



Control Number: 49827



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Public Utility Commission of Texas

Employee Training Report

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

COPY

2020 MAY -5 AM 10:02
PUBLIC UTILITY COMMISSION

PROJECT NO. 49827

AFFECTED ENTITY: City of Hallettsville

General Information

Pursuant to 16 Texas Admin. Code § 25.97(d)(2), not later than the 30th day after the date an affected entity finalizes a material change to a document or training program, the affected entity must submit an updated report. 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.

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. Provide a summary description of hazard recognition training documents you provide your employees related to overhead transmission and distribution facilities.

Power point presentatin given by Hi-Line Engineering and provided by Texas Electric Cooperatives.

- 2. Provide a summary description of training programs you provide your employees related to the National Electrical Safety Code for construction of electric transmission and distribution lines.**

Power point presentation given by Hi-Line Engineering and provided by Texas Electric Cooperatives.

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.

Grace Ward
Signature

Grace Ward
Printed Name

City Administrator/Secretary
Job Title

City of Hallettsville
Name of Affected Entity

Sworn and subscribed before me this 1st day of May, 2020
Month Year

Frances Bock
Notary Public in and For the State of TEXAS

My commission expires on 5-6-2024

