

Control Number: 56354

Item Number: 1372

PUC DOCKET NO. 56354

RATEPAYER COMMENTS/REQUESTS TO INTERVENE

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

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

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

CUSTOMER INFORMATION (please provide all of the requested information)

That Name. Jone 19	Last Name.	CHNNUN	
Phone Number: 7/3 449-58	95 Fax Number:	,	
Email Address: Dong, CANNON	10. HPC - Industri	inl. Com	
Email Address: <u>Dong, CANNON</u> Address, City, State: <u>3319</u>	STAGE WOOD DR)	
Location where service is received:	16794 ARDMO	re, CONROR, TX.	<u>77</u> 302
Please fill out the following:			
I wish to PROTEST the following provide comments below. Attach a separate of the provide comments below. Attach a separate of the provide comments below.	of the public concerns a	and identify issues to be expl	unig. Fuonc
☐ I am requesting to INTERVENE am a party to the case; I am required required to attend hearings, and if I fil documents in the case, I must provide am bound by the Procedural Rules of the	to respond to all discove e testimony, I may be cre a copy to every other pa	ery requests from other partie ross-examined in the hearing; arty in the case; and I acknow	es; I may be if I file any ledge that I
Signature of Ratepayer:			
Day Cannon	[Date: <u>4-29-24</u>	
/	nformacion en Espanol, pue	ede llamar al	

Hearing- and speech-impaired individuals with text telephones may contact the PUCT's Customer Assistance Hotline at 512-936-7136

Updated: September 29, 2021

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			NOTIC	CE O	FF	PROP	POSED	RATE	CHAN	GE	- WAT	ER			
CUR	RENT F	RATE	S		21	A FIRM		PRO	POSED	RAT	ES			EEV	414/
Minimum Monthly Charge includes 0 gallons					Minimum Monthly Charge includes 0							gallons			
Meter Size:					Meter Size:										
RESIL	DENTIA	L						RESII	DENTIA	L					
		/8"		\$	_	10.78		5/8" \$					68.80		
		4"		\$	_	10.78		3/4" \$					103.21		
		"		\$	_	01.95		1" \$					172.01		
1 1/2" \$ 203.90							1.1/			\$	344.00				
		2"		\$	_	326.24	0	-	2'			\$	550	0.40	
Oals	VANOR III	5		\$	1	,019,5	0	Other	3'	-	C. HV	\$			
Other:	CA	IIC	NAGE	S	OCI	D.		Other:	CA	IIC	NAGE	S CHA	DCI	7.	
TIER			NAGE	CHAI	_		TF non	TIER	1		NAGE	CHA	_		TF non
HER	ER VOLUME			CHARGE per 1000 gals.		TIEK	VOLUME				CHARGE per 1000 gals.				
	W. W.						/1000		4		1000000				/1000
Tier 1	0	to	6,000	gals.	\$	2.50	gals.	Tier 1	0	to	6,000	gals.	\$	3.26	gals.
Tier 2	6,001	to	15,000	gals.	\$	2.50	/1000 gals.	Tier 2	6,001	to	15,000	gals.	\$	4.50	/1000 gals.
		, Keir	10,000	Buildi	-		/1000		0,001		121000	Buildi	1	TIE O	/1000
Tier 3	15,001	to	25,000	gals.	S	2.50	gals.	Tier 3	15,001	to	25,000	gals.	\$	7.62	gals.
Tier 4	25,001	and	up	gals.	s	2.50	/1000 gals.	Tier 4	25,001	and	up	gals.	\$	11.05	/1000 gals.
TICL	23,001	and	ар	gais.	4	2.50	/1000	1101 4	25,001	anu	up	gais.	Φ.	11.05	/1000
Tier 5	1000	to		gals.	\$	sectific.	gals.	Tier 5		to		gals.	\$		gals.
	MI	SCE	LLANE	OUS I	FEI	ES	ENG	BRU	MI	SCE	LLANE	ous	FEE	S	nit P
Tap Fee \$ 750.00						Tap Fe	e	\$	1,2	00.0	0				
Reconnect Fee:				Reconnect Fee:											
Non-payment					Non-payment										
\$ 25.00			1112					25.	5.00						
C 11 C 20 C	stomer's	_		100	0.00)	Charley				111 12000	50.00			
After hours reconnection \$ -			to Tile					60.00							
Transfer Fee \$ 50.00				Transfer Fee \$				65.00							
Late Charge 10%								5.00 or 10%							
Returned Check Charge \$ 50.00				Returned Check Charge \$ 30.											
Deposit \$ 50.00				Deposit \$ (Maximum \$50.00)			50.	.00							
1	Meter Te	et Eas		\$ 2	5.00	0	NA STO		leter Tes)) e	25.	00		
ľ	victer 1e	st ree		φ 2	5.00	,		1	Residen		4	23.	UU		
N	Meter Te	st Fee		\$ -	Ħ.		The second		leter Tes		\$	50.	00	1 1	
(Commercial)				1	Commer		*								
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Regulatory Assessment of 1% is added to the minimum monthly charge and gallonage charges. Additional fees and meter sizes may be shown on a separate page.

