



Filing Receipt

Filing Date - 2025-05-06 07:27:01 PM

Control Number - 55983

Item Number - 176



INTEGRITY
EXCELLENCE
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05/06/2025

Public Utility Commission of Texas
1701 N. Congress Ave.
PO Box 13326
Austin, TX 78711-3326

RE: Power Line Inspection and Safety
(City of San Saba) (Control No. 55983)
San Saba, Texas

Dear PUC:

Jacob Martin is submitting the Power Line Inspection and Safety Annual Report on behalf of the City of San Saba.

Contact Information

Name of Filing Party: City of San Saba
Name of Retail Public Utility: City of San Saba
Certificate of Convenience and Necessity (CCN)—if applicable: 10468
Point of Contact Name: Scott Edmonson
Email address: sansaba@centex.net
Phone Number: 325-372-5144

If you have any questions or need additional information, please feel free to contact Sarah Fernandez at sfernandez@jacobmartin.com or at 325-695-1070.

Sincerely,

Sarah Fernandez
JACOB | MARTIN



info@jacobmartin.com
www.jacobmartin.com



3465 Curry Lane
Abilene, TX 79606
325.695.1070

1508 Santa Fe, Suite 203
Weatherford, TX 76086
817.594.9880

1014 Broadway
Lubbock, TX 79401
806.368.6375



TBPE Firm #: 2448
TBAE Firm #: BR 2261
TBPLS Firm #: 10194493



Public Utility Commission of Texas

Annual Report

Required by 16 Texas Admin. Code § 25.97(f)

PROJECT NO. 55983

AFFECTED ENTITY: City of San Saba

General Information

Pursuant to 16 Texas Admin. Code § 25.97(f)(1), not later than May 1 of each year, each affected entity must submit this report for the preceding calendar year. The first report must be submitted not later than May 1, 2020.

Instructions

Answer all questions, fill-in all blanks, and have the report notarized in the affidavit. If you check no in part 1.a, leave parts 1.b-d blank.

Violations resulting from, and incidents, fatalities, or injuries attributable to a violation resulting from, a natural disaster, weather event, or man-made act or force outside of an affected entity's control are not required to be reported.

Affidavit

A representative of the affected entity must swear to and affirm the truthfulness, correctness, and completeness of the information provided by attaching a signed and notarized copy of the Affidavit provided with this form.

Filing Instructions

Submit four copies (an original and three copies) of the completed form and signed and notarized Affidavit to:

Central Records Filing Clerk
Public Utility Commission of Texas
1701 N. Congress Avenue
P.O. Box 13326
Austin, Texas 78711-3326
Telephone: (512) 936-7180

1. This part applies only to an affected entity that owns or operates overhead transmission facilities greater than 60 kilovolts.

a) Does this part 1 apply to you? Yes ☐ No ☒

b) Provide the number of identified occurrences of noncompliance with Public Utility Regulatory Act (PURA) § 38.004 regarding vertical clearance requirements of the National Electrical Safety Code (NESC) for overhead transmission facilities.

Not Applicable.

- c) Do you have actual knowledge that any portion of your transmission system is not in compliance with PURA § 38.004 regarding vertical clearance requirements of the NESC for overhead transmission facilities?

Not Applicable.

- d) Do you have actual knowledge of any violations of easement agreements with the United States Army Corps of Engineers relating to PURA § 38.004 regarding vertical clearance requirements of the NESC for overhead transmission facilities?

Not Applicable.

2. This part applies to an affected entity that owns or operates overhead transmission facilities greater than 60 kilovolts or distribution facilities greater than 1 kilovolt.

- a) Provide the number of fatalities or injuries of individuals other than employees, contractors, or other persons qualified to work in proximity to overhead high voltage lines involving transmission or distribution assets related to noncompliance with the requirements of PURA § 38.004.

There were "zero" fatalities or injuries of individuals other than employees, contractors, or other persons qualified to work in proximity to overhead high voltage lines involving transmission or distribution assets related to noncompliance with the requirements of PURA § 38.004.

b) Provide a description of corrective actions taken or planned to prevent the reoccurrence of fatalities or injuries described in subpart a), immediately above.

Not Applicable.

AFFIDAVIT

I swear or affirm that I have personal knowledge of the facts stated in this report or am relying on people with personal knowledge, that I am competent to testify to them, and that I have the authority to submit this report on behalf of the affected entity. I further swear or affirm that all statements made in this report are true, correct, and complete.



Signature

Scott Edmonson

Printed Name

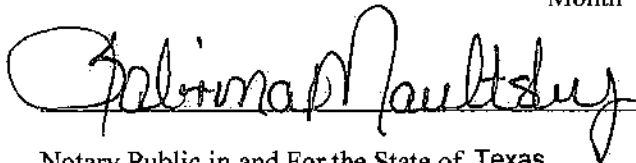
City Manager

Job Title

City of San Saba

Name of Affected Entity

Sworn and subscribed before me this 6th day of May, 2025,
Month Year

Notary Public in and For the State of TexasMy commission expires on 10/31/2025