHS, CAS: 10043-01-3, Component: ALUMINUM SULFATE, 48% Wt, Max Amt Code:

PHYSICAL HAZARDS:

- | | |
|--|--|
| <input type="checkbox"/> Combustible Dust | <input type="checkbox"/> Corrosive to metal |
| <input type="checkbox"/> Explosive | <input type="checkbox"/> Flammable (gases, aerosols, liquids, or solids) |
| <input type="checkbox"/> Gas under pressure (compressed gas) | <input type="checkbox"/> In contact with water emits flammable gas |
| <input type="checkbox"/> Organic peroxide | <input type="checkbox"/> Oxidizer (liquid, solid or gas) |
| <input type="checkbox"/> Pyrophoric Gas | <input type="checkbox"/> Pyrophoric (liquid or solid) |
| <input type="checkbox"/> Self-heating | <input type="checkbox"/> Self-reactive |

HEALTH HAZARDS:

- | | |
|--|--|
| <input type="checkbox"/> Acute toxicity (any route of exposure) | <input type="checkbox"/> Aspiration hazard |
| <input type="checkbox"/> Carcinogenicity | <input type="checkbox"/> Germ cell mutagenicity |
| <input type="checkbox"/> Reproductive toxicity | <input checked="" type="checkbox"/> Respiratory or skin sensitization |
| <input checked="" type="checkbox"/> Serious eye damage or eye irritation | <input type="checkbox"/> Simple Asphyxiant |
| <input checked="" type="checkbox"/> Skin corrosion or irritation | <input type="checkbox"/> Specific target organ toxicity(single or repeated exposure) |

☐ Hazard not otherwise classified.

INVENTORY:

☐ Below Reporting Thresholds

Max Daily Amt code: 06 (10,000 - 24,999 pounds)

Avg Daily Amt code: 05 (5,000 - 9,999 pounds)

Avg Max Amt quantity in largest container: 10800 pounds

No. days on-site: 365

STORAGE LOCATIONS

☐ Confidential

Container Type: Above Ground Tank

Pressure: Ambient Pressure Temp: Ambient Temperature

Location: Next to ground storage tank.

Amount: 10800 pounds

☐ Confidential

Container Type: Other

Pressure: Ambient Pressure Temp: Ambient Temperature

Location: Chemical Room

Amount: 1700 pounds

CHEMICALS IN INVENTORY STATE FIELDS:

Tier II Emergency and Hazardous Chemical Inventory
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Facility Name: RIDGE HARBOR WATER PLANT

No additional chemical information is required by Texas

CHEMICAL NAME: **Chlorine (gas)**

CAS #: 7782-50-5 EHS:

☒ Identical to previous year
☐ Trade Secret
☒ Pure ☐ Mixture
☐ Solid ☐ Liquid ☒ Gas

PHYSICAL HAZARDS:

<input type="checkbox"/> Combustible Dust	<input checked="" type="checkbox"/> Corrosive to metal
<input type="checkbox"/> Explosive	<input type="checkbox"/> Flammable (gases, aerosols, liquids, or solids)
<input checked="" type="checkbox"/> Gas under pressure (compressed gas)	<input type="checkbox"/> In contact with water emits flammable gas
<input type="checkbox"/> Organic peroxide	<input checked="" type="checkbox"/> Oxidizer (liquid, solid or gas)
<input type="checkbox"/> Pyrophoric Gas	<input type="checkbox"/> Pyrophoric (liquid or solid)
<input type="checkbox"/> Self-heating	<input type="checkbox"/> Self-reactive

HEALTH HAZARDS:

<input checked="" type="checkbox"/> Acute toxicity (any route of exposure)	<input type="checkbox"/> Aspiration hazard
<input type="checkbox"/> Carcinogenicity	<input type="checkbox"/> Germ cell mutagenicity
<input type="checkbox"/> Reproductive toxicity	<input checked="" type="checkbox"/> Respiratory or skin sensitization
<input checked="" type="checkbox"/> Serious eye damage or eye irritation	<input type="checkbox"/> Simple Asphyxiant
<input checked="" type="checkbox"/> Skin corrosion or irritation	<input type="checkbox"/> Specific target organ toxicity(single or repeated exposure)

☐ Hazard not otherwise classified.