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

AFFIDAVIT

STATE OF TEXAS		
COUNTY OF HARRIS		
I, CAREY A. THOMAS	being duly sworn, file this NOTIC CHANGE	E OF PROPOSED RATE
of Utility); that, in such capac	tnership, title as officer of corporation	(indicate relationship to Utility on, or other authorized representative file and verify such notice; and that
I further represent that a copy	of the attached notice was provided	by <u>U.S.P.S.</u> (method of delivery)
to each affected customer, each other affected party on or about	ch affected municipality, the Office outMARCH 2	•
	(Utilit	AFFIANT y's Authorized Representative)
	UNDINE TE	EXAS, LLC NAME OF UTILITY
	any person other than the sole own- Power of Attorney must be enclosed.	er, partner, officer of the Utility, or its
SUBSCRIBED AND SWOR this the 28 TH day of Maseal of office.	N TO BEFORE ARCH , 20 24 , to certify	y which witness my hand and
SEAL		
	NOTAR	RY PUBLIC IN AND FOR THE STATE OF TEXAS
	HOLLY H. PRINT (MCCLAREN OR TYPE NAME OF NOTARY
MY COM	MISSION EXPIRES HINE 18-20	27

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PUC DOCKET NO. 56354 NOTICE OF PROPOSED RATE CHANGE PURSUANT TO TEXAS WATER CODE § 13.187

	Undine Texas	, LLC		13260							
	Company Na	ame		CCN Number(s)							
may be revi utility's office rates will app If the Commatepayers (I municipality	rate change application ewed online at interce at the address below ply to service received mission receives a suffly percent of the utility before the 91st day at ge for instructions of	hange.puc.tex v or at the Co i after the effect ficient numbe y's customers fter the propos	as.gov. Yo mmission's ctive date p er of protes over whos sed effecti	ou may also ins s office (1701 N rovided below, sts, separately o e rates the Com	pect a copy of l. Congress Av unless modifie or in a combi- mission has ori	the rate, Austide, Austide or sunder the deciding the dec	e change app n, TX 78701) spended by th test letter, fror isdiction) or fro	lication at your The proposed Commission at least 1,331 m any affected			
EFFECTI	VE DATE OF PR	OPOSED II	NCREAS	E: 05/02/20)24						
	least 35 days after notice tes requested by the utili						refund or credit	against future			
	collected during the per							agamor ratore			
Reason(s) for Proposed Ra	ite Change	:								
	d revenue requirer			ased operating	ng costs and	costs (of capital ex	penditures			
	litate systems; cor							1			
BILLING Water	G COMPARISON	l (assumes	base rate	e for 5/8" me	eter)						
Existing	5,000 gallons: \$	53.28	/mo	Proposed	5,000 gall			/mo			
Existing	10,000 gallons: \$	65.78	/mo	Proposed	10,000 gall	ons: \$	106.36	/mo			
Water - J	Pass Through Ch	arges									
Existing	5,000 gallons: \$		/mo	Proposed	5,000 gall			/mo			
Existing	10,000 gallons: \$		/mo	Proposed	10,000 gall	ions: \$		/mo			
<u>Sewer</u>											
Existing	5,000 gallons: \$		/mo	Proposed	5,000 gall	ons: \$		/mo			
Allendal	e, Hillgreen, Loch	Ness Cove	. Lost La	ke. River Ch	ab. Woodha	ven Es	tates				
	o, 11			tem(s) Affected							
17681 Telge Road		Cypress		Tex	as	77429					
Company Address		City		Sta	ate	Zip					
(710) 57	4 5050										
$\frac{(713)57}{\text{Compan}}$	y Phone Number	· · · · · · · · · · · · · · · · · · ·	·····								
Сопірав	ly I none ivalitoer										
	98.90 (Undine Texas, LLC										
Water Am	nual Revenue Increaso	Water Pas	ss-Through	Annual Revent	ue Increase	Sewer .	Annual Revent	ue Increase			
03/28/24	ļ				N/A						
Date Cu	rrent Rate Change No	tice Delivered	, 1	Date of Last Rate Change							

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