

Control Number: 56354

Item Number: 3220

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

PUBLIC UTILITY COMMISSION OF TEXAS

JAN 2 7 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)

En T

First Name: 1 4 112 1-ce Last Name: Dervice
Phone Number: 936-646-3133 Fax Number:
Email Address: Steven_fair contlook.com
Address, City, State: P.O. Box 999 Onelaska, Tb 77360
Address, City, State: V.O. Box 999 One Los Kn, 16 11560 Location where service is received: 265 Waldon Road, Longston, To (if different from the mailing address) 77.35/
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:
Date: 1-20-25
Si desea informacion en Espanol, puede llamar al 1-888-782-8477

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

Updated: September 29, 2021

	NOT	ICE	Ol	F P	ROI	POSED	RATE	CHAN	GE	– WA'l	ER				
CUR	CURRENT RATES						PRO	POSED	RAT	ES		٠.	,		
Minimu	Minimum Monthly Charge includes 2,000 gallons						Minimum Monthly Charge includes 0 gallons								
Meter	· · · · · · · · · · · · · · · · · · ·						Meter Size:								
RESIL	RESIDENTIAL						RESIL	RESIDENTIAL							
	5/8"		\$		5.19			5/8" \$ 74.21							
3/4" \$ 35.19				3/4" \$ 111.:											
	.1"		\$	-	<u>7.34 </u>		<u> </u>	1" \$ 185.54					<u> </u>		
	1 1/2"		\$		<u>47.60</u>			• .				371.07			
	2"		\$	_	31.91							<u>593</u>	593.71		
<u> </u>	3"		\$	<u>.</u> 4.	28.63			3'	,						
Other:	CATT ONLY	7 / 48	\$				Other:	Other: \$ GALLONAGE CHARGE:				- 			
TIER	GALLONAGI VOLUME	UH	AK			CIED .	TENERALE A			MAGE	CHA			711174	
TIER	VOLUME				1AK) 10 gals	GE per	TIER	VOLU	ME				HARC 100 gais.		
Tier 1	0 000		_ [ď		/1000	Time 1	0	!	9 000	4		2 51	/1000	
Her I	0 to 2,000	ga	ls,	<u> </u>	- .	gals. /1000	Tier 1	0	to	2,000	gals.	1	3.51	gals. /1000	
Tier 2	2,001 to 6,000	ga	ls.	\$	3.54		Tier 2	2,001	to	6,000	gals.	\$	3.51	gals.	
E. 0		;		_		/1000			1					/1000	
Tier 3	6,001 to 15,000) ga	ls.	\$.	3.54	gals.	Tier 3	6,001	to	15,000	gals.	\$	4.85	gals.	
Tier 4	15,001 to 25,000) ga	lg.	\$.	3.54	: /1000 gals.	Tier 4	15,001	to	25,000	gals.	\$	8.22	/1000 gals.	
						, /1000			1	·	Bure	Ť		/1000	
Tier 5	25,001 and up	ga	ls.	\$ -	3.54	gals.	Tier 5	25,001	and	, up	gals.	\$. 11.92	gals.	
	MISCELLAN	EOU	S.F	EE	S :		<u> </u>	MI	SCE	LLANE	OUS F	ŒE	S	· · · · · · · · · · · · · · · · · · ·	
	Tap Fee	\$	••	0.0				Tap Fe		\$			 	 	
R	econnect Fee:					, , , ,	R	econnect						····	
1	Non-payment						N	Non-payment							
<u></u>			25	25.00			_ _ •				25,0	00			
Customer's Request \$ 25.00						Customer's Request				50.0		, ,	. ,		
After hours reconnection \$ -					After hours reconnection \$				50.0			,			
Transfer Fee \$ 35.00				· · · · · ·	Transfer Fee				65.0		· .				
Late Charge \$ 5.00									10%						
Returned Check Charge \$ 25.00				<u>. </u>					30.0		, ı				
Deposit \$ N/A				•	1				50,0)Ó					
Mater Tree 4 Frag 6 05 00				(Maximum \$50.00)					· ·	•					
Meter Test Fee \$ 25.00				Meter Test Fee \$ 25.0				JU							
	M-A T A D A					Resident			· ΕΛ (20	-				
	Ieter Test Fee	\$	-					leter Test		\$	50.6	JU			
(Commercial)						Commen	(ואוט								

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.