INVENTORY:

☐ Below Reporting Thresholds
Max Daily Amt code: 04 (1,000 - 4,999 pounds)
Avg Daily Amt code: 03 (500 - 999 pounds)
Avg Max Amt quantity in largest container: 150 pounds
No. days on-site: 365

STORAGE LOCATIONS

☐ Confidential
Container Type: Cylinder
Pressure: Greater Than Ambient Pressure Temp: Ambient Temperature
Location: Chlorine building
Amount: 300 pounds

☐ Confidential
Container Type: Other
Pressure: Greater Than Ambient Pressure Temp: Ambient Temperature
Location: Outside of chlorine building
Amount: 1050 pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

FACILITY STATE FIELDS:

Texas requests the following:
☐ Initial ☐ Updated ☒ Annual
TXT2 Number: 73373
TCEQ Regulated Entity Number (RN): RN101450724

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: RIDGE HARBOR WATER PLANT

TCEQ Customer Number (CN): CN604520213

Facility was Purchased or First Time Reporting Hazardous Substances: NO

Effective Date: N/A

Facility was Sold, Closed or No Longer Stores Hazardous Substances: NO

Inactive Date: N/A

STATE / LOCAL FEES: \$300

☐ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

ATTACHMENTS

N/A

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 4 and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Robert Hicks, Compliance Analyst/Trainer

Name and official title of owner/operator

OR owner/operator's authorized representative

Signature

02/22/2022

Date Signed

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: ALLEYTON WASTEWATER TREATMENT PLANT

FACILITY IDENTIFICATION:

ALLEYTON WASTEWATER TREATMENT PLANT
Dept: N/A
Physical Address: 1303 OLD ALLEYTON RD., ALLEYTON, TX 78935
Mailing Address: PO BOX 140164, AUSTIN, TX 78714-0164
Geographic Location:
County: COLORADO
Latitude: 29.709884
Longitude: -96.481773
Fire Department: Columbus VFD
LEPC: Colorado LEPC

[x] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:

Dun & Bradstreet: 79168047
NAICS: 221320 (Sewage Treatment Facilities)

Is the facility manned? [x] Manned [] Unmanned
Maximum No. of Occupants: 2

REGULATORY INFORMATION:

Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [x] Yes [] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [] Yes [x] No

CONTACT INFORMATION:

Darrin Barker

Organization: CORIX UTILITIES TEXAS INC.
Title: PRESIDENT
Contact Type(s): OWNER / OPERATOR
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Email: darrin.barker@corixtexas.com

Robert Hicks

Organization: CORIX UTILITIES
Title: COMPLIANCE ANALYST/TRAINER
Contact Type(s): TIER II INFORMATION CONTACT
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Phones: Cell Phone: 512-541-9079
Email: Bobby.Hicks@corixtexas.com

Henry Ochoa

Organization: CORIX UTILITIES
Title: AREA MANAGER
Contact Type(s): EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR
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Phones: 24-Hour: 512-718-6734 Fax: 512-303-1306
Email: henry.ochoa@corixtexas.com

Gloria Broussard

Organization: CORIX UTILITIES TEXAS
Title: COMPLIANCE MANAGER

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 2
Generated On: February 22, 2022

Facility Name: ALLEYTON WASTEWATER TREATMENT PLANT

Contact Type(s): BILLING CONTACT, EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR, TIER II
INFORMATION CONTACT

Address: PO BOX 140164, AUSTIN, TX, 78714

Phones: 24-Hour: 512-663-6819 Cell Phone: 512-663-6819 Work Phone: 512-306-4001

Email: gloria.broussard@corixtexas.com

CHEMICAL DESCRIPTIONS:

CHEMICAL NAME: **CHLORINE GAS**

CAS #: 7782-50-5 EHS: YES

☒ Identical to previous year

☐ Trade Secret

☒ Pure ☐ Mixture

☐ Solid ☐ Liquid ☒ Gas

PHYSICAL HAZARDS:

☐ Combustible Dust

☐ Explosive

☒ Gas under pressure (compressed gas)

☐ Organic peroxide

☐ Pyrophoric Gas

☐ Self-heating

☒ Corrosive to metal

☐ Flammable (gases, aerosols, liquids, or solids)

☐ In contact with water emits flammable gas

☒ Oxidizer (liquid, solid or gas)

☐ Pyrophoric (liquid or solid)

☐ Self-reactive

HEALTH HAZARDS:

☒ Acute toxicity (any route of exposure)

☐ Carcinogenicity

☐ Reproductive toxicity

☒ Serious eye damage or eye irritation

☒ Skin corrosion or irritation

☐ Aspiration hazard

☐ Germ cell mutagenicity

☒ Respiratory or skin sensitization

☐ Simple Asphyxiant

☐ Specific target organ toxicity(single or repeated exposure)

☐ Hazard not otherwise classified.

