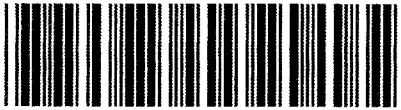


Control Number: 45624



Item Number: 156

Addendum StartPage: 0

**Larry W. Fields**

P.O. Box 129  
Carthage, Texas 75633

2016 MAR 30 AM 9:52  
PUBLIC UTILITY COMMISSION  
FILING CLERK

March 28, 2016

Public Utility Commission of Texas  
Central Records  
Attn: Filing Clerk  
P.O. Box 13326  
Austin, Texas 78711-3326

Via Overnight Mail

RE: Request to Intervene in PUC Docket No. 45624

Dear Sirs:

Enclosed you will find the original and 10 copies of my Request to Intervene.

Very Truly,



Larry W. Fields

156

# Request to Intervene in PUC Docket No. 45624

The following information must be submitted by the person requesting to intervene in this proceeding. This completed form will be provided to all parties in this docket. **If you DO NOT want to be an intervenor, but still want to file comments, please complete the "Comments" page.**

Mail this completed form and 10 copies to:

Public Utility Commission of Texas  
Central Records  
Attn: Filing Clerk  
1701 N. Congress Ave.  
P.O. Box 13326  
Austin, TX 78711-3326

First Name: LARRY Last Name: FIELDS  
Phone Number: 903 693 8888 Fax Number: 903 693 9009  
Address, City, State: P.O. Box 129, CASTHARCO TX 75637

**I am requesting to intervene in this proceeding. As an INTERVENOR, I understand the following:**

- ☐ I am a party to the case;
- ☐ I am required to respond to all discovery requests from other parties in the case;
- ☐ If I file testimony, I may be cross-examined in the hearing;
- ☐ If I file any documents in the case, I will have to provide a copy of that document to every other party in the case; and
- ☐ I acknowledge that I am bound by the Procedural Rules of the Public Utility Commission of Texas (PUC) and the State Office of Administrative Hearings (SOAH).

**Please check one of the following:**

- ☐ I own property with a habitable structure located near one or more of the utility's proposed routes for a transmission line.
- ☒ One or more of the utility's proposed routes would cross my property.
- ☐ Other. Please describe and provide comments. You may attach a separate page, if necessary. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature of person requesting intervention:**



Date: 3-25-16