APPLICATION FOR UNDERGROUND/AERIAL WIRELINE OCCUPANCY

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

HNTB Corporation

HNTB North Carolina, P.C.
121 West Trade Street, Suite 2050
Charlotte, North Carolina 28202
Attn: Manager, NCRR Pipes and Wires
Occupancy Agreement Process

Phone: (704) 372-8020
Fax: (704) 372-7097

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):
   Street _____
   P.O. Box _____
   City _____ State_____ Zip _____
4. Name of Applicant's Representative: _____
   Title: _____
   Telephone Number: (___) ___ - _____ Ext. _____ Email: _____
   Fax Number: (___) ___ - _____ Email: _____
5. Billing Address: Street_____
   City_____ State_____ Zip_____
6. Name of Contact for Billing Purposes: _____
   Title: _____
   Telephone Number: (___) ___ - _____ Ext. _____ Email: _____
7. Billing: Applicant prefers ( ) yearly ( ) one time non-assignable payment.
8. Applicant is a: [ ] Corporation – State of formation: ___; [ ] Limited Partnership – state of formation: ___; [ ] General Partnership – state of formation: ____
   [ ] Sole Proprietorship – Give name of owner: _____
   [ ] Individual [ ] Government Entity
   [ ] Other: _____

Applicant's Engineer/Consultant Information

9. Company Name: _____
10. Contact Person Name: _____ Title: _____
    Street Address: _____
    City: _____ State: _____ Zip: _____

Applicant's Engineer/Consultant Information (Cont.)

Telephone Number: (___) ___ - _____ Ext. _____
Fax Number: (___) ___ - _____ Email: _____

Project Information

11. Installation is: [ ]New [ ]Revision to existing [ ]Attachment to existing
[ ]Upgrade to existing.
Are there any agreements covering the wire line? [ ]Yes [ ]No [ ]Do not know
If yes, identify and attach copies: _____
12. Location of Installation:
Nearest Street _____ Nearest Town _____
County _____ State _____
Railroad Milepost Reference: _____ Feet N E S W of Milepost _____
(Circle one)
Latitude: _____ Longitude: _____
13. 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
Name: _____
Address: _____
Contact Person:_____ Telephone No. (___) ____ - _____
14. Type of Installation: [ ]Cable TV [ ]Telephone [ ]Electric Power [ ]Fiber Optic
[ ]Communications [ ]Other(Specify): _____
15. Installation is: [ ]Trunk [ ]Distribution [ ]Transmission [ ]Other
16. Conductors: Number: _____
Material: [ ]copper [ ]aluminum [ ]fiber optic, fiber count _____
AWG Gauge: _____
17. [ ]AC /[ ]DC: Voltage: _____ No. of Phases: _____ Amperes: _____ Hertz: _____
18. Maximum voltage: _____ Maximum Current: _____
19. Maximum fault to ground current: _____
20. Is this a [ ]Crossing [ ]Parallelism [ ]Both?
21 For a Crossing: Number of tracks to be crossed: _____ Angle of Crossing: _____
Total crossing on Railroad Right of Way: _____ Feet
22. For a Parallelism: 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: _____
Length Parallel: _____ Length crossing: _____
23. Will the installation connect to an existing facility within the NCRR right-of-way?
[ ]Yes [ ]No If yes, identify owner: _____
24. 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.
25. Number of new poles to be installed on NCRR right-of-way: _____
26. Number of existing poles to be utilized on NCRR Right-of-way: _____
27. Distance from butt of pole to nearest rail of track: _____ feet
28. Identify each intended user of the installation: _____
29. Name of contractor: _____
30. Proposed installation date: _____
31. Define any special specifications of the installation: _____
_____

Underground Facilities

32. Total buried length on NCRR right-of-way: _____
33. Total Number of Conduits: _____ Number empty: _____ Number filled: _____
34. Number of cables or lines in each conduit: _____
35. Number of conductors in each cable or line: _____
36. Encasement Material: _____ Outside diameter: _____ Wall thickness: _____
37. 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

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

Fiber Optic Facilities

47. Number of fibers per cable: _____
48. 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