INVENTORY:

☐ Below Reporting Thresholds

Max Daily Amt code: 03 (500 - 999 pounds)

Avg Daily Amt code: 02 (100 - 499 pounds)

Avg Max Amt quantity in largest container: 150 pounds

No. days on-site: 365

STORAGE LOCATIONS

☐ Confidential

Container Type: Cylinder

Pressure: Greater Than Ambient Pressure Temp: Ambient Temperature

Location: Chlorine storage room, base of wastewater treatment plant

Amount: 600 pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

FACILITY STATE FIELDS:

Texas requests the following:

☐ Initial ☐ Updated ☒ Annual

TXT2 Number: 73373

TCEQ Regulated Entity Number (RN): RN101522266

TCEQ Customer Number (CN): CN604520213

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: ALLEYTON WASTEWATER TREATMENT PLANT

Facility was Purchased or First Time Reporting Hazardous Substances: NO

Effective Date: N/A

Facility was Sold, Closed or No Longer Stores Hazardous Substances: NO

Inactive Date: N/A

STATE / LOCAL FEES: \$300

☒ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

ATTACHMENTS

Alleyton Wastewater Chlorine Gas Storage Room.pdf

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3
and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Robert Hicks, Compliance Analyst/Trainer

Name and official title of owner/operator

OR owner/operator's authorized representative

Signature

02/22/2022

Date Signed

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 1
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Facility Name: ALLEYTON WATER SYSTEM

FACILITY IDENTIFICATION:

ALLEYTON WATER SYSTEM
Dept: N/A
Physical Address: 506 ALLEYTON ROAD, ALLEYTON, TX 78935
Mailing Address: PO BOX 140164, AUSTIN, TX 78714-0164
Geographic Location:
County: COLORADO
Latitude: 29.705872
Longitude: -96.489109
Fire Department: Columbus VFD
LEPC: Colorado LEPC

[x] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:

Dun & Bradstreet: 79168047
NAICS: 221310 (Water Supply and Irrigation Systems)

Is the facility manned? [x] Manned [] Unmanned
Maximum No. of Occupants: 2

REGULATORY INFORMATION:

Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [x] Yes [] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [] Yes [x] No

CONTACT INFORMATION:

Darrin Barker

Organization: CORIX UTILITIES TEXAS INC.
Title: PRESIDENT
Contact Type(s): OWNER / OPERATOR
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Work Phone: 512-306-4007 24-Hour: 325-205-2980
Email: darrin.barker@corixtexas.com

Robert Hicks

Organization: CORIX UTILITIES
Title: COMPLIANCE ANALYST/TRAINER
Contact Type(s): TIER II INFORMATION CONTACT
Address: PO BOX 140164, AUSTIN, TX, 78714
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Email: Bobby.Hicks@corixtexas.com

Henry Ochoa

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Title: AREA MANAGER
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Phones: 24-Hour: 512-718-6734 Fax: 512-303-1306
Email: henry.ochoa@corixtexas.com

Gloria Broussard

Organization: CORIX UTILITIES TEXAS
Title: COMPLIANCE MANAGER

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 2
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Facility Name: ALLEYTON WATER SYSTEM

Contact Type(s): BILLING CONTACT, EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR, TIER II
INFORMATION CONTACT

Address: PO BOX 140164, AUSTIN, TX, 78714

Phones: 24-Hour: 512-663-6819 Cell Phone: 512-663-6819 Work Phone: 512-306-4001

Email: gloria.broussard@corixtexas.com

CHEMICAL DESCRIPTIONS:

CHEMICAL NAME: CHLORINE GAS

CAS #: 7782-50-5 EHS: YES

☒ Identical to previous year

☐ Trade Secret

☒ Pure ☐ Mixture

☐ Solid ☐ Liquid ☒ Gas

PHYSICAL HAZARDS:

☐ Combustible Dust

☐ Explosive

☒ Gas under pressure (compressed gas)

☐ Organic peroxide

☐ Pyrophoric Gas

☐ Self-heating

☒ Corrosive to metal

☐ Flammable (gases, aerosols, liquids, or solids)

☐ In contact with water emits flammable gas

☒ Oxidizer (liquid, solid or gas)

☐ Pyrophoric (liquid or solid)

☐ Self-reactive

HEALTH HAZARDS:

☒ Acute toxicity (any route of exposure)

☐ Carcinogenicity

☐ Reproductive toxicity

☒ Serious eye damage or eye irritation

☒ Skin corrosion or irritation

☐ Aspiration hazard

☐ Germ cell mutagenicity

☒ Respiratory or skin sensitization

☐ Simple Asphyxiant

☐ Specific target organ toxicity(single or repeated exposure)

☐ Hazard not otherwise classified.