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

	Undine Texas	s, LLC			1326	0			
	Company N	ame		CCN Number(s)					
may be rev utility's offi rates will ap If the Com- ratepayers (municipality	rate change application in the control of the address below the address below ply to service received mission receives a sure 10 percent of the utility before the 91st day a ge for instructions of the change of the services of the service	change.puc.texas.go w or at the Commi I after the effective officient number of y's customers over ther the proposed	ssion's of date provests protests whose re	may also insp ffice (1701 N vided below, w , separately cates the Comm	pect a copy of the r . Congress Ave, Ausualess modified or a or in a combined poniession has original justices.	ate change application, TX 78701). It is uspended by the strotest letter, from a surisdiction) or from	eation at your The proposed Commission. at least 1,331 any affected		
(must be at l (Proposed ra bills all sums	EVE DATE OF PR least 35 days after notice tes requested by the utility collected during the per	ce is provided to cuity are not final. The indency of the rate po	stomers a: e Commis	nd 35 days aft sion may modi	er application is filed fy the rates and order	a refund or credit ag	ainst future		
) for Proposed Ra		•				ا د داد داد الله داد		
	i revenue requirer litate systems; cor					or capital expe	natures		
to remain	mate systems, con	tsouramon of u	ewiy ac	Quiteu syst	.C1113.				
BILLING Water	G COMPARISON	(assumes bas	e rate f	or 5/8" me	ter)				
Existing	5,000 gallons: \$	45.81	mo	Proposed	5,000 gallons: \$	91.76	/mo		
Existing	5,000 gallons: \$ 10,000 gallons: \$	63.51	mo	Proposed	5,000 gallons: \$ 10,000 gallons: \$	114.67	/mo		
Water]	Pass Through Ch								
Existing	5,000 gallons: \$		mo	Proposed	5,000 gallons: \$	\$ <u></u>	/mo		
Existing	10,000 gallons: \$	<u> </u>	mo	Proposed	5,000 gallons: \$ 10,000 gallons: \$	S <u></u>	_i /mo		
Sewer									
Existing	5,000 gallons: \$	/h	mo	Proposed	5,000 gallons: \$	3 .	/mo		
All system	ms formerly know	n as Pure Utilit	ties.	. •			• !		
		Subdivision(s)		(s) Affected I	by Rate Change				
	lge Road	Cypress		Tex	as	77429			
Compa	my Address	City		Sta	te	Zip			
(713) 574	1-5953						. ;		
	Phone Number	-			· · · · ·		<u> </u>		
6274 454	oó '				-	,	, ,		
\$644,484		771		1.TS		1	*		
Water Ann	ual Revenue Increase	Water Pass-Th	rough Ar	inuai Kevenu	e increase Sewei	Annual Revenue	increase		
12/19/24	2				N/A	. 1			

Date of Last Rate Change

Updated: September 29, 2021

Date Current Rate Change Notice Delivered

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>U.S.P.S.</u>
(method of delivery)
to each affected customer, each affected municipality, the Office of Public Utility Counsel, and any
other affected party on or about <u>DECEMBER 19</u> , 20 24
Lacey 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 NOTERMUND NOTERY Public, State of Texas NOTARY PUBLIC IN AND FOR THE
Notary Public, State 01.28-2025 NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS
NICIA ROTERMUND PRINT OR TYPE NAME OF NOTARY
MY COMMISSION EXPIRES JANUARY 28, 2025

Updated: September 29, 2021