

**RESOLUTION NO. 2024-R-325**

**A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF LAREDO, TEXAS APPROVING AND AUTHORIZING THE CITY MANAGER TO EXECUTE AND SUBMIT AN APPLICATION FOR MEMBERSHIP WITH THE LEGACY WATER SUPPLY CORPORATION (“LWSC”); APPOINTING THE CITY MANAGER TO SERVE AS THE CITY’S AUTHORIZED REPRESENTATIVE FOR INTERACTING WITH THE LWSC AND TO SERVE IN ANY POSITIONS WITH THE LWSC TO PROMOTE THE INTERESTS OF THE CITY AND EXECUTE ALL NECESSARY DOCUMENTS RELATING THERETO.**

**WHEREAS**, the City of Laredo, Texas (“City”) desires to take the actions required to improve the living environment and expand economic opportunities for its residents by maintaining a reliable utility system with redundancy and supplemental infrastructure and resources; and

**WHEREAS**, interconnection and cooperation between utilities promotes redundancy and increased resource availability to maintain a safe, sanitary, and reliable sewer and water network of utilities and prevents and protects against the existence of threats to the public health, safety, and welfare and assures the City’s ability to maintain development, job creation, and to increase the tax base of the City; and

**WHEREAS**, it is necessary and in the best interests of the City to support and participate in comprehensive and regional projects in cooperation with the Area Groundwater Utility Agency (“AGUA”), the LWSC, and other political subdivisions, non-profit entities, and federal and state agencies to promote the public health, safety, and welfare and provide economic opportunity for the City and its residents;

**NOW, THEREFORE, BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF LAREDO THAT:**

**Section 1:** The application for membership in and service from the LWSC attached hereto as **Exhibit A** is approved, and the City Manager is authorized to execute said application and submit the same on behalf of the City for consideration and action.

**Section 2:** The City Council appoints the City Manager as the City’s Authorized Representative in all matters related to the operation of and membership in the LWSC, and authorizes said representative to take all actions, cast all votes, and apply for, and if appointed and or elected, serve in any positions with the LWSC as reasonably required for the purpose of protecting and promoting the best interests of the City.

**PASSED BY THE CITY COUNCIL AND APPROVED BY THE MAYOR ON THIS**  
**\_\_\_\_\_ DAY OF \_\_\_\_\_, 2024.**

**DR. VICTOR D. TREVIÑO**  
**MAYOR**

**ATTEST:**

**MARIO MALDONADO, JR.**  
**CITY SECRETARY**

**APPROVED AS TO FORM:**

**DOANH T. NGUYEN**  
**CITY ATTORNEY**

**BY: RODOLFO MORALES, III**  
**ASSISTANT CITY ATTORNEY**

## **EXHIBIT A**

### **LEGACY WATER SUPPLY CORPORATION** **APPLICATION FOR CUSTOMER MEMBER CLASS**

For any clarifications, please contact Legacy Water Supply Corporation, c/o Earl & Associates, P.C., General Counsel to Legacy Water Supply Corporation ("LWSC") at 10007 Huebner Road, Suite 303, San Antonio, Texas 78240, by telephone (210) 868-6500, or e-mail: [dearl@earl-law.com](mailto:dearl@earl-law.com).

Please submit the application to the LWSC for consideration by mail or e-mail upon completion.

#### **Membership Class: Customer Member Class**

#### **Applicant Information:**

Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Point of Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Numbers Office: (\_\_\_\_) \_\_\_\_-\_\_\_\_ Mobile: (\_\_\_\_) \_\_\_\_-\_\_\_\_

Type of Applicant: ☐ Government Entity ☐ Special Dist. ☐ Corp./Company/Partnership ☐ Individual

Entity Member: Tax I.D. No./EIN: \_\_\_\_-\_\_\_\_ Individual Member: SSN: \_\_\_\_-\_\_\_\_-\_\_\_\_

CCN Numbers (if applicable): ☐ Water: \_\_\_\_\_ ☐ Wastewater: \_\_\_\_\_

#### **Please check the box(es) next to the service(s) you will be requesting from the LWSC:**

☐ Wholesale Potable Water Supply: Initial Qty: \_\_\_\_\_ GPD, Max Qty: \_\_\_\_\_ GPD

☐ Potable Utility Interconnect: Size: \_\_\_\_" Material: \_\_\_\_\_ Location. DD: + \_\_\_\_ - \_\_\_\_

☐ Wholesale Raw Water Supply: Initial Qty: \_\_\_\_\_ GPD, Max Qty: \_\_\_\_\_ GPD

☐ Raw Water Interconnect: Size: \_\_\_\_" Material: \_\_\_\_\_ Location. DD: + \_\_\_\_ - \_\_\_\_

☐ Wholesale Wastewater Treatment: Initial Qty: \_\_\_\_\_ GPD, Max Qty: \_\_\_\_\_ GPD

☐ Wholesale Drainage Service: Drainage Area: \_\_\_\_\_ Acres, Max Flow: \_\_\_\_\_ C.F.M.

☐ Other: \_\_\_\_\_

#### **APPLICANT'S SIGNATURE**

By signing below, I certify that I am applying for membership in the **Customer Member Class** of Legacy Water Supply Corporation for the individual or entity indicated below, that I am authorized to make this application, and that the information contained within this application and all supporting documents is true, accurate, and complete to the best of my knowledge.

#### **APPLICANT:**

By: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

APPROVED BY LWSC BOARD ON: \_\_\_\_/\_\_\_\_/\_\_\_\_ BOARD SECRETARY: \_\_\_\_\_

REV. 8/27/2024