INVENTORY:

☐ Below Reporting Thresholds

Max Daily Amt code: 02 (100 - 499 pounds)

Avg Daily Amt code: 02 (100 - 499 pounds)

Avg Max Amt quantity in largest container: 150 pounds

No. days on-site: 365

STORAGE LOCATIONS

☐ Confidential

Container Type: Cylinder

Pressure: Greater Than Ambient Pressure Temp: Ambient Temperature

Location: Locked storage room in onsite building

Amount: 300 pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

FACILITY STATE FIELDS:

Texas requests the following:

☐ Initial ☐ Updated ☒ Annual

TXT2 Number: 73373

TCEQ Regulated Entity Number (RN): RN104403027

TCEQ Customer Number (CN): CN604520213

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Generated On: February 22, 2022

Facility Name: ALLEYTON WATER SYSTEM

Facility was Purchased or First Time Reporting Hazardous Substances: NO

Effective Date: N/A

Facility was Sold, Closed or No Longer Stores Hazardous Substances: NO

Inactive Date: N/A

STATE / LOCAL FEES: \$300

☒ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

ATTACHMENTS

Alleyton Water Chlorine Gas.pdf

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3
and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Robert Hicks, Compliance Analyst/Trainer

Name and official title of owner/operator

OR owner/operator's authorized representative

Signature

02/22/2022

Date Signed

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 1
Generated On: February 22, 2022

Facility Name: SUMMIT SPRINGS

FACILITY IDENTIFICATION:

SUMMIT SPRINGS
Dept: N/A
Physical Address: 503 BOSQUE TRAIL, MARBLE FALLS, TX 78654
Mailing Address: PO BOX 140164, AUSTIN, TX 78714-0164
Geographic Location:
County: BURNET
Latitude: 30.462322
Longitude: -98.238853
Fire Department: Spicewood - Round Mountain VFD
LEPC: Burnet LEPC

[x] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:

Dun & Bradstreet: 79168047
NAICS: 221310 (Water Supply and Irrigation Systems)

Is the facility manned? [x] Manned [] Unmanned
Maximum No. of Occupants: 2

REGULATORY INFORMATION:

Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [x] Yes [] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [] Yes [x] No

CONTACT INFORMATION:

Darrin Barker

Organization: CORIX UTILITIES TEXAS INC.
Title: PRESIDENT
Contact Type(s): OWNER / OPERATOR
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Work Phone: 512-306-4007 24-Hour: 325-205-2980
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Organization: CORIX UTILITIES TEXAS
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Phones: Cell Phone: 512-541-9079
Email: Bobby.Hicks@corixtexas.com

Gloria Broussard

Organization: CORIX UTILITIES TEXAS
Title: COMPLIANCE MANAGER

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Generated On: February 22, 2022

Facility Name: SUMMIT SPRINGS

Contact Type(s): BILLING CONTACT, EMERGENCY CONTACT, TIER II INFORMATION CONTACT

Address: PO BOX 140164, AUSTIN, TX, 78714

Phones: 24-Hour: 512-663-6819 Cell Phone: 512-663-6819 Work Phone: 512-306-4001

Email: gloria.broussard@corixtexas.com

CHEMICAL DESCRIPTIONS:

CHEMICAL NAME: CHLORINE GAS

CAS #: 7782-50-5 EHS: YES

☒ Identical to previous year

☐ Trade Secret

☒ Pure ☐ Mixture

☐ Solid ☐ Liquid ☒ Gas

PHYSICAL HAZARDS:

☐ Combustible Dust

☐ Explosive

☒ Gas under pressure (compressed gas)

☐ Organic peroxide

☐ Pyrophoric Gas

☐ Self-heating

☒ Corrosive to metal

☐ Flammable (gases, aerosols, liquids, or solids)

☐ In contact with water emits flammable gas

☒ Oxidizer (liquid, solid or gas)

☐ Pyrophoric (liquid or solid)

☐ Self-reactive

HEALTH HAZARDS:

☒ Acute toxicity (any route of exposure)

☐ Carcinogenicity

☐ Reproductive toxicity

☒ Serious eye damage or eye irritation

☒ Skin corrosion or irritation

☐ Aspiration hazard

☐ Germ cell mutagenicity

☒ Respiratory or skin sensitization

☐ Simple Asphyxiant

☐ Specific target organ toxicity(single or repeated exposure)

☐ Hazard not otherwise classified.

