

APPLICATION FOR RIGHT-OF-ENTRY

Mail Application, Maps, and Fee(s) To: CSX Transportation, Inc. ATTN: Corridor Occupancy Services 6737 Soutpoint Drive South, J-180 Jacksonville, FL 32216

	Ja	acksonville, i	-L 32216								
Application Date:	e: CSXT File/Agreement Number:										
(CSX Use Only)											
SECTION1: PROJECT IN	NFORMATION		Т	O BE COMP	PLETED BY APPLICANT						
ALL FIELDS MAR	RKED WITH AN ASTERICI	K (*) ARE I	REQUIRED FIELDS	AND MUST	BE COMPLETED						
Legal Name of Party Performing the Work (required)											
*Owner's Complete Legal Company Name:											
Legal Address (1):											
Legal Address (2):											
City:		State:		Zip:							
*Business Type:	☐ Corporation	Limite	d Liability Company		Limited Partnership						
	☐ Municipality	Limite	ed Liability Partnership		Seneral Partnership						
*State of Incorporation:		Other Bus	Other Business Type - Describe:								
		Billing Ad	dress								
□(Check box if same as above	ve); if not, please complete be	low.									
Billing Address (1):											
Billing Address (2):											
City:		State:		Zip:							
	Proje	ect Contact	Information								
*Contact Name:			Contact Title:								
Office Phone:			Mobile Phone:								
*Email:			*24/7 Emergency Phone:								
SECTION 2: PROJECT F	REFERENCE		Т	O BE COMP	PLETED BY APPLICANT						
Is this a time extension reque	est or a request to add an add	itional location	on to an existing right-o	f-entry agreen	nent?						
☐ Yes Prov	vide Agreement # and/or date:										
□ No											
Is this project related to anot	her transaction/project with CS	SX:									
□ Yes	Describe:										
□ No											
Provide Applicant's Project R											

SECTION 3	: PROJECT L	OCATION/SC	OPE/DESC	RIPTION			TO BE COMPLETED BY APPLICANT
				Project Lo	cation		
*City:			*County:				*State:
In addition to	the above locat	tion infomraiton,	a minimum of	one of the l	oelow locati	on referen	ces must be provided for processing:
		Latitude:			Longitude:		
		feet _		(Direction)	from AAR/[OOT Road	Crossing Number
		feet _		(Driection)	from CSX F	Railroad Mi	lepost Number
				Project S	соре		
Check box to	indicate type of	f entry request:					
	General Acce	ess:					Environmental Investigation:
	Bridge Inspect	tion (if checked,	must include I	DOT Crossii			Ground Water Sampling
	Engineering						Sediment Sampling
	House Moving	1					Soil Sampling
	Staging Area						Remediation
	Geotechnical	Soil Borings					Monitoring Wells # of Wells:
	Surveying						If state or Federal Site, provide
	Other (Non-Co	onstruction)					Site #
	Railroad Ope	rations:					
	How close will	the proposed ac	ctivity be to the	e nearest ra	Iroad track:		
	Will the propos	sed activity requi	ire crossing ra	ilroad track((s):		
	Yes		Describe:				
	□ No						
			F	Project Des	cription		
*Detailed	Scope of Work:						
	*E · ·						
	*Equipment:						
Propose	ed Project Start						
	Date:						
Proposed P	roject Duration:						
ls T	his Project Fede	erally Funded:	Yes	□ No	Fed	deral Projec	ct Reference #:
Location map	showing project	ct location at a lo	cal street leve	el is required	. Please at	tach with s	ubmittal of this application.