



Filing Receipt

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The following files are not convertible:

Copy of City of Pyote Oncor Critical
Load Application Template - Municipalities (003).xlsx

Please see the ZIP file for this Filing on the PUC Interchange in order to access these files.

Contact centralrecords@puc.texas.gov if you have any questions.

APPLICATION FOR CRITICAL LOAD STATUS -

PART TWO:

To be completed by the member. All information is required.

Critical load designation category:

(Please select the most applicable category and subcategory, if applicable)

Public safety

A member for whom electric service is considered crucial for the protection or maintenance of public safety, including but not limited to hospitals, police stations, fire stations, and critical water and wastewater facilities.

*Texas Department of State Health Services license number required

- | | |
|---|---|
| <input checked="" type="checkbox"/> Hospital – trauma center* | <input checked="" type="checkbox"/> Emergency alert system primary or secondary transmitter |
| <input checked="" type="checkbox"/> Hospital – with surgery or emergency treatment* | <input checked="" type="checkbox"/> 9-1-1 center |
| <input checked="" type="checkbox"/> Licensed day surgery* | <input checked="" type="checkbox"/> Police |
| <input checked="" type="checkbox"/> Licensed emergency care* | <input checked="" type="checkbox"/> Fire |
| <input checked="" type="checkbox"/> Licensed dialysis clinic* | <input checked="" type="checkbox"/> Water/sewage deemed critical – note that some community water and waste facilities may qualify, however, not all individual wells, sewer lift stations etc. qualify as critical |
| <input checked="" type="checkbox"/> Licensed birthing clinic* | <input checked="" type="checkbox"/> Flood control |
| <input checked="" type="checkbox"/> Licensed skilled nursing facility* | <input type="checkbox"/> Other (explain) |
| <input checked="" type="checkbox"/> Licensed unskilled nursing facility* | |
| <input checked="" type="checkbox"/> Licensed assisted living facility* | |
| <input checked="" type="checkbox"/> Hospice services facility* | |
| <input checked="" type="checkbox"/> Major or regional airport | |

Industrial

An industrial member for whom an interruption or suspension of electric service will create a dangerous or life-threatening condition on the member's premises.

Natural gas infrastructure

A member that supports natural gas-fired generation, including gas control center or gas compressor plant.

Please provide detail for consideration of Critical Load status and attach supporting information for consideration.

APPLICATION FOR CRITICAL LOAD STATUS -

PART ONE:

To be completed by the member. All information is required.

Member name on account: City of Pyote

Member account number: W02380005

Service address (found on your electric bill):

Blk 16 NE 4 Section 20 Monahans Tx 79756
201 E 11th st
40 E Avenue A Star
Hwy 80 Fm 115
102 W Dooley

Mailing address (if different than service address):

PO Box 137 Pyote Tx 79777
P.O. Box 137 Pyote Tx 79777
P.O. Box 137 Pyote Tx 79777
P.O. Box 137 Pyote Tx 79777
P.O. Box 137 Pyote TX 79777

Member primary phone number:

432-389-5845

Member alternate phone number:

432-208-5682

Member primary email:

City@Cityofpyote.org

Member alternate email (if any):

Secretary@Cityofpyote.org

MEMBER:

The undersigned, on behalf of the member, has read and understood the information and certifies that the information provided on this Application is correct and understands the information will be used to determine whether the member is eligible for designation of Critical Load status.

Signature: Yolanda Graves

Date: 10-15-2021

Printed name: Yolanda Graves

Title: Secretary