INVENTORY:

☐ Below Reporting Thresholds

Max Daily Amt code: 02 (100 - 499 pounds)

Avg Daily Amt code: 02 (100 - 499 pounds)

Avg Max Amt quantity in largest container: 150 pounds

No. days on-site: 183

STORAGE LOCATIONS

☐ Confidential

Container Type: Cylinder

Pressure: Greater Than Ambient Pressure Temp: Ambient Temperature

Location: Cinder block building at plant

Amount: 300 pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

FACILITY STATE FIELDS:

Texas requests the following:

☐ Initial ☐ Updated ☒ Annual

TXT2 Number: 73373

TCEQ Regulated Entity Number (RN): RN107946840

TCEQ Customer Number (CN): CN604520213

Facility was Purchased or First Time Reporting Hazardous Substances: NO

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

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Facility Name: SUMMIT SPRINGS

Effective Date: N/A

Facility was Sold, Closed or No Longer Stores Hazardous Substances: NO

Inactive Date: N/A

STATE / LOCAL FEES: \$300

☒ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

ATTACHMENTS

1.pdf

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3
and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Robert Hicks, Compliance Analyst/Trainer

Name and official title of owner/operator

OR owner/operator's authorized representative

Signature

02/22/2022

Date Signed

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 1
Generated On: February 22, 2022

Facility Name: NORTHEAST WASHINGTON COUNTY PLANT 2

FACILITY IDENTIFICATION:

NORTHEAST WASHINGTON COUNTY PLANT 2
Dept: N/A
Physical Address: 6955 FM 390, BRENHAM, TX 77833
Mailing Address: PO BOX 140164, AUSTIN, TX 78714-0164
Geographic Location: 6955 FM 390
County: WASHINGTON
Latitude: 30.297937
Longitude: -96.38168
Fire Department: Prairie Hill - Rocky Hill VFD
LEPC: Washington LEPC

[x] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:

Dun & Bradstreet: 79168047
NAICS: 221310 (Water Supply and Irrigation Systems)

Is the facility manned? [x] Manned [] Unmanned
Maximum No. of Occupants: 2

REGULATORY INFORMATION:

Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [x] Yes [] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [] Yes [x] No

CONTACT INFORMATION:

Darrin Barker

Organization: CORIX UTILITIES TEXAS INC.
Title: PRESIDENT
Contact Type(s): OWNER / OPERATOR
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Work Phone: 512-306-4007 24-Hour: 325-205-2980
Email: darrin.barker@corixtexas.com

Robert Hicks

Organization: CORIX UTILITIES
Title: COMPLIANCE ANALYST/TRAINER
Contact Type(s): TIER II INFORMATION CONTACT
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Cell Phone: 512-541-9079
Email: Bobby.Hicks@corixtexas.com

Henry Ochoa

Organization: CORIX UTILITIES
Title: AREA MANAGER
Contact Type(s): EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR
Address: 101 COOL WATER DR, BASTROP, TX, 78602
Phones: 24-Hour: 512-718-6734 Fax: 512-303-1306
Email: Bobby.Hicks@corixtexas.com

Gloria Broussard

Organization: CORIX UTILITIES TEXAS
Title: COMPLIANCE MANAGER

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 2
Generated On: February 22, 2022

Facility Name: NORTHEAST WASHINGTON COUNTY PLANT 2

Contact Type(s): BILLING CONTACT, EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR, TIER II
INFORMATION CONTACT

Address: PO BOX 140164, AUSTIN, TX, 78714

Phones: 24-Hour: 512-663-6819 Cell Phone: 512-663-6819 Work Phone: 512-306-4001

Email: gloria.broussard@corixtexas.com

CHEMICAL DESCRIPTIONS:

CHEMICAL NAME: **CHLORINE GAS**

CAS #: 7782-50-5 EHS: YES

☒ Identical to previous year

☐ Trade Secret

☒ Pure ☐ Mixture

☐ Solid ☐ Liquid ☒ Gas

PHYSICAL HAZARDS:

