

APPLICATION FOR RIGHT OF ENTRY

1. Name of Licensee: _____
(Name to be shown on document)
2. If a Corporation, name of Corporation: _____
(Exact Name of Corporation)
3. A corporation of the state of _____
(State Of Incorporation)

NOTE: The corporate name of a company should be exactly as stated in its Articles of Incorporation. Type of Corporation, if other than a normal business corporation (this MUST be shown) *Municipal, quasi-municipal, body politic, etc.*

4. If Individual, name of individual: _____
5. City & State of Individual: _____
6. If Individual or Corporation doing business under a trade name, please tell us
(If Doing Business As or Trade Name)

7. If a Partnership, name of partnership: _____
8. A partnership consisting of: _____ and _____
_____ all of _____
(City & State)
9. Name, email and mailing address of individual to whom instrument is to be sent for execution:

10. Address (billing address) to be shown on document if different than that shown in Item 9:

11. Name, phone number, email, and fax number of individual to contact in event of questions:

12. Time period of your project and use of the Railroad Company's property?
(Proposed start/stop dates).

Start _____ Stop _____

13. When do you need to receive this agreement from the Railroad Company?
(Please allow 30-45 days for processing of this request)

14. Will there be any excavation involved? *Yes/No*
(If yes, include shoring plans in compliance with attached Railroad Company standards).

15. Site Location *(City, County, & State):*

16. Railroad Site Location Information: *(Railroad Mile Post, Subdivision, or any other pertinent location information. Attach map/site plan)*

17. Purpose of your request: *(This must be detailed and complete, attach engineering plans, shoring plans, if applicable, and details to support)*

The administrative and permit fee of \$750.00 will need to accompany the application. Application will go through approval process and permit will be sent to you upon approval after the Railroad has received all pertinent insurance certificates. Payment and certificates go to the appropriate Railroad.

Additional fees and charges may be applicable to your request. These charges cannot be determined until your project is approved.

Signature: _____

Title: _____

Date: _____