

Filing Receipt

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# Application for Critical Load Public Safety or Critical Load Industrial Customer (Non-

# Residential) Status

This application must be completed in order to request the designation of Critical Load Public Safety or Critical Load Industrial Customer (Non-Residential) status.

The criteria for qualification as Critical Load Public Safety or Critical Load Industrial are provided in the <u>Public Utility Commission of Texas Substantive Rule 25.497</u>. Designation of critical load does not guarantee an uninterrupted supply of electricity. It is the responsibility of the Retail Customer to make arrangements for alternative sources of electric power should a localized outage or load shed event occur.

Upon completion of the review of the submitted application, you will be notified of the results.

DESIGNATION OF A CRITICAL LOAD DOES NOT GUARANTEE AN UNINTERRUPTED SUPPLY OF ELECTRICITY.

It is the responsibility of the customer to make arrangements for alternative sources of electric power should a localized outage or significant load shed event occur.

\* Required Fields

Email Address *		
sgsud@frontier.com		
First Name *	Last Name *	
South Grayson	Special Utility District	
Phone Number		
903-482-6231		

Reason for application (please choose one)\*

Retail Electric Provid	ler Details	
Are you a Retail Electric P	rovider?	
Customer Contact D	etails	Fragmenne groups and propose a service a propose and a black and a service above and the constitution of the fight fill and her compared to be accompanion and associated as a finding and a service and associated as a finding and a service and associated as a finding and as a finding and associated as a finding and as a finding and a service and associated as a finding and as a
Name (if different from above):		
John Spencer	one title kan dan still still som et a see kan ken som på kan om en	The state of the s
Contact Title:		
General Manager	Managarin kanada and and and and and and and and an	
Mailing Address (please include	City, ST, & Zip):	
209 B.H. Cooke Ln Van Alst	yne, TX 75495	
Phone:	Cell:	
903-482-6231		
Email Address:	,	
sgsud@frontier.com		
Service Address Info	rmation	
Customer: (Customer Name ass	ociated with the ESI ID	O or Premise). *
South Grayson Special Utilit	y District	planetal annual
		e nearby roadway, and/or distance to the closest town). Congitude, please enter 'N/A' here). *
1252 N. Hill ST		The contract of the contract o
Latitude/Longitude (if known):		
City: *	Zip Code: *	
Van Alstyne	75495	
ESI ID (17 digits): *		
10443720007356518		
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Please select the type of facility and/or describe the specific public safety issue that may result from an interruption of normal power service (reference <u>Public Utility Commission of Texas Substantive Rule 25.497</u>):

Start by selecting the applicable services groone)	oup for this application from the following (select only			
Healthcare Services				
Public Services (Airport, Municipal, etc.)				
Critical Load Serving Electric Generation a	and Cogeneration (Gas/Pipeline Infrastructure)			
Critical Load Industrial				
Municipal water well				
Describe any existing battery or backup capacity	or dual feed capability (required)*			
None				
Battery Backup	Back up capacity (kW)  Back up capacity (kW)			
Backup Generation	Owner of transfer switch			
Utility dual feed capability	Section to automation and design are operated in a distance and according in the section and design are sent d			
Length of time the facility can operate without elec	ctricity from the electric utility:			
	- Section of the Control of the Cont			
Length of time required for start-up following a po	wer outage:			
5 min				
Attachments				
Feel free to attach any applicable files. (maxi	mum of 5)			
Choose File No file chosen				
Submit				

PART ONE:	
To be completed by the member. All information is required.	
Member name on account: South Grayson SUD	
Member account number: 200567100	
Service address (found on your electric bill):	Mailing address (if different than service address):
209 B.H. Cooke Ln	209 B.H. Cooke Lane
Van Alstyne, TX 75495	Van Alstyne, TX 75495
,	
Member primary phone number:	Member alternate phone number:
903-482-6231	903-482-9408
000 102 0201	300 402 0400
Member primary email:	Member alternate email (if any):
sgsud@frontier.com	wember alternate email (ii arry).
- sysua@nonuer.com	
MEMBER:	
The undersigned, on behalf of the member, has read and understands the infe	
provided on this Application is correct and understands the infe eligible for designation of Critical Load status.	ormation will be used to determine whether the member is
Signature: John W. Spenson	10/18/2021 Date:
- 1/	
Printed name: John D. Spencer	Title: General Manager

