## Control Number: 55067

Item Number: 445

Request to Intervene in PUC Docket No. 55067	
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.	
For USPS, send one copy to:	PUBLIC UTILITY GREEBSIDE For all other delivery or courier services is the LERG
Public Utility Commission of Texas Central Records P.O. Box 13326 Austin, TX 78711-3326	Public Utility Commission of Texas Central Records 1701 N. Congress Ave. Austin, TX 78701
First Name: <u>Jowillian</u> Phone Number: <u>787-348-4076</u>	Last Name: <u>Costro</u>
Address, City, State: 1035 Timber Ridge Email Address: jcastrogarcia@gmail	e Dr Justin, TX 76247
Email Address: ) CASILUJOICIAL GMAILCOM	

## 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.

 $\hfill\square$  One or more of the utility's proposed routes would cross my property.

I Other. Please describe and provide comments. You may attach a separate page, if necessary.

This utility would negatively affect my family, my property, and my community. I have family members with health resures I fear would be impacted by this utility project. In addition, I fear property prices and value will be negatively affected without any benefit.

## Signature of person requesting intervention:

Date:

Effective: April 8, 2020