☐ Combustible Dust

☐ Explosive

☒ Gas under pressure (compressed gas)

☐ Organic peroxide

☐ Pyrophoric Gas

☐ Self-heating

☒ Corrosive to metal

☐ Flammable (gases, aerosols, liquids, or solids)

☐ In contact with water emits flammable gas

☒ Oxidizer (liquid, solid or gas)

☐ Pyrophoric (liquid or solid)

☐ Self-reactive

HEALTH HAZARDS:

☒ Acute toxicity (any route of exposure)

☐ Carcinogenicity

☐ Reproductive toxicity

☒ Serious eye damage or eye irritation

☒ Skin corrosion or irritation

☐ Aspiration hazard

☐ Germ cell mutagenicity

☒ Respiratory or skin sensitization

☐ Simple Asphyxiant

☐ Specific target organ toxicity(single or repeated exposure)

☐ Hazard not otherwise classified.

INVENTORY:

☐ Below Reporting Thresholds

Max Daily Amt code: 04 (1,000 - 4,999 pounds)

Avg Daily Amt code: 03 (500 - 999 pounds)

Avg Max Amt quantity in largest container: 150 pounds

No. days on-site: 365

STORAGE LOCATIONS

☐ Confidential

Container Type: Cylinder

Pressure: Greater Than Ambient Pressure Temp: Ambient Temperature

Location: Chlorine storage building in center of plant

Amount: 1050 pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

FACILITY STATE FIELDS:

Texas requests the following:

☐ Initial ☐ Updated ☒ Annual

TXT2 Number: 73373

TCEQ Regulated Entity Number (RN): RN110260205

TCEQ Customer Number (CN): CN604520213

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 3
Generated On: February 22, 2022

Facility Name: NORTHEAST WASHINGTON COUNTY PLANT 2

Facility was Purchased or First Time Reporting Hazardous Substances: NO

Effective Date: N/A

Facility was Sold, Closed or No Longer Stores Hazardous Substances: NO

Inactive Date: N/A

STATE / LOCAL FEES: \$300

☒ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

ATTACHMENTS

1.pdf

Certification (Read and sign after completing all sections)

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and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Robert Hicks, Compliance Analyst/Trainer

Name and official title of owner/operator

OR owner/operator's authorized representative

Signature

02/22/2022

Date Signed

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 1
Generated On: February 22, 2022

Facility Name: NORTHEAST WASHINGTON COUNTY PLANT 3

FACILITY IDENTIFICATION:

NORTHEAST WASHINGTON COUNTY PLANT 3
Dept: N/A
Physical Address: 9100 MOUND HILL ROAD, BRENHAM, TX 77833
Mailing Address: PO BOX 140164, AUSTIN, TX 78714-0164
Geographic Location: 9100 MOUND HILL RD.
County: WASHINGTON
Latitude: 30.288029
Longitude: -96.441764
Fire Department: Gay Hill - Mound Hill - Cedar Hill VFD
LEPC: Washington LEPC

[x] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:

Dun & Bradstreet: 79168047
NAICS: 221310 (Water Supply and Irrigation Systems)

Is the facility manned? [x] Manned [] Unmanned
Maximum No. of Occupants: 2

REGULATORY INFORMATION:

Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [x] Yes [] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [] Yes [x] No

CONTACT INFORMATION:

Darrin Barker

Organization: CORIX UTILITIES TEXAS INC.
Title: PRESIDENT
Contact Type(s): OWNER / OPERATOR
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Work Phone: 512-306-4007 24-Hour: 325-205-2980
Email: darrin.barker@corixtexas.com

Robert Hicks

Organization: CORIX UTILITIES
Title: COMPLIANCE ANALYST/TRAINER
Contact Type(s): TIER II INFORMATION CONTACT
Address: PO BOX 140164, AUSTIN, TX, 78714
Phones: Cell Phone: 512-541-9079
Email: Bobby.Hicks@corixtexas.com

Henry Ochoa

Organization: CORIX UTILITIES
Title: AREA MANAGER
Contact Type(s): EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR
Address: 101 COOL WATER DR, BASTROP, TX, 78602
Phones: 24-Hour: 512-718-6734 Fax: 512-303-1306
Email: henry.ochoa@corixtexas.com

Gloria Broussard

Organization: CORIX UTILITIES TEXAS
Title: COMPLIANCE MANAGER

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 2
Generated On: February 22, 2022

