

**All work to meet
TCSS and NCTCOGs
Standards**



City of Terrell
Engineering Dept.
201 E. Nash St./ P.O. Box 310
Terrell, Texas 75160
Ph. (972) 551-6607
Fax (972) 551-6620
e-mail:
engineering@cityofterrell.org

**CITY OF TERRELL
CITY RIGHT-OF-WAY/EASEMENT USE AND/OR EXCAVATION PERMIT**

(For Franchised Utility Companies and their Subcontractors) Markings
Blue-Water Pink-Storm Water Green-Sanitary Sewer

Date: _____ Pavement Cut? ____ Yes ____ No

Person Applying for Permit: _____

Project Location: _____

Reason for Work: _____

Anticipated Start Date: _____ Estimated Finish Date: _____

Franchise Utility Information:

Franchised Utility Name: _____

Franchise Utility Representative: _____

Emergency Phone No.: _____ Email Address: _____

Subcontractor Information:

Subcontractor's Name (if any): _____

Business Phone No.: _____

Subcontractor's Representative: _____

Emergency Phone No.: _____

Please fax this form to the City of Terrell Engineering Dept. at (972) 551-6620.

Do NOT Write Below Office Use Only

Locate Areas _____

City Employee: _____ Date Located: _____

Engineering Dept : _____ Date _____ Time: _____