

Control Number: 56354

Item Number: 3090

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:

PUBLIC UTILITY

COMMISSION OF TEXAS

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

JAN 23 2025 _

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

CUSTOMER INFORMATION (please provide all of the requested information)

First Name: HAROLD PATRICA Last Name: MCKIONEY
Phone Number: 281-633-1088
Email Address: panckinverso@gmailCom.
Address, City, State: 3102 River Beno Drive, Rosenberg, 1x 77471
Location where service is received: (if different from the mailing address)
Please fill out the following:
I wish to PROTEST the following proposed rate action/s: I wish to be a COMMENTER. I understand that: I am NOT a party to this case; my comments are not considered evidence in this case; and I have no further obligation to participate in the proceeding. Public comments may help inform the PUCT of the public concerns and identify issues to be explored. Please provide comments below. Attach a separate page, if necessary.
I am requesting to INTERVENE in this proceeding. As an INTERVENOR, I understand that: I am a party to the case; I am required to respond to all discovery requests from other parties; I may be required to attend hearings, and if I file testimony, I may be cross-examined in the hearing; if I file any documents in the case, I must provide a copy to every other party in the case; and I acknowledge that I am bound by the Procedural Rules of the PUCT and the State Office of Administrative Hearings (SOAH).
Signature of Ratepayer: Si desea informacion en Espanol, phede llamar al 1-888-782-8477
Hearing and speech-impaired individuals with text telephones may contact the PUCT's Customer Assistance Hotline at 512-936-7136

Updated: September 29, 2021

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			NOTIO	CE O	F F	PROP	OSED	RATE	CHAN	IGE	– W A	TER	<u></u>			_
CURRENT RATES							PRO	POSED	RAT	ES			,			
Minimum Monthly Charge includes 0 gallons							Minimum Monthly Charge includes 0					,	gal	lons		
	Meter Size:							Meter Size:								
RESII)ENTIA	L						RESIL	ENTIA	L						
5/8" \$ 50,93							· · · · · · · · · · · · · · · · · · ·				74	.21		;		
3/4" \$ 76.40							3/4" \$				11	1.33	· ·	<u> </u>		
		1"		\$	_	27.33		1" \$					5.54	٠.		
		1/2"		\$	_	54.65		1 1/2" \$					1.07			
		2"		\$	4	07.44		2" \$					<u>3.71</u>	<u>. '</u>	<u> </u>	
		3"		\$	<u>:</u> .	· · · · · ·	,	3" \$				·	<u>. </u>	<u>, , , , , , , , , , , , , , , , , , , </u>		
Other:			tered)	\$		1.49		Other:		nmet		\$		8.75	,	<u> </u>
			NAGE	CHAI	_		·				NAG	E CH	$\overline{}$			
TIER	VOLU	ME				HARC 00 gals.	-	TIER	IER VOLUME				CHARGE per 1000 gals.			
7TC' 1							/1000				~ 000	Ì				/1000
Tier 1	0	to	6,000	gals.	*	2,41	gals. /1000	Tier 1	0	to	6,000	ga	ls. \$	3.5		gals. /1000
Tier 2	6,001	to	15,000	gals.	\$	3.33	; /1000 gals.	Tier 2	6,001	to	15,00	0 ga	ls. \$	4.8	- 1	gals.
			,				/1000			† *** !						/1000
Tier 3	15,001	to	25,000	gals.	_\$_	5.64	gals.	Tier 3	15,001	to	25,00	0 gal	ls, \$	8.2		gals.
Tier 4	25,001	and	up ·	gals.	\$	8.18	/1000 gals.	Tier 4	25,001	and	. up	ga	ls. \$	11.9		/1000 gals.
1101 -	23,001	and	, u p	, gais,	φ.	0.10	/1000	1101 4	23,001	and	. цр	ga	18.	2 11.		/1000
Tier 5		to	<u> </u>	gals.	\$		gals.	Tier 5		to		ga	s. \$	3		gals.
	M	SCE	LLANE	OUS I	Œ	S			MI	SCE	LLAN	EOU :	FE	ES	· · · · · ·	
•	Tap F	ee		\$ 1,	200	00.0			Tap Fe				,200.			
R	Reconnect Fee:						R	econnect	Fee:			•				
Non-payment						Non-payment										
	\$ 25.00							(Maximum - \$25.00) \$ 25.00						·		
Customer's Request \$ 50.00						Customer's Request \$ 50.00										
After hours reconnection \$ 50.00						ours rec		ction	···	0.00						
Transfer Fee \$ 65.00					Transfer Fee \$ 65,0						,					
Late Charge \$ 5.00 or 10%										r 10%)					
Returned Check Charge \$ 30,00					Return	ed Chec		arge		0,00			<u>, :</u>			
Deposit \$ 50.00					Deposit \$ 50.00					٠,						
M-4 T # 04.00					(Maximum \$50.00)											
Meter Test Fee \$ 25.00						Meter Test Fee \$ 25.0				5.00						
(Residential)						 	Resident			<u> </u>	0.00					
	Meter Test Fee \$ 50.00						leter Tes			\$ 5	0.00					
(Commercial)						<u></u>	Commer	ciai)								

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.

