

APPLICATION FOR PLACEMENT OF A WATER / SEWER PIPELINE

APPLICANT:

Company _____

Mailing Address _____

City _____ Province _____ Postal Code _____

Contact Person _____

Phone # _____ Fax # _____ e-mail _____

Member of a one-call system? ☐ Yes ☐ No
(e.g. Alberta First Call)**OWNER:**

Company _____

Mailing Address _____

City _____ Province _____ Postal Code _____

Phone # _____ Fax # _____ e-mail _____

FACILITY:Type: _____ File / Drawing No. _____
(e.g. water / sewer)**CARRIER PIPE**

Pipe Type _____ Max. Operating Pressure (kPa) _____

Outside Diameter (mm) _____ Wall Thickness (mm) _____

CASING PIPE

Outside Diameter (mm) _____ Wall Thickness (mm) _____

CONSTRUCTION LOCATIONStarting Point _____ Ending Point _____
(legal location) (legal location)

Highway(s) Affected: _____

PROPOSED FACILITY PARALLELS HIGHWAY NO. _____ FROM - TO

____ ¼ SEC	____ TWP	____ RGE	____ W	____ M	TO	____ ¼ SEC	____ TWP	____ RGE	____ W	____ M
____ ¼ SEC	____ TWP	____ RGE	____ W	____ M	TO	____ ¼ SEC	____ TWP	____ RGE	____ W	____ M

PROPOSED FACILITY CROSSES HIGHWAY NO. _____ BETWEEN / IN THE

____ ¼ SEC	____ TWP	____ RGE	____ W	____ M	AND	____ ¼ SEC	____ TWP	____ RGE	____ W	____ M
____ ¼ SEC	____ TWP	____ RGE	____ W	____ M	AND	____ ¼ SEC	____ TWP	____ RGE	____ W	____ M

COMMENTS:

I _____ hereby certify that the information given on this form is full and complete and is, to the best of my knowledge, a true statement of facts relating to this application for placement of a water/sewer pipeline.

(Signed) _____ (Date) _____