

Control Number: 57386



Item Number: 1341

PUC DOCKET NO. 57386

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 4 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: JACK D. Last Name: EVANS

Phone Number: (817) 688 - 94/1 Fax Number: N/A
Phone Number: (817) 688-94// Fax Number: NA Email Address: weeje@swbell.net
Address, City, State: 310 AQVAVISTA DR GRANBURY, TX 76049 Location where service is received: Spans
Location where service is received: Spme (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.
CSWR DOUBLED RATES IN 2024. YEAR - YEAR A/O NOW INCHORSED 5676 ALL
☐ 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:
gallerano Date: 1/14/2025
Si desea informacion en Espanol, puede llamar al 1-888-782-8477
Hearing, and eneach impaired individuals with taxt talaphones may contact the PLICE's Customer Assistance, Hotling

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

512-936-7136

Updated: September 29, 2021

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CUR	RENT	RAT	ES					PRO	POS	ED I	RAT	ES						
Minimum Monthly Charge includes 0 gallons									Minimum Monthly Charge includes 0							gallons		
Meter Size:									Meter Size:									
RESID	ENTI	AL						RESIL	EN	TIA	L							
5/8" \$ 49.89								5/8"					\$	68.2	27			
3/4"					\$ 4	19.89	3/4"					\$	68.2	27				
1"					\$	109.99	1"						152	.89				
1 1/2"					\$:	219.99		1 1/2"					\$	305	.78	'-1'		
2"					\$:	351.99	2"					\$	489	.24				
3"				\$:	351.99	3"					\$	917	.33					
Other: Unmetered				\$ 81.09				Other:	Other: Unmetered					118	.54			
	G	ALL	ONAG	E CH	AR	GE:				GA	LLC	ONAGE	CHA	RGI	E:			
TIER	VOL	VOLUME				HARO 000 gals		TIER	OLUME				CHARC 1000 gals.					
Tion I							/1000	Tilles 1							0.00	/1000		
Tier 1	0	to	All	gals	. \$	5.2	gals. /1000	Tier 1	0	-	to	All	gals	. \$	8.38	gals. /1000		
Tier 2		to		gals	S	0	gals.	Tier 2			to		gals	. \$		gals.		
							/1000					17.5		1		/1000		
Tier 3		to		gals	. \$	0	gals.	Tier 3			to		gals	. \$		gals.		
Tier 4	0	to		gals		0	/1000 gals.	Tier 4			***		anle	. s		/1000		
Tiel 4	0	to	W	gais	. 9	U	/1000	1101 4		_	to		gals			gals. /1000		
Tier 5		to		gals	. \$		gals.	Tier 5		11	to		gals	. \$		gals.		
W. J.	M	ISCI	ELLAN	NEOU	SFI	EES	2 10			MI	SCE	LLAN	EOUS	FEE	S	129		
Tap Fee \$ Actual Cost						Tap Fee \$ Act						ctual	Cost					
Reconnect Fee: Non-payment						Reconnect Fee: Non-payment												
\$ 25							(Maximum - \$25.00)			00)	\$ 25			00				
Customer's Request				\$ 25				Customer's Request					25					
Transfer Fee				\$ 10				Transfer Fee					10	_				
Late Charge				\$ 10%				Late Charge (Indicate either \$5.00 or 10%)					%					
Returned Check Charge				\$ 25									\$ 25					
Deposit				\$ 50				Deposit (Maximum \$50.00)					5 50					
Meter Test Fee			e	\$ 25				Meter Test Fee					\$ 25					

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.

(Maximum - \$25.00)

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