



**Texas Commission on Environmental Quality
Application to Obtain or Amend a Water/Sewer
Certificate of Convenience and Necessity (CCN)
Under Water Code Section 13.255**

1. Applicant: _____
(Name of City)
Address: _____
City State Zip Code
Phone and Fax Number: _____
(Area Code/number (Area Code/Fax)
Tax Identification Number: _____

2. The purpose of this application is to (check one): ___ obtain single certification to a service area within the city's corporate limits, and /or ___ amend a Certificate of Convenience and Necessity (CCN) No. _____ to provide _____ water or _____ sewer service to the: _____
(Name of Subdivision or Area)
and to decertify a portion of _____
(Name of Utility) (CCN No.)

3. Applicant is requesting a certificate to provide utility service in the following county(ies): _____

4. Contact Person: Please provide information about the person to be contacted regarding this application. Indicate if this person is the owner, operator, engineer, attorney, accountant, or other title related to the applicant.
Name: _____
Title: _____
Address: _____
City State Zip Code
Phone and Fax Number: _____
(Area Code/number (Area Code/Fax)

Please provide the name and address of the retail public utility currently certificated to the area involved in this application:

Utility Name: _____
Address: _____
City State Zip Code
Phone and Fax Number: _____
(Area Code/number (Area Code/Fax)

5. Please provide the person's name and address who has been representing the retail public utility during negotiations with the city over the service area involved:

Name: _____

Title: _____

Address: _____

City State Zip Code

Phone and Fax Number: _____

(Area Code/number (Area Code/Fax)

6. When this was proposed service area incorporated by the city? _____
Date

7. What date did negotiations begin between the city and the retail public utility?

(Date)

8. When was notice of the city's intent to provide service to the incorporated or annexed area provided to the retail public utility? _____

(Date)

Please attach a copy of the notice provided. Also attach a copy of the mailing list indicating to whom such notice was provided.

9. Please provide a brief description of the retail public utility's facilities in the service area involved in this application. Also indicate how many customers are currently receiving service from the retail public utility in this area:

10. When can city service to the area begin? _____
Date

11. If the city will allow a franchised utility to provide service to the area involved, please attach a copy of the city consent or franchise agreement and provide the following information:

Utility Name: _____

Address: _____

City State Zip Code

Phone and Fax Number: _____

(Area Code/number (Area Code/Fax)

Franchised Utility's CCN Number: _____

Franchised Utility's contact person and their address:

Name: _____

Title: _____

Address: _____

City State Zip Code

Phone and Fax Number: _____

(Area Code/number (Area Code/Fax)

12. Attach the following maps with each copy of the application: (All maps should include applicant's name, address, telephone number, and date of drawing or revision. All maps should be folded to 8½ x 11 inches).

A. Subdivision plat or engineering plans or other large scale map showing the following:

1. The exact proposed service area boundary showing locations of requests for service and locations of existing connections (if applicable).
2. Metes and bounds (if available).
3. Proposed and existing service area boundaries should be plotted on the map in relation to verifiable natural and man-made landmarks such as roads, creeks, rivers, railroads, etc.
4. *Service area boundaries should be shown with such exactness that they can be located on the ground.*

★ NOTE: *Applicant may use a USGS 7.5"-minute series map if no other large scale map is available.*

B. Small scale location map delineating the proposed service area. The proposed service area boundary should be delineated on a copy of the TCEQ official CCN map. This map will assist TCEQ staff in locating the proposed service area in relation to neighboring utility service areas. *A copy of the TCEQ official CCN map may be obtained by contacting the Utilities & Districts Section at 512/239-4691 or by mailing a written request to the following address:*

Texas Commission on Environmental Quality
Water Supply Division
Utilities & Districts Section
MC-153
P.O. Box 13087
Austin, TX 78711-3087


C. **Hard copy maps should include the following items:**

1. Map scale should be prominently displayed.
2. Color coding should be used to differentiate the applicants existing service areas from the proposed service area.
3. Attach a written description of the proposed service area.
4. Proposed service area should be the same on all maps.
5. Include map information in digital format (if available), *see 15, GIS Information.*

D. Each utility shall make available to the public at each of its business offices and designated sales offices within Texas the map of the proposed service area currently on file with the Commission. The applicant employees shall lend assistance to persons requesting to see a map of the proposed area upon request.

