

Control Number: 44523



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CONSENT FORM

RECEIVED

Applicant's Name: City of Dripping Springs

Docket No.: 44523

2016 MAR 10 PM 2: 17

PUBLIC UTILITY COMMISSION FILING CLERK

X	concur with the map and certificate transmitted by e-mail	on
-	<u>ebruary 29, 2016.</u>	

I do not concur with the map and certificate transmitted by e-mail on **February 29, 2015, 2016.** I understand that I have 14 days from the date of this email to provide my response.

	by the City of Dripping Springs, to sign this form.
Signature:	D1 1.7111
	DAVID J. Tuckfield
	pplicant: ATIORNEY
. Date signed:	3/9/16

Please mail the original and 10 copies to:
 Lisa Fuentes
 Water Utilities Division
 Public Utilities Division of Texas
 P.O. Box 13326
 Austin, Texas 78711-3326

or for Shipping/Overnight Delivery:
Public Utility Commission of Texas
Central Records
1701 N. Congress, Suite 8-100
Austin, Texas 78701

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