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PUC DOCKET NO. 56354 NOTICE OF PROPOSED RATE CHANGE PURSUANT TO

TEXAS WATER CODE § 13.187

	Undine Texa	s, LLC		13260				
	Company N			CCN Numbe				
may be rev utility's offi rates will ap If the Com ratepayers (municipality	riewed online at interdice at the address belooply to service received unission receives a su [10 percent of the utility.]	on with the Public Utility change.puc.texas.gov. You or at the Commission of after the effective date pufficient number of protay's customers over whose the proposed effectivow to protest.	ou may also ins 's office (1701 provided below, tests, separately se rates the Com	spect a copy of the rate N. Congress Ave, Austi unless modified or sus or in a combined prot mission has original juri	e change application and in, TX 78701). The propended by the Commetter, from at least sdiction) or from any at	at your oposed uission t 1,331 ffected		
EFFECT	IVE DATE OF PR	OPOSED INCREAS	E: 01/23/2	025		. !		
(must be at	least 35 days after noti	ce is provided to custome:	rs and 35 days at	ter application is filed)	<u> </u>			
		ity are not final. The Comm ndency of the rate proceeding				future		
Reason(s) for Proposed R	atc Change:						
		nent to recover incre			f capital expenditu	res		
to rehabi	ilitate systems; con	nsolidation of newly	acquired sys	tems.				
BILLING <u>Water</u>	G COMPARISON	Ň (assumes base rate	e for 5/8" mo	eter)				
Existing	5,000 gallons: \$	62.98 /mo	Proposed	5,000 gallons: \$	91.76° /mc	0		
Existing	10,000 gallons: \$		Proposed	10,000 gallons: \$				
Water – 1	Pass Through Ch	arges						
Existing	5,000 gallons: \$	/mo	Proposed	5,000 gallons: \$	/mc)		
Existing	10,000 gallons: \$	/mo	Proposed	5,000 gallons; \$ 10,000 gallons; \$ 2	/mc)		
Sewer								
Existing	5,000 gallons: \$	/mo	Proposed	5,000 gallons: \$	/mc)		
Inc., Con	sumers Water, Inc	hose formerly known c., Suburban Utility (I Water Systems, LI Subdivision(s) or Syst	Company, G C	ulf Coast Ütility Co		. !		
17681 Te	elge Road	Cypress	Tex	as	77429	į		
Compa	any Address	City	Sta	nte	Zip			
(713) 574	1-5053					;		
	y Phone Number				<u></u>			
\$2,485,4	78.45							
	ual Revenue Increase	Water Pass-Through	Annual Revenu	te Increase Sewer A	nnual Revenue Increas	so		
12/19/20	24		. \$	3/1/2022 (Docket N	o. 50200)			
	rent Rate Change No	tice Delivered	Data of Last Rate Change					

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AFFIDAVIT

STATE OF TEXAS
COUNTY OF HARRIS
I, CAREY A. THOMAS being duly sworn, file this NOTICE OF PROPOSED RATE CHANGE
as <u>SENIOR VICE PRESIDENT</u> (indicate relationship to Utility that is, owner, member of partnership, title as officer of corporation, or other authorized representative of Utility); that, in such capacity, I am qualified and authorized to file and verify such notice; and that all statements and matters set forth herein are true and correct.
I further represent that a copy of the attached notice was provided by U.S.P.S.
(method of delivery) to each affected customer, each affected municipality, the Office of Public Utility Counsel, and any
other affected party on or about DECEMBER 19 , 20 24 Larey a. Thomas
AFFIANT (Utility's Authorized Representative)
UNDINE TEXAS, LLC NAME OF UTILITY
If the Affiant to this form is any person other than the sole owner, partner, officer of the Utility, or its attorney, a properly verified Power of Attorney must be enclosed.
SUBSCRIBED AND SWORN TO BEFORE this the 16TH day of DECEMBER, 20 24, to certify which witness my hand and seal of office.
NICIA AOYERMUND Notery Public, State of Texas Notery Public, State of Texas NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS
NICIA ROTERMUND PRINT OR TYPE NAME OF NOTARY
MY COMMISSION EXPIRES JANUARY 28, 2025

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