



## **Filing Receipt**

**Filed Date - 2025-06-18 06:54:59 PM**

**Control Number - 58124**

**Item Number - 7**

# Ratepayer Comments/Requests To Intervene

Use this form to speak out if you disagree with the filing  
or want to get involved in the case.

If you wish to PROTEST the proposed rate change, you must complete this form and file it electronically using the PUCT Interactive Filer (<http://www.puct.texas.gov/industry/filings/E-FileInteractive.aspx>) or mail the original to:

Filing Clerk  
Public Utility Commission of Texas  
1701 North Congress Avenue  
P.O. Box 13126  
Austin, Texas 78711-3326

No hearing will be held and the rates will be effective as proposed unless petitions 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: Aaron Last Name: Faith  
Phone Number: 9182893685 Email Address: Afaith98@gmail.com  
Address: 173 bajo trl Newark, TX, 76071  
Location where service is provided (if different from mailing address): \_\_\_\_\_

Please fill out the following:

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.

**an increase is charge is unfounded as since I have been served by Aqua the water quality as been poor and un useable for drinking due to high chemical concentration**

☐ 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: \_\_\_\_\_

Si desea interaccionar en español, póngase en contacto al 1-888-762-6477.

Further assistance may be obtained by calling the PUCT at (512) 936-7128 or (888) 762-6477. Hearing- and speech-impaired individuals with text telephones (TTY) may contact the PUCT's Consumer Assistance Hotline at 512-936-7134 by first dialing 1-800-735-2989 or 7-1-1.

Information may also be obtained by visiting [www.puct.texas.gov](http://www.puct.texas.gov).