

Control Number: 54565



Item Number: 415

## PUC DOCKET NO. 54565

## RATEPAYER COMMENTS/REQUESTS TO HYTERVENE

If you wish to PROTEST the proposed rate change, you must complete this form and file it electronically using the PUC Interchange Filer (http://www.puc.texas.gov/industry/filings/E-FilingInstructions.pdf) or mail the original to:

PUBLIC UTILITY COMMISSION
FILING CLERK

Filing Clerk
Public Utility Commission of Texas
1701 North Congress Avenue
P.O. Box 13326
Austin, Texas 78711-3326

No hearing will be held and the rates will be effective as proposed <u>unless</u> protests are received from at least 10% of ratepayers or from any affected municipality, or the Commission Staff requests a hearing.

CUSTOMER INFORMATION (please provide all of the requested information)
First Name: RAYMOND Last Name: HOOKS  Phone Number: 281-635-1364 Fax Number:
Phone Number: 281-635-1364 Fax Number:
Email Address: raymondhook55R@GMAIL.Com
Email Address: <u>VAYMONDHOOKS</u> SR@GMAIL.COM  Address, City, State: <u>2/502</u> BRIAR OAK DR., HUMBLE, TX 77338
Location where service is received:  (if different from the mailing address)  AMBERWOOD WAS JUST AGUINED BY  Please select the applicable: X CSWR-TERAS IN NOVEMBER 2022, TT  15 WAY TO SOON TO INCREASE WATER RATE
I wish to PROTEST the following proposed rate action/s:  ☐ I wish to be a COMMENTER. I understand that: I am NOT a party to this case; my comments are not considered evidence in this case; and I have no further obligation to participate in the proceeding. Public comments may help inform the PUCT of the public concerns and identify issues to be explored. Please provide comments below. Attach a separate page, if necessary.
I am requesting to INTERVENE in this proceeding. As an INTERVENOR, I understand that: I am a party to the case: I am required to respond to all discovery requests from other parties; I may be required to attend hearings. and if I file testimony, I may be cross-examined in the hearing; if I file any documents in the case. I must provide a copy to every other party in the case; and I acknowledge that I am bound by the Procedural Rules of the PUCT and the State Office of Administrative Hearings (SOAH).
Signature of Ratepayer:  Date: 2-8-23

Si desea informacion en Espanol, puede llamar al 1-888-782-8477

Hearing- and speech-impaired individuals with text telephones may contact the PUCT's Customer Assistance Hotline