Facility Name: NORTHEAST WASHINGTON COUNTY PLANT 3

Contact Type(s): BILLING CONTACT, EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR, TIER II
INFORMATION CONTACT

Address: PO BOX 140164, AUSTIN, TX, 78714

Phones: 24-Hour: 512-663-6819 Cell Phone: 512-663-6819 Work Phone: 512-306-4001

Email: gloria.broussard@corixtexas.com

CHEMICAL DESCRIPTIONS:

CHEMICAL NAME: **CHLORINE GAS**

CAS #: 7782-50-5 EHS: YES

☒ Identical to previous year

☐ Trade Secret

☒ Pure ☐ Mixture

☐ Solid ☐ Liquid ☒ Gas

PHYSICAL HAZARDS:

☐ Combustible Dust

☐ Explosive

☒ Gas under pressure (compressed gas)

☐ Organic peroxide

☐ Pyrophoric Gas

☐ Self-heating

☒ Corrosive to metal

☐ Flammable (gases, aerosols, liquids, or solids)

☐ In contact with water emits flammable gas

☒ Oxidizer (liquid, solid or gas)

☐ Pyrophoric (liquid or solid)

☐ Self-reactive

HEALTH HAZARDS:

☒ Acute toxicity (any route of exposure)

☐ Carcinogenicity

☐ Reproductive toxicity

☒ Serious eye damage or eye irritation

☒ Skin corrosion or irritation

☐ Aspiration hazard

☐ Germ cell mutagenicity

☒ Respiratory or skin sensitization

☐ Simple Asphyxiant

☐ Specific target organ toxicity(single or repeated exposure)

☐ Hazard not otherwise classified.

INVENTORY:

☐ Below Reporting Thresholds

Max Daily Amt code: 04 (1,000 - 4,999 pounds)

Avg Daily Amt code: 03 (500 - 999 pounds)

Avg Max Amt quantity in largest container: 150 pounds

No. days on-site: 365

STORAGE LOCATIONS

☐ Confidential

Container Type: Cylinder

Pressure: Greater Than Ambient Pressure Temp: Ambient Temperature

Location: Chlorine building in center of plant

Amount: 1050 pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

FACILITY STATE FIELDS:

Texas requests the following:

☐ Initial ☐ Updated ☒ Annual

TXT2 Number: 73373

TCEQ Regulated Entity Number (RN): RN110260361

TCEQ Customer Number (CN): CN604520213

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 3
Generated On: February 22, 2022

Facility Name: NORTHEAST WASHINGTON COUNTY PLANT 3

Facility was Purchased or First Time Reporting Hazardous Substances: NO

Effective Date: N/A

Facility was Sold, Closed or No Longer Stores Hazardous Substances: NO

Inactive Date: N/A

STATE / LOCAL FEES: \$300

☒ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

ATTACHMENTS

1.pdf

Certification (Read and sign after completing all sections)

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and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Robert Hicks, Compliance Analyst/Trainer

Name and official title of owner/operator

OR owner/operator's authorized representative

Signature

02/22/2022

Date Signed

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 1
Generated On: February 22, 2022

Facility Name: NORTHEAST WASHINGTON COUNTY PLANT 4

FACILITY IDENTIFICATION:

NORTHEAST WASHINGTON COUNTY PLANT 4
Dept: N/A
Physical Address: 3901 OLD NAVASOTA RD, BRENHAM, TX 77833-7903
Mailing Address: PO BOX 140164, AUSTIN, TX 78714-0164
Geographic Location: 3901 OLD NAVASOTA RD.
County: WASHINGTON
Latitude: 30.208262
Longitude: -96.321421
Fire Department: Meyersville VFD
LEPC: Washington LEPC

[x] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:

Dun & Bradstreet: 79168047
NAICS: 221310 (Water Supply and Irrigation Systems)

Is the facility manned? [x] Manned [] Unmanned
Maximum No. of Occupants: 2

REGULATORY INFORMATION:

Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [x] Yes [] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [] Yes [x] No

CONTACT INFORMATION:

Darrin Barker

Organization: CORIX UTILITIES TEXAS INC.
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Address: PO BOX 140164, AUSTIN, TX, 78714
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Title: COMPLIANCE ANALYST/TRAINER
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Email: henry.ochoa@corixtexas.com

Gloria Broussard

Organization: CORIX UTILITIES TEXAS
Title: COMPLIANCE MANAGER

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 2
Generated On: February 22, 2022

