APPLICATION FOR UNDERGROUND/AERIAL WIRELINE OCCUPANCY

APPLICANT MUST ANSWER ALL APPLICABLE QUESTIONS AND RETURN THIS FORM TO:

HNTB Corporation

HNTB North Carolina, P.C.
343 E. Six Forks Rd, Suite 200
Raleigh, North Carolina 27609
Attn: Manager, NCRR Pipes and Wires
Occupancy Agreement Process

Phone: (919) 546-8997
Fax: (919) 546-9421

For NCRR / HNTB use only
File No. _____
NCRR ID #: _____

Plans for proposed installations are to be submitted to, and shall meet the approval of, North Carolina Railroad Company (NCR). Applicant shall enter into an occupancy agreement with NCRR before any construction activities commence on-site. Materials and installation are to be in strict accordance with specifications of the American Railway Engineering and Maintenance-of-Way Association (AREMA), North Carolina Railroad Company, and the Operating Railroads (Norfolk Southern Corporation and/or CSX Transportation as appropriate). The information submitted with this signed application and the required number of copies shall be per the Pipeline and Underground/Aerial Wireline Occupancy Application Instructions (NCRR Form 230) and Underground/Aerial Wireline Occupancy Applicant's Checklist (NCRR Form 240). The engineering and application fees to be submitted with this application are as stated in the current engineering fee schedule (HN-02).

Applicant/Project Owner Information

1. Legal Name of Applicant (party to agreement):_____
_____
2. Street Address of Applicant: _____
City_____ State_____ Zip_____
3. Mailing Address of Applicant (if different):_____
P.O. Box _____
City _____ State_____ Zip _____
4. Name of Applicant's Representative: _____
Title: _____
Telephone Number: (___) ___ - _____ Ext. _____ Fax Number: (___) ___ - _____
Email: _____
5. Name of Contact for Billing Purposes: _____
Title: _____
Telephone Number: (___) ___ - _____ Ext. _____ Email: _____
Billing Address: Street_____
City_____ State_____ Zip_____
6. Billing: Applicant prefers **[ ]** yearly or **[ ]** one-time non-assignable payment.
7. Applicant is a: **[ ]** Corporation – State of formation: _____; **[ ]** Limited Partnership – state of formation: _____;
[ ] General Partnership – state of formation: _____; **[ ]** Limited Liability Corporation – state of formation: _____;
[ ] Sole Proprietorship –owner: _____; **[ ]** Individual; **[ ]** Government Entity;
[ ] Other: _____

Applicant's Engineer/Consultant Information

8. Company Name: _____
9. Contact Person Name: _____ Title: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Telephone Number: (___) ____ - _____ Ext. _____ Fax Number: (___) ____ - _____
Email: _____

Project Information

10. Installation is: **[ ]** New **[ ]** Revision to existing **[ ]** Attachment to existing **[ ]** Upgrade to existing.
    Are there any agreements covering the installation? **[ ]** Yes **[ ]** No **[ ]** Do not know
    If yes, identify and attach copies: _____
11. Location of Installation:
    Nearest Street _____ Nearest Town _____
    County _____ State: NC
    Railroad Milepost (use lowest milepost) _____ + _____ Feet from Railroad Milepost Marker
    Latitude:_____ Longitude:_____
12. Will installation be located entirely within the confines of a public street? **[ ]** Yes **[ ]** No
    If yes, provide conclusive evidence for verification and show road name, number and width on drawing.
    Street width: _____ Feet Street Right-of-Way width: _____ Feet
    DOT/AAR Crossing No. _____
    Valuation Station of Crossing if Known: _____ Val. Map No. _____
    Road Authority Responsible for Street Maintenance_____
    Address: _____
    Contact Person:_____ Telephone No. (___) ____ - _____ Email: _____
13. Type of Installation: **[ ]** Cable TV **[ ]** Telephone **[ ]** Electric Power **[ ]** Fiber Optic
    [ ] Communications **[ ]** Other(Specify): _____
14. Installation is: **[ ]** Trunk **[ ]** Distribution **[ ]** Transmission **[ ]** Other
15. Conductors: Number: _____
    Material: **[ ]**copper **[ ]** aluminum **[ ]** fiber optic, fiber count _____
    AWG Gauge: _____
16. **[ ]** AC / **[ ]** DC: Voltage: _____ No. of Phases: _____ Amperes: _____ Hertz: _____
17. Maximum voltage: _____ Maximum Current: _____
18. Maximum fault to ground current: _____
19. Is this a **[ ]** Crossing **[ ]** Parallelism **[ ]** Both?
20. For a Crossing Underneath the Tracks: Number of tracks to be crossed: _____ Angle of Crossing: _____
    Total length of crossing on Railroad Right of Way: _____ Feet
21. For a Parallel Crossing: Begin at _____ feet N E S W of RR Milepost _____
    (Circle one)
    End at _____ feet N E S W of RR Milepost _____
    (Circle one)
    Total length on NCRR right of way: _____ Feet
    Length Parallel: _____ Feet Length Crossing: _____ Feet
    Min. distance from centerline of nearest track: _____ Feet
22. Will the installation connect to an existing facility within the NCRR right-of-way? **[ ]** Yes **[ ]** No
    If yes, identify owner: _____
23. Type and quantity of facilities to be installed on NCRR right-of-way: **[ ]** Manholes **[ ]** Handholes **[ ]** Pull Boxes
    [ ] Other(Identify) _____
    Distance from nearest track: _____ Feet
    Show locations and dimensions on the drawings.
24. Number of new poles to be installed on NCRR right-of-way: _____
25. Number of existing poles to be utilized on NCRR Right-of-way: _____
26. Distance from butt of pole to nearest rail of track: _____ Feet
27. Identify each intended user of the installation: _____
28. Name of contractor: _____
29. Proposed installation date: _____
30. Define any special specifications of the installation: _____

_____

Underground Facilities

31. Total buried length on NCRR right-of-way: _____ Feet
32. Total Number of Conduits: _____ Number empty: _____ Number filled: _____
33. Number of cables or lines in each conduit: _____
34. Number of conductors in each cable or line: _____
35. Encasement Material: _____ Outside diameter: _____ Wall thickness: _____
36. Bury depth:
    From base of rail to top of casing: _____ Feet
    Minimum depth on right-of-way but not beneath tracks: _____ Feet
    Below ditches: _____ Feet

Aerial Facilities

37. Total aerial length on NCRR right-of-way: _____ Feet
38. Number of cables or wires: _____
39. Number of pole lines crossed: _____
40. Type of wire supports: _____ Size: _____ False dead ends: _____
41. Height of wires above top of rail at 60ºF: _____ Feet
42. Sag in Spans at 60ºF: _____ Feet
43. Height of wires above Railroad communication and signal wires at 60ºF: _____ Feet
44. Horizontal distance from railroad communication and signal wires: _____Feet
45. Height of wire supports above ground: _____ Feet

Fiber Optic Facilities

46. Number of fibers per cable: _____
47. Identify each intended user of the conduit/cable: _____

If the application is approved, the Applicant agrees to reimburse the North Carolina Railroad and the Operating Railroads for any cost incurred by the North Carolina Railroad and the Operating Railroads incident to installation, maintenance, and/or supervision necessitated by this installation, and further agrees to assume all liability for accidents or injuries which arise as a result of this installation.

_____ _____
(Date) (Signature and Title of Officer Signing Application)

Please Type or Print:_____(____)_____
Name Title Telephone Number