**PART TWO:** 

To be	e com	pleted by the member. All information is required.		
		ad designation category: lect the most applicable category and subcategory, if	applica	able)
<b>V</b>	A me but n	ic safety  mber for whom electric service is considered crucial ot limited to hospitals, police stations, fire stations, an as Department of State Health Services license numb	nd critic	al water and wastewater facilities.
		Hospital – trauma center*  Hospital – with surgery or emergency treatment*		Emergency alert system primary or secondary transmitter
		Licensed day surgery*		9-1-1 center Police
		Licensed emergency care*  Licensed dialysis clinic*		Fire
		Licensed birthing clinic*	<b>V</b>	Water/sewage considered critical – note that some community water and waste facilities may qualify,
		Licensed skilled nursing facility*  Licensed unskilled nursing facility*		however, not all individual wells, sewer lift stations etc. qualify as critical.
		Licensed assisted living facility*		Flood control Other (explain)
		Hospice services facility*		
		Major or regional airport		
		strial dustrial member for whom an interruption or suspens nreatening condition on the member's premises.	sion of (	electric service will create a dangerous or
		ral gas infrastructure mber that supports natural gas-fired generation, inclu	uding g	as control center or gas compressor plant.

To be completed by the member. All information is required.	
Member name on account: South Grayson SUD	
Member account number: 8281800	
Service address (found on your electric bill):	Mailing address (if different than service address):
69 Kepler Rd	209 B.H. Cooke Lane
Van Alstyne, TX 75495	Van Alstyne, TX 75495
Member primary phone number:	Member alternate phone number:
903-482-6231	903-482-9408
Member primary email:	Member alternate email (if any):
sgsud@frontier.com	
MEMBER:	
The undersigned, on behalf of the member, has read and und provided on this Application is correct and understands the inf	
eligible for designation of Critical Load status.	ormation that be deed to determine whother the morning to
Signature: John Spens	10/18/2021 Date:
Printed name: John D. Spencer	Title: General Manager

	tical load designation category: ease select the most applicable category and subcategory,	applicable)	
<b>/</b>	Public safety A member for whom electric service is considered crucial but not limited to hospitals, police stations, fire stations, a *Texas Department of State Health Services license num	d critical water and wastewater facilities.	safety, includinç
	Hospital – trauma center*  Hospital – with surgery or emergency treatment*  Licensed day surgery*  Licensed emergency care*  Licensed dialysis clinic*  Licensed birthing clinic*  Licensed skilled nursing facility*  Licensed unskilled nursing facility*  Licensed assisted living facility*  Hospice services facility*	Emergency alert system primary of secondary transmitter  9-1-1 center  Police  Fire  Water/sewage considered critical – community water and waste facilitie however, not all individual wells, se etc. qualify as critical.  Flood control  Other (explain)	note that some
	Industrial An industrial member for whom an interruption or suspen life-threatening condition on the member's premises.	on of electric service will create a dangero	us or
	Natural gas infrastructure  A member that supports natural gas-fired generation, incl	ding gas control center or gas compressor	plant.

PART ONE:	
To be completed by the member. All information is required.	
Member name on account: South Grayson SUD	
Member account number: 8344400	
Service address (found on your electric bill):	Mailing address (if different than service address):
6964 FM 121	209 B.H. Cooke Lane
Van Alstyne, TX 75495	Van Alstyne, TX 75495
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Member primary phone number:	Member alternate phone number:
903-482-6231	903-482-9408
Member primary email:	Member alternate email (if any):
sgsud@frontier.com	
MEMBER:	
The undersigned, on behalf of the member, has read and under the control of the member	
provided on this Application is correct and understands the info eligible for designation of Critical Load status.	ormation will be used to determine whether the member is
Signature: La	10/18/2021 Date:
Printed name: John D. Spencer	Title: General Manager

PART TWO:

To b	e com	npleted by the member. All information is required.		
		pad designation category: elect the most applicable category and subcategory, i	f applica	able)
<b>V</b>	A me	lic safety ember for whom electric service is considered crucial not limited to hospitals, police stations, fire stations, a as Department of State Health Services license num	nd critic	cal water and wastewater facilities.
		Hospital – trauma center*  Hospital – with surgery or emergency treatment*		Emergency alert system primary or secondary transmitter
		Licensed day surgery*		9-1-1 center
		Licensed emergency care*  Licensed dialysis clinic*		Police Fire
		Licensed birthing clinic*	<b>V</b>	Water/sewage considered critical – note that some community water and waste facilities may qualify,
		Licensed skilled nursing facility*  Licensed unskilled nursing facility*		however, not all individual wells, sewer lift stations etc. qualify as critical.
		Licensed assisted living facility*		Flood control
		Hospice services facility*		Other (explain)
		Major or regional airport		
	An ir	estrial Industrial member for whom an interruption or suspense hreatening condition on the member's premises.	sion of e	electric service will create a dangerous or
		ural gas infrastructure ember that supports natural gas-fired generation, incl	uding ga	as control center or gas compressor plant.

To be completed by the member. All information is required.	
Member name on account: South Grayson SUD	
Member account number: 197499900	
Service address (found on your electric bill):	Mailing address (if different than service address):
318 Haun Rd	209 B.H. Cooke Lane
Van Alstyne, TX 75495	Van Alstyne, TX 75495
Member primary phone number:	Member alternate phone number:
903-482-6231	903-482-9408
Member primary email:	Member alternate email (if any):
sgsud@frontier.com	
MEMBER:	
The undersigned, on behalf of the member, has read and understands on this Application is correct and understands the infeligible for designation of Critical Load status.	
Signature:   A personal signature:	10/18/2021 Date:
Printed name John D. Spencer	Title: General Manager

PART TWO:

To b	e com	pleted by the member. All information is required.				
		ad designation category: lect the most applicable category and subcategory, it	annlic	ahla)		
(1 100	436 36	lect the most applicable category and subcategory, is	аррис	able)		
•	A me	ic safety mber for whom electric service is considered crucial ot limited to hospitals, police stations, fire stations, a as Department of State Health Services license number	nd critic	cal water and wastewater facilities.		
		Hospital – trauma center*		Emergency alert system primary or secondary transmitter		
		Hospital – with surgery or emergency treatment*  Licensed day surgery*		9-1-1 center		
		Licensed emergency care*		Police		
		Licensed dialysis clinic*		Fire		
		Licensed birthing clinic*	<b>V</b>	Water/sewage considered critical – note that some community water and waste facilities may qualify,		
		Licensed skilled nursing facility*		however, not all individual wells, sewer lift stations etc. qualify as critical.		
		Licensed unskilled nursing facility*		Flood control		
	Licensed assisted living facility*		H	Other (explain)		
	Hospice services facility*					
		Major or regional airport				
		strial dustrial member for whom an interruption or suspens reatening condition on the member's premises.	sion of (	electric service will create a dangerous or		
		ral gas infrastructure mber that supports natural gas-fired generation, incl	uding g	as control center or gas compressor plant.		

PART ONE:  To be completed by the member. All information is required.	×
Member name on account: South Grayson SUD	<del></del>
Member account number: 199169100	
Service address (found on your electric bill):	Mailing address (if different than service address):
189 GT Bailey Lane	209 B.H. Cooke Lane
Van Alstyne, TX 75495	Van Alstyne, TX 75495
Member primary phone number:	Member alternate phone number:
903-482-6231	903-482-9408
Member primary email:	Member alternate email (if any):
sgsud@frontier.com	
MEMBER:	
The undersigned, on behalf of the member, has read and under provided on this Application is correct and understands the info eligible for designation of Critical Load status.	
	10/18/2021 Date:
Printed name: John D. Spencer	Title: General Manager

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)				
j k	Public safety A member for whom electric service is considered crucial out not limited to hospitals, police stations, fire stations, are Texas Department of State Health Services license number Hospital – trauma center*	nd critic	cal water and wastewater facilities.  uired.  Emergency alert system primary or	
[] [] [] []	Hospital – with surgery or emergency treatment*  Licensed day surgery*  Licensed emergency care*  Licensed dialysis clinic*  Licensed birthing clinic*  Licensed skilled nursing facility*  Licensed unskilled nursing facility*		secondary transmitter  9-1-1 center  Police  Fire  Water/sewage considered critical – note that some community water and waste facilities may qualify, however, not all individual wells, sewer lift stations etc. qualify as critical.  Flood control	
] ] ]	Licensed assisted living facility*  Hospice services facility*  Major or regional airport		Other (explain)	
	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.			