

**APPLICATION FOR A
CERTIFICATE OF CONVENIENCE AND NECESSITY
FOR AN ELECTRIC SERVICE AREA EXCEPTION**

DOCKET NO. _____

Submit seven (7) copies of the application and all attachments to:

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

**Application for an Electric Certificate of Convenience and Necessity
For a Service Area Exception**

This form should be used for an application for approval to serve a consuming facility outside of a utility's existing service area.

1. Applicant's Name: _____

Certificate Number: _____

Street Address: _____

Mailing Address: _____

Person to Contact:

Applicant

Other Affected Utility

Name: _____

Position: _____

Phone Number: _____

Facsimile Machine Number (if available for use in this proceeding): _____

Email Address (optional; do not provide it here if you do not want it to be publicly available): _____

Mailing Address: _____

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2. County:

List the county in which the consuming facility is located.

3. Municipality:

List any municipality in which the consuming facility is located.

4. Customer Request:

Provide as **Attachment A** a letter or sworn request for service from the customer.

5. Other Affected Utility:

Identify the utility that has the certificate of convenience and necessity for the area in which the customer is located. In order to meet the requirement of § 37.060(h) of the Public Utility Regulatory Act, Texas Utilities Code, Title II ("PURA"), provide as **Attachment B**, using the attached form, a sworn statement from the utility relinquishing its right to serve the consuming facility or parcel of land that the applicant seeks to serve.

6. Maps:

Provide as **Attachment C**, a map depicting the following:

- (a). Location of the consuming facility;
- (b). Applicant's existing service area boundary;
- (c). Applicant's existing utility facilities; and
- (d). Service area boundaries for all other electric service providers within two miles of the consuming facility.

7. PURA § 37.056(c) Criteria:

Please explain the effects that approval of this Application would have on the following factors:

- (1) the adequacy of existing service;
- (2) the need for additional service;
- (3) the effect of granting the certificate on the recipient of the certificate and any electric utility serving the proximate area; and
- (4) other factors, such as:
 - (A) community values;
 - (B) recreational and park areas;
 - (C) historical and aesthetic values;

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(D) environmental integrity;

(E) the probable improvement of service or lowering of cost to consumers in the area if the certificate is granted; and

(F) to the extent applicable, the effect of granting the certificate on the ability of this state to meet the renewable energy goal established by PURA § 39.904(a).

8. **Cost:**

Please provide an estimate of the cost of providing service to the consuming facility and describe any contribution the customer will provide to offset the cost.

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Attachment A – Request for Service Affidavit

Before me, the undersigned authority, on this day personally appeared [INSERT NAME], who is personally known to me, and first being duly sworn, deposed as follows:

My name is [INSERT NAME]. I am over the age of 17 years, of sound mind, capable of making this affidavit, and have personal knowledge of the facts herein stated.

I request service from [INSERT NAME OF APPLICANT] at [INSERT PHYSICAL ADDRESS] for [INSERT DESCRIPTION OF CONSUMING FACILITY, FOR EXAMPLE A NEW HOUSE]. Currently at [INSERT PHYSICAL ADDRESS] for [INSERT DESCRIPTION OF CONSUMING FACILITY], electric service is not provided [.] by [INSERT NAME OF UTILITY CURRENTLY CERTIFICATED TO PROVIDE SERVICE].

I understand that if my request is approved by the Public Utility Commission of Texas, I will no longer be able to obtain service from [INSERT NAME OF UTILITY CURRENTLY CERTIFICATED TO PROVIDE SERVICE] at [INSERT PHYSICAL ADDRESS] for [INSERT DESCRIPTION OF CONSUMING FACILITY] this Application is approved, I will be within [INSERT NAME OF APPLICANT] service area.

Affiant

SWORN TO AND SUBSCRIBED before me on this

_____ day of _____, 20__

Notary Public, State of Texas

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Attachment B – Affidavit of Relinquishment

Before me, the undersigned authority, on this day personally appeared [INSERT NAME], who is personally known to me, and first being duly sworn, on oath deposed as follows:

My name is [INSERT NAME]. I am over 17 years of age, of sound mind, and capable of making this affidavit. I have personal knowledge of the matters set forth in this application. I am currently employed as [INSERT JOB TITLE] for [INSERT NAME OF UTILITY]. I have authority to represent on behalf of [INSERT NAME OF UTILITY] the following:

[INSERT NAME OF UTILITY] agrees to relinquish its right to serve the [INSERT DESCRIPTION OF THE CONSUMING FACILITY OR PARCEL OF LAND] shown on the following Attachment C – Map, as requested by [INSERT CUSTOMER’S NAME.] in the Attachment A – Request for Service dated [Insert date.].

Affiant

[INSERT NAME AND TITLE]

On behalf of [INSERT NAME OF UTILITY]

SWORN TO AND SUBSCRIBED before me on this
____ day of _____, 20__.

Notary Public, State of Texas

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Attachment C - Map

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Attachment D – Affidavit Concerning Accuracy of Application

Before me, the undersigned authority, on this day personally appeared [INSERT NAME], who is personally known by me, and first being duly sworn, on oath deposed as follows:

My name is [INSERT NAME]. I am over 17 years of age, of sound mind, and capable of making this affidavit. I have personal knowledge of the matters set forth in this application. I am currently employed as [INSERT JOB TITLE] for [INSERT NAME OF UTILITY]. I have authority to represent on behalf of [INSERT NAME OF UTILITY] the following:

All information provided, statements made, and matters set forth in the application and any and all attachments thereto are true and correct to the best of my knowledge. If circumstances change or new information is discovered that would make any portion of the application or any attachment thereto incomplete or incorrect, a supplemental filing will be made within five working days of such discovery.

Affiant

[INSERT NAME AND TITLE]

On behalf of [INSERT NAME OF UTILITY]

SWORN TO AND SUBSCRIBED before me on this
____ day of _____, 20__.

Notary Public, State of Texas