13. GIS INFORMATION

- A. Digital Map Requirements:** In order that your digital data can be properly used, the following information is necessary:
- i. Submit digital data of the proposed CCN service area on a 3.25" diskette or CD. Only one diskette or CD is necessary. Most files of CCNs (minus the base map) should be small enough to zip up and put on a diskette or CD.
 - ii. The digital data should include all items represented in the hard copy maps.
 - iii. Please identify data file format, projection information, map units and base map used. **Acceptable Data File Formats:**
 1. ArcView shape file (preferred)
 2. AutoCAD dwg file

★ **NOTE:** TCEQ uses TxDOT county (urban) digital road maps as the official CCN base map. Copies of these files can be obtained from Texas Natural Resources Information Systems (TNRIS) at (512) 463-8337 or downloaded from the TNRIS [website](#). 

If you have any questions about sending the data or our GIS CCN coverage, please contact the Cartographer of the Utilities & Districts Section, Water Supply Division at (512) 239-4691.

ALL APPLICABLE QUESTIONS MUST BE ANSWERED FULLY.

THE APPLICATION WILL NOT BE ACCEPTED FOR FILING WITHOUT MAPS.

PLEASE NOTE THE FILING OF THIS APPLICATION DOES NOT CONSTITUTE AUTHORITY TO PROVIDE WATER/SEWER SERVICE IN THE REQUESTED AREA.

OATH

State of _____

County of _____

I, _____ being duly sworn, file this

application under V.T.C.A., Water Code Section 13.255 as _____
(Name of the City); that, in such capacity, I am qualified and authorized to file and
verify such application, am personally familiar with the maps filed with this application,
and have complied with all the requirements contained in this application; and, that all
such statements made and matters set forth therein are true and correct. I further state
that the application is made in good faith and that this application does not duplicate
any filing presently before the Texas Commission on Environmental Quality.

I further represent that the application form has not been changed, altered or amended
from its original form available only from the Commission.

**I further represent that the Applicant will provide continuous and adequate
service to all customers and qualified applicants for service within its
certificated service area.**

AFFIANT

(Applicant's Authorized Representative)

If the Affiant to this form is any person other than the sole owner, partner, officer of the
Applicant, or its attorney, a properly verified Power of Attorney must be enclosed.

SUBSCRIBED AND SWORN TO BEFORE ME, a Notary Public in and for the State of
Texas, this _____ day of _____ 20 _____

SEAL

NOTARY PUBLIC

**INSTRUCTIONS FOR APPLICATION TO OBTAIN OR AMEND A
WATER/SEWER CERTIFICATE OF CONVENIENCE AND NECESSITY (CCN)
UNDER WATER CODE SECTION 13.255**

INSTRUCTIONS & CHECKLIST

* Registry Number (RN) and Customer Number (CN). The TCEQ has begun systematically removing requests for basic information from registration, permitting and licensing forms - one program at a time. Instead, we are requesting this information on a Core Data Form. As data is transferred into the Central Registry, the registry will automatically assign a unique number to each customer and regulated entity. You will be given identification numbers which can then be used when updating information, completing other agency forms, or otherwise contacting the agency. Numbers issued by the Central Registry do not replace current permit, license, or registration numbers. Each CCN holder will have a CN number. If you do not already have a RN and/or CN number please fill out form (TCEQ-10400) "Core Data Form" available at the [Forms Search Website](#). If the application is downloaded from the TCEQ web site or via E-mail, it shall not be changed, altered or amended from its original form only available from the Commission.

1. You must answer each question on the application completely. If you need additional space, you may attach additional sheets clearly labeled with the applicant's name. If a question is not applicable, please mark it N.A. and briefly explain why the question does not apply.

DO NOT LEAVE ANY QUESTIONS BLANK.

2. You must provide an original & three (3) copies of each of the following items in order for the application to be accepted for filing.
 - o Completed application form, including any attachments
 - o Copy of notice of city's intent to serve the incorporated or annexed area to the retail public utility
 - o Completed Oath
 - o Maps - See Questions 12 and 13 on the application form for more details.
 - o **No required filing fee.**

★ The completed application should be sent to:

Texas Commission on Environmental Quality

Water Supply Division

Utilities & Districts Section

MC-153

P. O. Box 13087

Austin, TX 78711-3087