

## NEW BRAUNFELS UTILITIES Pole Attachment Standards Revision Request (PASRR)

PASRR Number		PASRR Title					
Date Received		Date Post	ted for Comments				
NBU to complete the information above the line							
PASRR requestor to complete the information below							
Pole Attachmen Section(s) Requ (Identify Section(s) by title revision)	uiring Revisio	า					
Type of Revision (See NBU Pole Attachment Standards for Definitions of Tier 1 and Tier 2 Revisions)		Tie	<ul><li>☐ Tier 1 Revision.</li><li>☐ Tier 2 Revision.</li><li>☐ Other: (explain)</li></ul>				
Revision Description  (A brief description of the scope/impact of the revision requested)							
Reason for Revision		☐ Fa	Addresses current operational issues.  Facilitates efficiencies or enhancements  Administrative  Regulatory or Legal requirements  Other: (explain)				



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Business Case					
(Include brief Business Case justification for the proposed revision)					
	•				
Cafata					
Safety					
	•				
Reliability					
	•				
Customer					
Service					
	•				
Other					

Requestor



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Name	
E-mail Address	
Company	
Phone Number	
Cell Number	

## **Proposed Standard Language Revision**

(Please provide proposed revision in 'red-line' format)

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