Facility Name: NORTHEAST WASHINGTON COUNTY PLANT 4

Contact Type(s): BILLING CONTACT, EMERGENCY CONTACT, FAC. EMERGENCY COORDINATOR, TIER II
INFORMATION CONTACT

Address: PO BOX 140164, AUSTIN, TX, 78714

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Email: gloria.broussard@corixtexas.com

CHEMICAL DESCRIPTIONS:

CHEMICAL NAME: **CHLORINE GAS**

CAS #: 7782-50-5 EHS: YES

☒ Identical to previous year

☐ Trade Secret

☒ Pure ☐ Mixture

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☒ Skin corrosion or irritation

☐ Aspiration hazard

☐ Germ cell mutagenicity

☒ Respiratory or skin sensitization

☐ Simple Asphyxiant

☐ Specific target organ toxicity(single or repeated exposure)

☐ Hazard not otherwise classified.

INVENTORY:

☐ Below Reporting Thresholds

Max Daily Amt code: 03 (500 - 999 pounds)

Avg Daily Amt code: 02 (100 - 499 pounds)

Avg Max Amt quantity in largest container: 150 pounds

No. days on-site: 365

STORAGE LOCATIONS

☐ Confidential

Container Type: Cylinder

Pressure: Greater Than Ambient Pressure Temp: Ambient Temperature

Location: Chlorine building in center of plant

Amount: 750 pounds

CHEMICALS IN INVENTORY STATE FIELDS:

No additional chemical information is required by Texas

FACILITY STATE FIELDS:

Texas requests the following:

☐ Initial ☐ Updated ☒ Annual

TXT2 Number: 73373

TCEQ Regulated Entity Number (RN): RN110260502

TCEQ Customer Number (CN): CN604520213

Tier II Emergency and Hazardous Chemical Inventory
Reporting Period: January 1 to December 31, 2021

Page 3
Generated On: February 22, 2022

Facility Name: NORTHEAST WASHINGTON COUNTY PLANT 4

Facility was Purchased or First Time Reporting Hazardous Substances: NO

Effective Date: N/A

Facility was Sold, Closed or No Longer Stores Hazardous Substances: NO

Inactive Date: N/A

STATE / LOCAL FEES: \$300

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☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

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and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Robert Hicks, Compliance Analyst/Trainer

Name and official title of owner/operator

OR owner/operator's authorized representative

Signature

02/22/2022

Date Signed

DOCKET NO. 53815
CORIX UTILITIES (TEXAS) INC.'S RESPONSE TO
COMMISSION STAFF'S AMENDED FIRST REQUEST FOR INFORMATION

STAFF 1-16

Does Corix Utility have plant insurance for Water and Wastewater? If so, please provide a copy of these plant insurance policies by region.

RESPONSE:

Yes. See Confidential Staff RFI 1-16 Attachments.

Please note that excel files will be provided in native format.

Preparer: Mary Blincoe, Senior Financial Analyst; Phil Drennan, Director of Financial Planning and Analysis
Sponsor: Phil Drennan, Director of Financial Planning and Analysis; Justin Kersey, President of the Prairie Path Water Company and Community Utilities of Indiana

The following files are not convertible:

Support.xlsx	Staff RFI 1-2 Attachment_GL
Support.xlsx	Staff RFI 1-3 Attachment_GL
Support.xlsx	Staff RFI 1-4 Attachment_GL
Invoice 05.28.2021 192617.xlsx	Staff RFI 1-4 Attachment_Infosend
	Staff RFI 1-4 Attachment_summary.xlsx
Support.xlsx	Staff RFI 1-5 Attachment_GL
Support.xlsx	Staff RFI 1-6 Attachment_GL
Support.xlsx	Staff RFI 1-7 Attachment_GL
Support.xlsx	Staff RFI 1-8 Attachment_GL
Support.xlsx	Staff RFI 1-10 Attachment_GL
Support.xlsx	Staff RFI 1-11 Attachment_GL
Support.xlsx	Staff RFI 1-12 Attachment_GL
Support.xlsx	Staff RFI 1-13 Attachment_GL
Support.xlsx	Staff RFI 1-14 Attachment_GL
support.xlsx	Staff RFI 1-15 Attachment_GL
Invoice 05.28.2021 192617.xlsx	Staff RFI 1-15 Attachment_Infosend
	Staff RFI 1-15 Attachment_summary.xlsx

Please see the ZIP file for this Filing on the PUC Interchange in order to access these files.

Contact centralrecords@puc.texas.gov if you have any questions.